



#CLIFighters

For Immediate Release

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CDC Recognizes and Codifies Critical Limb Ischemia, Chronic Limb Threatening Ischemia in ICD-10-CM Effective Oct. 1, 2020

Major Step for Tracking Patient Treatments and Outcomes for Deadly Diseases

Washington, October 5, 2020 – A coalition organized by the CLI Global Society announced its proposal to distinctly recognize "Critical Limb Ischemia" and "Chronic Limb Threatening Ischemia" in the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) was approved by the CDC and went into effect Oct. 1.

The ICD-10-CM is a worldwide standard reference set of disease codes used to report medical services provided to patients. The announcement marks a major step forward in tracking patient treatments and outcomes for CLI and CLTI, which affect millions of patients globally.

The CLI Global Society worked in close partnership with the vascular specialist community to develop the proposal. Coalition members include:

- Dr. Robert Lookstein, CLI Global Society (CLIGS)
- Dr. Barry T. Katzen, (CLIGS)
- Dr. Sean Roddy, Society for Vascular Surgery (SVS)
- Dr. Mitchell Weinberg, Society for Vascular Medicine (SVM)
- Dr. Bulent Arslan, Society of Interventional Radiology (SIR)
- Dr. Mehdi Shishehbohr, Society for Cardiac Angiography and Intervention (SCAI)

The goal of this initiative is to support coding professionals, educators, compliance staff and physicians to identify and accurately report CLI and CLTI in clinical documentation, electronic medical records and medical billing in order to track and monitor patient treatments and outcomes in the future.

"This effort is a first step in building awareness of the complexity associated with caring for patients who suffer from CLI within public and commercial payers and the broader healthcare community," said Dr. Barry Katzen, board chair of the CLI Global Society. "These dedicated codes, now newly identified for CLI, are critical in our goal to improve quality of life by preventing amputations and death due to CLI."

Dr. Robert Lookstein, chair of the Vascular Societies Workgroup and CLI Global Society board member, acknowledged the collective effort of his colleagues, "who came together to prioritize the need for a well-defined and accessible method to identify, report and track CLI for the benefit of patients who suffer from this disease.

"We also look forward to continued partnership as we launch initiatives to educate our membership, our hospitals and healthcare provider staff regarding these changes," Lookstein

explained. “They have the potential to positively impact the care we provide to these extremely vulnerable patients across the United States and around the world.”

CLI and CLTI are advanced forms of peripheral artery disease (PAD), a common circulation problem that occurs when arteries that carry blood throughout the body become narrowed or blocked, restricting blood flow to legs and feet. Those who smoke, have diabetes or chronic kidney disease or suffer from high blood pressure or high cholesterol are susceptible to CLI and its complications. Left untreated, CLI can lead to tissue loss, gangrene, amputations and eventually death.

“The statistics are grim,” said Dr. Jihad Mustapha, founding board member of the CLI Global Society. “We know 60% of patients who receive an amputation due to PAD or CLI die within two years – this is higher than the five-year mortality rate for patients with breast, colon and prostate cancer.

“In order to fight this deadly disease, we need to have accurate data. This seemingly small change to medical coding will allow us to save countless limbs – and lives.”

About CLI Global Society

The CLI Global Society was established in 2016 by passionate leaders to address the unmet need of CLI. The intent of the society is to work toward a coalition of global organizations that share an interest in CLI to facilitate implementation of goals that will lead to ideal management of this impactful problem to improve quality of life and longevity of patients by preventing amputations and death due to CLI.

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