

CLAIM CLARITY ACADEMY

FY 2027 ICD-10-CM UPDATE GUIDE

What Changed • What Matters • What to Check Before October 1

EFFECTIVE OCTOBER 1, 2026

FY 2027 ICD-10-CM applies to healthcare services provided October 1, 2026 through September 30, 2027.

FREE PROFESSIONAL RESOURCE

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Start Here

The FY 2027 ICD-10-CM code set becomes effective October 1, 2026. This quick-reference guide is designed to help coding and revenue-cycle professionals identify the changes that deserve attention, update internal resources, and know where to verify the complete official code set.

FY 2027 AT A GLANCE

190 new ICD-10-CM diagnosis codes • 30 deleted diagnosis codes • 74,879 total diagnosis codes for FY 2027

Important: This guide is a curated update resource, not a replacement for the complete ICD-10-CM Tabular List, Alphabetic Index, Addendum, or Official Guidelines for Coding and Reporting.

The date matters

- Use FY 2027 ICD-10-CM codes for services provided from October 1, 2026 through September 30, 2027.
- The October 1, 2026 release replaces the April 1, 2026 FY 2026 release.
- Update encoders, EHR/PMS references, charge workflows, internal job aids, edits, and education before the effective date.

Your 5-minute readiness check

- Confirm your coding software/vendor has the FY 2027 update scheduled.
- Identify deleted codes currently used by your organization and map the appropriate replacement workflow.
- Review new specificity requirements that may require stronger provider documentation.
- Update internal cheat sheets, templates, favorites, edits, and training materials.
- Communicate the October 1 effective date to coding, billing, CDI, clinical, and revenue-cycle teams.

Selected FY 2027 Highlights

The update spans multiple chapters. The examples below are selected high-impact areas to put on your review list; they are not an exhaustive list of all FY 2027 changes.

Area	What to Review
Pregnancy, childbirth & puerperium	New specificity includes the new O31.4- category for continuing pregnancy after vanishing twin syndrome. FY 2027 adds 33 codes within this category, structured by trimester and fetus.
Ectopic pregnancy	The FY 2027 O00.- structure includes new, more specific pathways for interstitial, cesarean-scar, cervical, and cornual ectopic pregnancy. Review the official FY 2027 Tabular List for the exact reportable code supported by the documented site, intrauterine-pregnancy status, and laterality when applicable.
Neoplasms	New codes add specificity for secondary malignant neoplasms, including larynx, pharynx, and oral cavity.
Pelvic disease	New K6A- category expands reporting for diseases of the pelvis, including pelvic abscess specificity.
Toxic effects	New codes expand reporting for toxic effects of cycloparaffins.
Other chapters	FY 2027 changes extend beyond the examples in this guide. Use the official FY 2027 Addendum, Tabular List, and Index to identify changes relevant to your specialty.

Tip: When a familiar code becomes non-billable or is replaced by more specific choices, do not default to an unspecified option without first reviewing the updated Tabular List and the documentation available.

OB Spotlight: Vanishing Twin Syndrome

One of the clearest Chapter 15 changes is the new O31.4- subcategory for continuing pregnancy after vanishing twin syndrome of one fetus or more.

WHY THIS MATTERS

The new structure adds specificity by trimester and fetus. That means accurate code selection depends on documentation that supports the pregnancy stage and the fetus to which the code applies.

Coding workflow reminder

- Start with the Alphabetic Index, then verify the code in the Tabular List.
- Confirm trimester from provider documentation or documented weeks of gestation, consistent with the Official Guidelines.
- Review required 7th-character/fetus specificity when applicable.
- Use Chapter 15 codes only on the maternal record.
- Remember that Chapter 15 codes generally have sequencing priority over codes from other chapters unless an applicable guideline directs otherwise.

Documentation conversation

When new specificity enters the code set, the operational question is not only “Do our coders know the new code?” It is also “Does the clinical documentation reliably support the new level of specificity?” Use the update as an opportunity to identify documentation gaps before they become claim rework.

OB Spotlight: Ectopic Pregnancy

The FY 2027 O00.- structure includes expanded specificity for ectopic pregnancy, including interstitial, cesarean-scar, cervical, and cornual ectopic pregnancy pathways. Depending on the pathway, the FY 2027 structure distinguishes details such as presence or absence of an intrauterine pregnancy and, for selected codes, laterality. Verify the exact reportable code in the FY 2027 Tabular List before claim submission.

DO NOT MEMORIZE A STATIC LIST

Build the habit of verifying current codes in the official FY 2027 files. Code sets change; a reliable verification workflow lasts longer than a cheat sheet.

Chapter 15 Rules Still Matter

New codes do not replace the foundational obstetric coding rules. The FY 2027 Official Guidelines continue to emphasize:

- Chapter 15 codes (O00-O9A) are used for obstetric cases and generally have sequencing priority over codes from other chapters.
- Chapter 15 codes are used only on the maternal record, never on the newborn record.

- Trimester assignment is based on provider documentation of trimester or number of weeks for the current encounter.
- When delivery occurs during the current admission and an 'in childbirth' option exists for the complication being coded, the 'in childbirth' code is assigned.
- If the provider documents that the pregnancy is incidental to the encounter, Z33.1 is used instead of a Chapter 15 code.

Team Double-Check™ habit: Never let a familiar rule or remembered code substitute for checking the current-year Tabular List, Index, notes, and guidelines.

FY 2027 Implementation Checklist

✓	Review Area	Action
☐	Code set	Load/verify FY 2027 ICD-10-CM in coding systems and references.
☐	Deleted codes	Identify any deleted codes used in your organization and determine the correct replacement pathway.
☐	New specificity	Flag new codes that require additional clinical detail or laterality/site/trimester/fetus specificity.
☐	Documentation	Review whether templates and provider documentation support the new specificity.
☐	Edits	Update claim edits, scrubber logic, work queues, favorites, macros, and internal rules.
☐	Payer impact	Review payer-specific bulletins and medical policies for October 1 changes.
☐	Education	Provide targeted education to coders, billers, CDI, providers, and operational teams.
☐	Monitoring	Track denials and coding-related edits after October 1 for patterns tied to the update.

Keep the Official Sources Close

For final code assignment and implementation decisions, verify against the current official files.

CMS ICD-10 page: <https://www.cms.gov/medicare/coding-billing/ICD-10-codes>

CDC/NCHS ICD-10-CM files: <https://www.cdc.gov/nchs/icd/icd-10-cm/files.html>

FY 2027 Official ICD-10-CM Coding Guidelines: Available from the CMS/CDC FY 2027 ICD-10-CM file pages

FY 2027 Addendum / Tabular List / Index: Available from the CMS/CDC FY 2027 ICD-10-CM file pages

What's Next from Claim Clarity Academy?

FY 2027 ICD-10-CM is only one part of the 2027 coding transition. Major CPT maternity-care reporting changes are scheduled for January 1, 2027. Claim Clarity Academy is developing focused education to help coders and revenue-cycle teams understand what is changing and prepare their workflows before the effective date.

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Educational and coding-use notice: This guide is an educational summary of selected FY 2027 ICD-10-CM changes. It is not an exhaustive code list and is not a substitute for the official FY 2027 ICD-10-CM Alphabetic Index, Tabular List, Addendum, Official Guidelines for Coding and Reporting, payer policy, or organization-specific policy. Final diagnosis-code assignment must be verified in the official code set for the applicable date of service/encounter and supported by the health record. Do not submit a claim based solely on this guide.

Prepared September 2026 • Current for the FY 2027 release effective October 1, 2026

Verification Record — Triple-Check Edition

Verification date: September 18, 2026

Source hierarchy used: Federal first-party sources only for claim/coding assertions: CMS, CDC/NCHS, the FY 2027 Official ICD-10-CM Guidelines, and the FY 2027 federal final rule. AMA was not used as an ICD-10-CM authority because AMA maintains CPT, not ICD-10-CM.

Effective-date check: Verified: FY 2027 ICD-10-CM applies to healthcare services from October 1, 2026 through September 30, 2027, and replaces the April 1, 2026 FY 2026 release.

Code-count check: Verified in the FY 2027 federal final rule: 190 ICD-10-CM additions, 30 deletions/invalidated diagnosis codes, and 74,879 total ICD-10-CM diagnosis codes effective October 1, 2026.

Chapter 15 rules check: Verified against the FY 2027 Official Guidelines: Chapter 15 sequencing priority; maternal-record-only use; trimester assignment from provider documentation; 'in childbirth' selection when the classification provides that option; 7th-character fetus identification where applicable; and Z33.1 only when the provider documents the pregnancy as incidental.

Vanishing-twin check: Verified in the FY 2027 CMS code structure: O31.4- identifies continuing pregnancy after vanishing twin syndrome of one fetus or more, with trimester and fetus-specific child codes.

Ectopic-pregnancy check: Verified in the FY 2027 CMS code structure: expanded O00.- pathways include interstitial, cesarean-scar, cervical, and cornual ectopic pregnancy, with additional specificity depending on the code family.

Claim-use safeguard: The guide now explicitly instructs learners to verify final code assignment in the official FY 2027 Index/Tabular List and not to submit a claim based solely on the guide.

Primary Official Sources

- CMS ICD-10 FY 2027 files: <https://www.cms.gov/medicare/coding-billing/ICD-10-codes>
- CDC/NCHS ICD-10-CM FY 2027 release files: <https://www.cdc.gov/nchs/icd/icd-10-cm/files.html>
- FY 2027 ICD-10-CM Official Guidelines for Coding and Reporting:
<https://www.cms.gov/files/document/fy-2027-icd-10-cm-coding-guidelines.pdf>
- FY 2027 federal final rule (code-count totals):
<https://www.govinfo.gov/content/pkg/FR-2026-08-04/pdf/2026-15833.pdf>

Publishing control: Recheck the CMS/CDC FY 2027 file pages immediately before public release for any errata or replacement files. If an erratum changes a code or instruction cited in this guide, revise the guide before distribution.