Transition to ICD-10-CM Fundamentals

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Objectives

- Identify the similarities and differences between ICD-9-CM and ICD-10-CM
- Discuss ICD-10-CM Code Conventions and Guidelines;
- Highlight ICD-10-CM Chapter Differences;
- Apply ICD-10-CM to common home health scenarios;
- Detail planning considerations to effectively prepare for implementation of ICD-10-CM
- Take Away:

CMS ICD-10-CM Quick Reference Guide

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Housekeeping Information

Handout Materials & Take Away Tools

□ Webcast Participants

If you haven't done so already, you can download the handouts and tools in the handout box to the left of your screen. At any time during the presentation – you can "pause" the program. Go to the lower left of the screen and click on the "pause" button. Please note you may have to scroll down on the page to see the "pause' button.

DVD Participants

The main contact should have received the handout materials link in the receipt email that was issued upon completion of purchase. If you still need a copy of the handouts, ask your contact or email RBC at **rbc@netstep.net**.

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ICD-10-CM Myths & Facts

- MYTH: October 1, 2013 is a flexible implementation date
- <u>FACT</u>: HIPAA requires all covered entities to implement the new ICD-10-CM code set on October 1, 2013
- MYTH: State Medicaid Programs will not be required to update their systems to ICD-10-CM
- <u>FACT</u>: CMS will work with all State Medicaid Programs to ensure that ICD-10-CM is implemented on time
- MYTH: Increased number of codes makes ICD-10-CM too difficult to use
- <u>FACT</u>: ICD-10-CM utilized a number of medical specialty societies to develop the code system. Greater precision provides logical structure and code selection, to make code selection easier.
- MYTH: There will be no hard copy of ICD-10-CM due to volume & size
- <u>FACT</u>: ICD-10-CM and ICD-10-PCS code manuals are already available
 Source: CMS.hhs.gov

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History & Use

- The International Classification of Diseases, Clinical Modification (ICD-10-CM)
 - a. Based on WHO (1994)
 - b. Classifies morbidity
- NCHS modified for use in the United States
- **ICD-10-CM Committee**
 - a. American Hospital Association
 - b. National Institute for Health Statistics
 - c. Centers for Medicare & Medicaid
 - d. American Health Information Management
- WHO Owns and Copyrights ICD-10
 - a. October 1, 2013 in U.S. (ICD-10-CM)
 - b. No delays or grace periods

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Partial Code Freeze

- Partial Code Freeze Timelines
 - □ Annual updates 10/11 (Both ICD-9-CM & ICD-10-CM)
 - □ New diagnoses & technology updates only 10/12 (Both)
 - □ New diagnoses & technology updates only 10/13: ICD-10-CM
 - **□ Retire ICD-9-CM 10/13**
 - □ Regular Updates to ICD-10-CM
- Providers & Vendors Prepare with 5010
 Conversion
 - □ Conversion implemented 1/2012
- Procedures, CPT & HCPCS Codes
 - □ ICD-10-CM Procedures for Acute Inpatient Only

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Why is Coding So Important?

- <u>Statistical data</u> Track and trend best practice variances; volume; complications; treatment patterns
- Research for enhanced outcomes and treatments
- Reflects patient acuity for injury or illness; Plan of Care centers on Codes and Severity Indices
- Medical necessity determination
- <u>PPS Payment</u> HHRG calculation

Patient's Story

- Resource allocation
- Risk Adjustment for Quality Outcomes

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The Reality of ICD-10-CM

- ICD-10-CM (The Next Generation)
 - □ Provides specificity & detail not in ICD-9-CM
- Final Rule: January 16, 2009
 - **□ HIPAA Transaction Code Sets**
 - □ HITECH: 5010 Electronic Format
 - □ Access: http://edocket.access.gpo.gov/2009/pdf/E9-743.pdf
- Replaces ICD-9-CM
 - □ Aligns with worldwide code systems
 - □ Enhanced accuracy and specificity (granularity)
 - □ Higher quality healthcare data for research & outcomes
 - □ Ability to meet HIPAA electronic code set regulations

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Compare: Number of Codes

- Diagnoses
 - \Box ICD-9-CM = 14,315
 - \Box ICD-10-CM = 69,099
- Procedures
 - \Box ICD-9-CM = 3,838
 - \Box ICD-10-PCS = 71, 957
- **Two Code Manuals**
 - □ ICD-10-CM Diagnosis Manual (Volumes 1 & 2)
 - □ ICD-10-PCS Procedure Manual (Volume 3)

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Compare Code Sets

ICD-9-CM

- 3-5 characters
- First character is numeric or alpha (V or E)
- Characters 2-5 are numeric
- Always at least 3 characters
- Use of decimal after 3 characters

ICD-10-CM

- 3-7 characters
- Character 1 is alpha (all letters except U are used)
- Character 2 is numeric
- Characters 3-7 are alpha or numeric
- Use of decimal after 3 characters
- Use of dummy placeholder "x"
- Alpha characters are <u>not</u> case sensitive

ICD-10-CM Format

- Tabular List & Index
 - □ Chapters in Tabular Similar to ICD-9-CM
 - □ Some Chapters are re-structured
 - □ Sense organs (eye & ear) separated from Nervous System
- Alphabetical Index
 - □ Alpha Index of Diseases & Injuries
 - □ Alpha Index of External Causes
 - □ Table of Neoplasms
 - □ Table of Drugs & Chemicals
- Some Tables Eliminated
 - **□** HTN Table

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ICD-10-CM Formats

- Format Comparison
 - □ Index and Tabular
- Index
 - □ Alphabetic Index of Diseases & Injuries
 - □ Alphabetic Index of External Causes of Injuries
 - □ Table of Neoplasms
 - □ Table of Drugs and Chemicals of Indented Format as in ICD-9-CM
- What's Missing
 - **□** HTN Table
- Download: www.cdc.gov/nchs/icd/icd10cm.htm#10update

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Index Features

- "-" at the end of a code means the Tabular contains multiple code options
 - □ Nontraumatic intracranial hemorrhage NEC 169.25-
 - □ Go to the Tabular to complete code selection
- Brackets show manifestation codes
 - □ Apoplexia
 - □ Uremic **N18.9** [**I68.8**]
- Brackets show abbreviations & alternative wordings
 - □ K50 Crohn's disease [regional enteritis]
- <u>"With"</u> sequenced immediately following main term, not in alphabetic order

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ICD-10-CM Index Sample

- Hemiplegia G81.9-
 - alterans facialis G83.89
 - -ascending NEC G81.90
 - - spinal G95.89
 - -congenital (cerebral) G80.8
 - - spastic G80.2
 - -embolic (current episode) I63.4-
 - -flaccid G81.0-
 - following
 - - cerebrovascular disease I69.959
 - ---cerebral infarction I69.35-
 - ---intracerebral hemorrhage I69.15-

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ICD-10-CM Tabular Format

Tabular Format

- □ Categories; subcategories; codes
- □ *Valid codes* may be 3-6 characters in length, with a possible 7th character when indicated
- □ 1st character is always Alphabetic
- □ 2nd character is always a numeral
- □ 3rd character on may be alpha or numeral
- □ 7th character extension is applied to *some codes*
- Must code to the highest degree of specificity
- □ Full code titles are used in ICD-10-CM
- Codes are Much Larger
 - **☐** More Specific with Exact Code Titles:



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ICD-10-CM Tabular Sample

■ E10.6 Type 1 diabetes mellitus with other specified complications

E10.61 Type 1 diabetes mellitus with diabetic arthropathy
E10.610 Type 1 diabete mellitus with diabetic
neuropathic arthropathy

Type 1 diabetes mellitus with Charcot's joints

E10.618 Type 1 diabetes with other diabetic arthropathy

E10.62 Type 1 diabetes mellitus with skin complications

E10.620 Type 1 diabetes mellitus with diabetic dermatitis

Type 1 diabetes with diabetic necrobiosis lipoidica

E10.621 Type 1 diabetes mellitus with foot ulcer

Use additional code to identify site of ulcer (L97.4-,

L97.5-)

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ICD-10-CM Code Format



Category

Etiology, Extension anatomic site, severity

Example:

ICD-9-CM

ICD-10-CM

707.03 Decubitus ulcer, lower back

L89.144

707.24 Stage 4 Pressure ulcer

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ICD-10-CM Code Diversity

- R54 Age-related physical debility
- N02.0 Recurrent and persistent hematuria with minor glomerular abnormality
- C40.01 Malignant neoplasm of scapula and long bones of right upper limb
- Q76.426 Congential lordosis, lumbar region
- T48.1x1A Poisoning by skeletal muscle relaxants [neuromuscular blocking agents], accidental (unintentional) initial encounter
- Z51.81 Monitoring (encounter for) therapeutic drug level

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More on ICD-10-CM Format

- Place Holder "x"
 - Maintains the integrity of the meaning of certain characters
 - T40.2x1S Poisoning by other opioids, accidental (unintentional)
 Poisoning by other opioids, NOS
 - □ Used when a shorter code requires specific characters at the end, such as the 7th character extension
 - W89.1xxA Exposure to tanning bed, initial encounter
 - Characters 5 & 6 not defined
- Punctuation
 - □ Same use of [] and () as in ICD-9-CM
 - □ Helps with Accuracy and Consistency of Codes

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Quick Check

- The United States is the only industrialized country that has not yet implemented ICD-10?
 - □ True
 - □ False
- Which of the following is a valid ICD-10-CM code?
 - 1. 523.8
- 3. S57.01xxA
- 2. G40.911
- 4. 088x.11
- ICD-10-CM uses extensions in some sections to identify an initial encounter, subsequent encounter or sequelae.
 - □ True
 - □ False

ICD-10-CM Re-Cap

- 21 Chapters
- Full Code Titles for ALL codes
 - □ No references back to 4th or 5th digits
- Addition of 6th character in some Chapters
- Added Code Extensions (7th character) for obstetrics, injuries & external causes of injury
- Addition of dummy place holder ("x")
 - □ Used for 5th character and for some 6th character codes
 - □ Allows For Future Expansion
 - □ Example: T51.0x1 Toxic effect of ethanol, accidental (unintentional)

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Other Organizational Changes

- Sense organs are separated from the nervous system disorders
- Injuries are grouped <u>by site</u> rather than by injury category
- Postoperative complications have been moved to procedure-specific body system chapter
- More Combination codes for conditions and common symptoms or manifestations
- Combination codes for poisonings & external causes
- Revised diabetes mellitus to reflect ADA classification

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Other Added Features

- Expanded codes
 - Injuries
 - Initial encounter; Subsequent encounter; Sequelae
- Laterality
 - □ Right; Left; Unspecified
- Inclusion of trimester in obstetrics codes
- Changes in time frames specified in certain codes
- Added standard definitions for two types of Excludes notes
 - □ "Other" Codes
 - □ "Unspecified" codes

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Official Code Guidelines



- Effective 2012
 - □ http://www.cdc.gov/nchs/icd/icd10cm.htm
- Section I: Structures; conventions & guidelines
- Section II-III is for non-outpatient (not home care)
- Section IV: Dx Coding & Reporting for Outpatient
- ICD-10 is a 3 Volume Set
 - □ Volume 1
 - □ Volume 2
 - □ Volume 3 (Separate Volume)
- Access online version of ICD-10-CM
 - http://www.cdc.gov/nchs/icd/icd10cm.htm#10update
 - □ To be used by ALL Healthcare Providers (HIPAA)

Coding Principles

- Use current, updated Code Books
 - * Code revisions annually: October 1
 - * No Delays or Grace Periods
- Code to the highest degree of specificity
 - * Clarify with physician documentation
 - * Lack of physician documentation for coders may result in penalties
- Sequence according to Coding Guidelines
- Conditions integral to diagnosis should not be coded
- Do NOT code suspected, probable, or rule out dx
 - □ Home Health and Hospice

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Don't Code Conditions -Integral to a Diagnosis

- CHF: Do NOT code
 - Peripheral edema
 - Pleural effusion
 - **□** Shortness of breath
 - Pulmonary edema
- Cirrhosis: Do NOT Code

□ Bruising & bleeding Medication Sensitivity Jaundice

□ Gallstones Toxins in blood or brain

□ Varices Portal hypertension Itching

ESRD: Do NOT Code

□ Malaise & fatigue Edema Hyperkalemia

Decreased alertness
 Decreased urine output

Code Steps & Convention

General Rules

- Official Guidelines: www.cdc.gov
- Observe abbreviations, punctuation, symbols, cross-references, all prompts and notes
- Code to the highest level of specificity
 - □ Review definitions, includes and excludes
- See key at bottom of page in code manuals
- Symbols to indicate primary, secondary
- Code Books will indicate Case Mix diagnoses
- Many Conventions have the same meaning
 - □ Code first; Use additional code

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Instructional Notes

Helps to select right code

- <u>Includes</u>: immediately follows certain category to further define or give examples of the conditions of the term
 <u>Example</u>: Malignant neoplasms of other & ill defined sites
 <u>Includes</u>: Malignant neoplasms of contiguous sites, not elsewhere classified, whose point of origin cannot be determined
- Synonyms of the condition listed
 - □ R71.8 Other abnormality of red blood cells
 - Abnormal red-cell morphology NOS
 - Abnormal red-cell volume NOS
- Excludes: You are NOT in the right place
- Two types of Excludes Notes

Excludes 1 & 2: Lymphatic & hematopoietic

Excludes Notes

- Excludes 1
 - □ Means: *NOT CODED HERE*
 - When 2 conditions cannot occur together
 - Congenital form & acquired form
- Excludes 2
 - □ Means: NOT INCLUDED HERE
 - Condition excluded is not part of the condition
 - Indicates it is acceptable to use both codes, when appropriate
- Read Both Excludes in the Alpha & Tabular Index

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More on Excludes Notes

- Excludes 1
 - □ Indicates that code identified in the note and code where the note appears cannot be reported together because the <u>2 conditions cannot occur together</u>
 - **■** Example:
 - □ E10 Type 1 Diabetes mellitus
 - □ Excludes 1: Diabetes mellitus due to underlying condition (E08.-)

Drug or chemical induced diabetes mellitus (E09.-)

Gestational diabetes (024.4-)

Hyperglycemia NOS (R73.9)

Neonatal diabetes mellitus (P70.2)

Type 2 diabetes mellitus (E11.-)

If you have Type 1 DM, you cannot have Type 2 DM

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More on Excludes Notes

Excludes 2

- □ Indicates that condition identified in the note is not part of the condition represented by the code where the note appears, <u>so both codes may be reported together if</u> <u>the patient has both conditions</u>
- **■** Example:
- □ EL89 Pressure ulcer
- □ Excludes 2: Diabetic ulcers (E08.621, E08.622, E09.621, E09.622, E10.621, E10.622, E11.621, E11.622, E13.621, E13.622)

non-pressure chronic ulcer of the skin (L97.-) skin infections (L00-L08) varicose ulcer (I83.0, I83.2)

DM ulcer with Stage 2 pressure ulcer = Two Codes

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More Conventions

- Use of "and" represents "and/or"
 - □ Left ankle and/or left foot
- "Other specified" codes (NEC)
 - □ Not Elsewhere Classified
 - □ 4th or 6th character "8", 5th character is "9"
 - □ Medical record is specific, no specific code exists
- Unspecified Codes (NOS)
 - **□** Not Otherwise Specified
 - □ 4th or 6th character "9" or 5th character is "0"
 - □ Documentation is insufficient to assign more specific code

More on NEC

- "Other specified" codes (NEC)
 - □ Not Elsewhere Classified
 - □ 4th or 6th character "8", 5th character is "9"
 - □ Medical record is specific, no specific code exists
- Example
 - □ K70 Alcoholic liver disease
 - □ K71 Toxic liver disease
 - □ K72 Hepatic failure, not elsewhere classified
 - □ K73 Chronic hepatitis, not elsewhere classified
 - Excludes 1 alcoholic hepatitis (chronic) (K70.1-)
 drug-induced hepatitis (chronic) (K71.-)
 granulomatous hepatitis (chronic) NEC (K75.3)

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More on NOS

- Unspecified Codes (NOS)
 - □ Not Otherwise Specified
 - □ 4th or 6th character "9" or 5th character is "0"
 - □ Documentation is insufficient to assign more specific code
- Example
 - □ J40 Bronchitis, not specified as acute or chronic
 - Includes bronchitis NOS
 catarrhal bronchitis
 bronchitis with tracheitis NOS
 tracheobronchitis NOS

More on ICD-10 Conventions

- Same as ICD-9-CM
 - □ Includes notes further defines a category
 - □ Inclusion terms-some of the conditions included in that code
 - □ Code first/use additional code notes (etiology/manifestation paired codes)
 - □ Code also Two codes may be required but sequencing is dependent upon circumstances
 - □ See and See Also
- Transferable Skills & Knowledge from ICD-9-CM to ICD-10-CM

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What's New: Laterality

- Bilateral sites, the final character of the codes
- Unspecified site is also provided
- If no bilateral code is provided and the condition is bilateral, assign separate codes for both the left and right side
- <u>C50.512</u> Malignant neoplasm of lower-outer quadrant of left female breast
- <u>H16.013</u> Central corneal ulcer, bilateral
- L89.012 Pressure ulcer of left elbow, Stage 2
- <u>S82.311</u> Torus fracture of lower end of right tibia

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Expanded Combination Codes

- Now includes certain conditions and common associated symptoms and manifestations
- <u>K57.21</u> Diverticulitis of large intestine with perforation *and* absess with bleeding
- <u>E11.341</u> Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy *with* macular edema
- <u>I25.110</u> Athersclerotic heart disease of native coronary artery *with* unstable angina
- <u>J44.0</u> COPD with acute lower respiratory infection

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More Highlights: Code Extensions

- Chapter 19: Injury, Poisoning, External Causes
- S-section for coding different types of injuries related to single body regions
- T-section to cover injuries to unspecified body regions as well as poisoning and certain other consequences of external causes
- A = Initial encounter
- **D** = **Subsequent encounter**
- S = Sequelae
- Fracture Extensions
 - □ 7th Digit Encounter for state of fracture care

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Injury & External Cause Extensions

- Fracture Extensions: 7th Digit
 - \Box <u>A</u> = Initial encounter for closed fracture
 - \Box **B** Initial encounter for open fracture
 - \Box **D** = Subsequent encounter for fracture with routine healing
 - \Box <u>G</u> = Subsequent encounter for fracture with delayed healing
 - □ K = Subsequent encounter for fracture with nonunion
 - □ P = Subsequent encounter for fracture with malunion
 - \square S = Sequelae
 - □ Aftercare codes for fractures no longer used
 - Acute fracture with the 7th character to show subsequent encounter
 - A fracture not indicated as open or closed should be coded to closed
 - S72.21xD Fracture, traumatic hip

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Code Extensions

- S31.623<u>A</u> Laceration with foreign body of abdominal wall, right lower quadrant with penetration into peritoneal cavity, <u>initial</u> encounter
- S49.011<u>D</u> Alter-Harris Type 1 physeal fracture of upper end of humerous, right arm, <u>subsequent</u> encounter for fracture with routine healing
- S49.011<u>G</u> Salter-Harris Type 1 physeal fracture of upper end of humerus, right arm, <u>subsequent</u> encounter for fracture with delayed healing

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Fracture Specificity

- S72.0 Fracture of head and neck of femur
 - □ S72.00 Fracture of unspecified part of neck of femur

Fracture of hip NOS

Fracture of neck of femur NOS

- <u>S72.001</u> Fracture of unspecified part of neck of right femur
- <u>S72.002</u> Fracture of unspecified part of neck of left femur
- S72.009 Fracture of unspecified part of neck of unspecified femur
- Subcapital fracture of femur
- S72.011 Unspecified intracapsular fracture of right femur
- S72.012 Unspecified intracapsular fracture of left femur
- <u>S72.019</u> Unspecified intracapsular fracture of unspecified femur
- Transepiphyseal fracture of femur

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One Case Scenario

- Patient admitted to home health for PT & OT post surgical repair of a commuted fracture of the <u>right</u> intertrochateric femur.
- <u>ICD-9-CM</u>

V57.89 Other rehab procedures V54.15 AC for healing traumatic fracture, upper leg <u>ICD-10-CM</u> S72.141<u>D</u>

Displaced intertrochateric fx of right femur, subsequent encounter for closed fx with routine healing

Quick Check

- ICD-10-CM has more Chapters than ICD-9-CM.
 - □ True
 - □ False
- Which of the following is a valid ICD-10-CM code?
 - 1. 428.9
- 3. T37.0xx1A
- 2. L03.313
- 4. M12x.58
- The first character of an ICD-10-CM code can only be a number.
 - □ True
 - □ False

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Other Code Guidelines

- <u>ICD-9-CM</u>
- Acute Myocardial Infarction Time Period
 - □ 8 weeks
- Abortion vs Fetal Death
 - □ 22 weeks

- <u>ICD-10-CM</u>
- Acute Myocardial Infarction Time Period
 - □ 4 weeks
- Abortion vs Fetal Death
 - □ 20 weeks

What About Coding Clinic?

- Coding Clinic to be refreshed at the implementation date
 - □ New Format and Guidance
 - □ Greater complexity inherent in Code Set
 - **10/1/13**
- Retire ALL Other Coding Clinics
 - □ Retire with ICD-9-CM Code Set
 - □ Dissolve all previous Code Guidances
 - Assumption Codes: DM and Gangrene
 - Use of Abnormal Gait
- ICD-10 is the Property of WHO
 - Additional Guidance requires WHO Approval

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Consider Coder Challenges

- Back to Basics
 - □ Utilize 10 Steps of Code Assignment
 - Use both Alphabetic and Tabular Index
 - □ Visit: www.who.int.classifications/icd/en
 - Access searchable database of codes
- Cannot Rely on Coding Guidance
 - □ All Previous Guidances Retired with ICD-9-CM
 - □ Instructions embedded in Tabular Index
- ICD-10 is the Property of WHO
 - Additional Guidance requires WHO Approval
 - Stay tuned for more information on this process

More Challenges

- Documentation Needs
 - Requires increased specificity in the clinical documentation
 - Documentation Gaps will need to be addressed
- Specific Documentation Needs
 - □ Laterality; Severity; Specific Affected site
 - **□** Example:
 - Sarcoidosis

D86.0 Sarcoidosis of lung

D86.1 Sarcoidosis of lymph nodes

D86.2 Sarcoidosis of lung with sarcoidosis of lymph nodes

D86.3 Sarcoidosis of skin

Greater Specificity for Treatment & Outcome Needs

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More on Documentation

- Enhance data for disease treatments
 - □ Refined level of disease response sets
 - Better treatment protocols
 - Greater Specificity for Medical Necessity
- Case in Point
 - □ Carcinoma in Situ
 - ICD-9-CM = 233.0
 - ICD-10-CM = 12 Separate Codes (D05)
 - □ Track Isotope Therapy for Each Specific Cancer in Situ
 - Outcomes for Lobular versus intraductal versus unspecified
 - □ Greater Specificity for Treatment & Outcome Needs

Chapter Details

- Chapter 1: Infectious & Parasitic Diseases (A00-B99)
- Chapter 2: Neoplasms (C00-D49)
- <u>Chapter 3</u>: Disease of Blood & Blood Forming Organs & Certain Disorders Involving the Immune Mechanisms (D50-D89)
- <u>Chapter 4</u>: Endocrine, Nutritional & Metabolic Diseases (E00-E89)
- Chapter 5: Mental & Behavioral Disorders (F01-F99)
- <u>Chapter 6</u>: Diseases of the Nervous System & Sense Organs (G00-G99)
- Chapter 7: Diseases of Eye & Adnexa (H00-H59)

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More Chapter Details

- Chapter 8: Diseases of Ear & Mastoid Process (H00-H59)
- Chapter 9: Diseases of the Circulatory System (I00-I99)
- Chapter 10: Diseases of Respiratory System (J00-J99)
- Chapter 11: Diseases of Digestive System (K00-K94)
- Chapter 12: Diseases of Skin & Subcutaneous Tissue (L00-L99)
- <u>Chapter 13</u>: Diseases of the Musculoskeletal System & Connective Tissue (M00-M99)
- Chapter 14: Diseases of Genitourinary (N00-N99)

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More Chapter Details

- Chapter 15: Pregnancy, Childbirth & Puerperium (O00-O9A)
- Chapter 16: Newborn (Perinatal) (P00-P96)
- <u>Chapter 17</u>: Congenital malformations, deformations, and chromosomal abnormalities (Q00-Q99)
- <u>Chapter 18</u>: Symptoms, Signs, & abnormal clinical & laboratory findings, not elsewhere classified (R00-R99)
- <u>Chapter 19</u>: Injury, poisoning, & certain other consequences of external causes (S00-T88)
- Chapter 20: External Causes of Morbidity (V01-Y99)
- <u>Chapter 21</u>: Factors Influencing Health Status & Contact with Health Services (Z00-Z99)

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Steps to Accurate Coding

- See Basic Code Rules
- Identify the main diagnostic term
- Find the main term in the alphabetical index
- Read the sub-terms under the main term
- Follow the cross-reference instructions
- ALWAYS Verify the code in the Tabular Index
- Read ALL Instructions
 - * Exclusion notes *NOS (not otherwise specified)

 - * Code 1st notes *Manifestation notes

Code Steps Applied

- Type 1 diabetes mellitus with diabetic nephropathy
- <u>Step 1</u>
- Look up term in Alphabetical Index
- Diabetes, diabetic (mellitus) (sugar) E11.9
 - □ **Type 1 E10**
 - With nephropathy E10.21

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Code Steps Applied

- Type 1 diabetes mellitus with diabetic nephropathy
- Step 2
- Verify the code in the Tabular index
- E10 Type 1 diabetes mellitus
 - □ E10.2 Type 1 diabetes mellitus with kidney complications
 - <u>E10.21</u> Type 1 diabetes mellitus with diabetic nephropathy
 - Type 1 diabetes mellitus with intercapillary glomerulosclerosis
 - Type 1 diabetes mellitus with intracapillary glomerulonephrosis
 - Type 1 diabetes mellitus with Kimmelstiel-Wilson disease

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More on Diabetes

- Significant Change to Diabetes Mellitus
- Five (5) DM Categories
 - □ E08 Diabetes Mellitus due to an underlying condition
 - □ E09 Drug or chemical induced diabetes mellitus
 - □ E10 Type 1 diabetes mellitus
 - □ E11 Type 2 diabetes mellitus
 - □ E13 Other specified diabetes mellitus
- <u>Expanded Combination Codes for DM and manifestations</u> of <u>DM</u>
- Updated to reflect current clinical classifications
- No longer classified to controlled/uncontrolled

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One Case Scenario

- Patient admitted to home health with an inoperable islet cell carcinoma of the pancreas. Diabetic neuropathy.
- <u>1CD-9-CM</u>

157.4 Malignant neoplasm pancreas

251.8

357.4

ICD-10-CM

C25.4

E08.40 DM due to underlying condition with diabetic neuropathy

Remember: Point Dash

- ".-" Point Dash
 - □ Replaces the list of options at a level of specificity past the three-character category
 - ☐ Instructs the coder to turn to the category or subcategory to review the subdivisions available for coding
- Examples
 - □ JØ3 Acute tonsillitis

Excludes 1 acute sore throat (J02.-) hypertrophy of tonsils (J35.1)

□ K50 Crohn's disease [regional enteritis]

Excludes 1 *ulcerative colitis (K51.-)*

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Chapter Specific Features

- Each Chapter has new features and codes
- <u>Chapter 1</u>: New section called infections with a predominantly sexual mode of transmission (A50-A64)
- Chapter 2: Neoplasms by Site and Behavior
- <u>Chapter 4</u>: Expanded Combination Codes for DM DM no longer classified as Controlled versus Uncontrolled
- <u>Chapter 9</u>: HTN no longer classified as benign /malignant

Combination codes: heart disease & angina

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More Chapter Specific Features

- Chapter 13: Laterality
- Chapter 14: Expanded Coding Notes for CKD
- Chapter 15: Trimester indicated with final character
 Episode of care no longer captured
 7th character extension to identify fetus number
- Chapter 18: Far more extensive than 780-799
- Chapter 19: 7th character extensions
- Chapter 20: Replaces E Codes
 All encounters to use E Codes
- Chapter 21: Z Codes greatly expanded

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What Are Z Codes?

<u>Definition</u>: Z Codes are used to identify encounters for reasons other than illness or Injury (Z00-Z99)

Same concept as V codes but expanded content

Encounter Reasons

Exposure to hazardous substances

Inoculations & vaccinations

Status

Artificial openings

History of

Aftercare

Observation

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Z Code Notes to Consider

- Z codes are used for routine circumstances
 - □ No complications (infections; non healing wounds)
- Sequencing V codes are indicated by direction in Code Manuals . Check for a primary or secondary only designation, or Dual coding
 - □ Z51.11 Encounter for antineoplastic chemotherapy
 - □ Z51.12 Encounter for antineoplastic immunotherapy
- Z codes are not used with aftercare for injuries
 - □ Assign the acute injury with the 7th character "D"
 - \Box **D** = subsequent encounter
 - Sequencing of multiple aftercare Z codes depends on the circumstances of the encounter

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Other Uses for Z Codes

- Describes the health status of patients
 - □ Z17 Estrogen receptor site
 - □ Z46.6 Encounter for fitting & adj. of urinary catheter
 - □ Z89.411 Acquired absence of right great toe Secondary Dx codes
 - □ **Z66** Do not resuscitate
 - Z79 Long term drug therapy
 - □ **Z74.01** Bed confinement
 - □ Z93 Artificial opening status
 - □ Z96.651 Presence of right artificial knee joint
- Personal or family history of illness
 - □ Z80 Family History of primary malignancy
 - □ Z85 Personal History of malignant neoplasm

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More on Z Codes

- **Z43** Encounter for artificial openings
- Z44 Encounter for fitting & adjustment of external prosthetic devices
- Z45 Adjustment & management of implanted devices
- **Z47** Orthopedic aftercare
- <u>Z48</u> Encounter for other post procedural aftercare
- Z49 Encounter for care involving renal dialysis
- Z51 Encounter for other aftercare
 - □ **Z51.11** Encounter for antineoplastic chemotherapy
 - □ Z51.12 Encounter for antineoplatic immunotherapy

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More on Z Codes

Z43 Encounter for attention to artificial openings

<u>Excludes1:</u> artificial opening status only, without need for care (Z93.-)

complications of external stoma (J95.-, K91.4-, N99.5-) <u>Excludes2</u>: fitting and adjustment of prosthetic and other devices (Z44-Z46)

- □ **Z43.0** Encounter for attention to tracheostomy
- □ Z43.1 Encounter for attention to gastrostomy
- □ Z43.2 Encounter for attention to ileostomy
- □ Z43.3 Encounter for attention to colostomy
- □ **Z43.4** Encounter for attention to other artificial openings of the digestive tract
- □ Z43.5 Encounter for attention to cystosomy
- Z43.6 Encounter for other artificial openings of the urinary tract (nephrostomy, ureterostomy, urethrostomy)

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Aftercare Z Codes

Z47 Orthopedic aftercare

Excludes 1 Aftercare for healing fracture-code to fracture with 7th character D

- □ **Z47.1** Aftercare following joint replacement surgery *Use additional code to identify the joint (Z96.6-)*
- □ Z47.2 Encounter for removal of internal fixation device
- □ **Z47.81** Encounter for orthopedic aftercare following surgical amputation
 - Use additional code to identify the limb amputated (Z89.-)
- □ **Z47.82** Encounter for orthopedic aftercare following scoliosis surgery
- □ **Z47.89** Encounter for other orthopedic aftercare
- Z48 Encounter for other postprocedural aftercare

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More on Z Codes

- Z48 Encounter for other postprocedural aftercare
 - □ **Z48.0** Encounter for attention to dressings, sutures and drains
 - Excludes 1: encounter for planned postprocedural wound closure (Z48.1)
 - □ **Z48.00** Encounter for change or removal of nonsurgical wound dressing
 - **Encounter for change or removal of wound dressing NOS**
 - □ **Z48.01** Encounter for change or removal of surgical wound dressing
 - □ **Z48.02** Encounter for removal of sutures Encounter for removal of staples
 - □ **Z48.03** Encounter for change or removal of drains
- Z48.1 Encounter for planned postprocedural wound drainage

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More on Aftercare Z Codes

- Z48 Encounter for other postprocedural aftercare
 - □ **Z48.2** Encounter for Organ Transplant
 - Z48.21 Encounter for aftercare following heart transplant
 - □ Z48.3 Aftercare for surgery for neoplasm

Use additional code for the neoplasm

- □ Z48.81 Encounter for surgical aftercare following surgery on specified body systems
 - <u>Z48.810</u> Encounter for surgical aftercare following surgery on the sense organs
 - Z48.811 Encounter for surgical aftercare following surgery on the nervous system
 - Z48.813 Encounter for surgical aftercare following surgery on the respiratory system
 - Z48.814 Encounter for surgical aftercare following surgery on the teeth or oral cavity

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Case Scenario

Patient admitted to home health post right hip replacement.
 SVN for PT/INR & dressing changes. PT for gait training,
 home safety, muscle strengthening and assistive device. HTN.

ICD-9-CM

V54.81 A/C Joint Replacement 781.2 Abnormal gait 401.9 HTN V58.83 Enctr. Drug monitoring V58.61 Long term Use of anticoags V58.31 Dressing Changes V43.65 Joint Replaced, Hip <u>ICD-10-CM</u>

Z47.1 A/C joint replacement Z96.641 Right artificial hip joint I10 HTN Z51.81 Enctr. therap. drug mn. Z79.01 LT use anticoags Z48.01 Surgical dressing chngs.

Quick Check

- ICD-10-CM uses inclusion terms in the same way that ICD-9-CM does.
 - □ True
 - □ False
- The maximum number of characters in an ICD-10-CM code is:
 - 1. 5

3. 7

2. 6

- 4. 8
- ICD-10-CM Chapter features varies from ICD-9-CM.
 - □ True
 - □ False

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GEMs

- General Equivalence Maps (GEM's)
 - □ CMS Provides Mapping Guide
 - □ www.cms.gov/ICD10/11b1_2011_ICD10CM_and_GEM S.asp#TopOfPage
- Maps attempt to find corresponding codes between two sets
- Often relationship is NOT easy to establish
- NOT a "Simple Crosswalk"
- GEM's cannot be used for coding
- GEM Use
 - □ Data Analysis; Convert Data Bases; Machine Language

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GEM Example

- 996.1 Mechanical complication of other vascular device, implant and graft
- GEM Lists
 - □ 156 Codes for 996.1
 - □ Often <u>not</u> possible to map to one code in IDC-10-CM
- V64.4x
 - □ No ICD-10-CM codes for laparoscopic; thoracoscopic; arthroscopic surgical procedures converted to open surgical procedures
- Scan through the GEM's to see General Files
- GEM's NOT to be used for ICD-10-CM Coding

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Agency Risk Areas



- Allocating ICD-10-CM Resources
- Systemic Implementation Planning
- <u>Lack of supporting physician documentation</u> for accurate primary and secondary diagnoses and code assignment
 - □ Lack of access to precise clinical documentation
- Lack of substantiating clinician documentation in the OASIS assessment to support the selection and sequencing of primary and secondary diagnoses
- Not following ICD-10-CM code convention

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Planning Considerations

- Agency Assessment
 - □ OASIS Specialists; Coders; Billers
 - □ Vendor Interface & Updates
- Resource Allocation (Annual Budget)
 - □ Books; CD's
 - Timing
- Expert Education
 - □ 2012: Coders; Specialists; Billers
 - □ 2013: Focused application
- Staff Education
 - □ Support Processes; Roles; Expectations

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Agency Code Experts

- Access ICD-10-CM Resources Annually
 - □ CDC.gov Web Site
 - □ Review 2012 Code Manual for ICD-10-CM Codes for major categories (grey or green text)
- 2012 Access Free Webinars
 - □ CMS.hhs.gov
- **2012**
 - □ Order ICD-10-CM Code Manual (Dx Only)
 - □ Access Industry Specific Code Webinars; Self Assessments
- **2013**
 - □ Consider ICD-10-CM Boot Camp <u>or</u> Industry Specific Programs; Agency Code Process Updates

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OASIS & PPS Impact

- OASIS Changes to Come
 - □ Accommodate ICD-10-CM
 - □ Procedures
 - **□** Enhance Cross Correlation Items
 - □ CARE Tool Advances

What About Home Health PPS Impact?

- □ Will Unspecified Codes be Non Case Mix?
- □ ICD-10-CM requires enhanced physician documentation to code accurately
- □ Cross case mix impact
- PPS Model Will Also Change
 - □ Proposed Case Mix Code: April, 2013

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Resource Web Sites

www.cms.hhs.gov/ICD10
Centers for Medicare & Medicaid Services
ICD-10 Web Site

www.cdc.gov/nchs/icd/icd10cm.htm#10update Centers for Disease Control Official ICD-10-CM Code Guidelines

www.ahima.org

AHIMA (American Health Information Management Association)

www.cms.hhs.gov/ICD9ProvidersDiagnosticCodes/03_meetings.asp ICD-9-CM Coordination & Maintenance Committee Meetings

www.medicalspecialtycoding.com
Board of Medical Specialty Coding

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Available Education Programs as Webcasts and DVDs

- ICD-10-CM Transition 6 Part Series
- Part 1: Fundamentals, Part 2: Diabetes, Part 3: Cardiovascular, Part 4: Pulmonary, Part 5: Rehabilitation, Part 6: Wounds
- Infection Control for Home Care and Hospice Question and Answer Session Live Webcast on 3/14/12 (1 - 2pm EST)
- interRAI and UAS Session Live Webcast on 4/18/12 (1 2pm EST)
- Health Care Reform, Palliative Care and Quality of Life Issues Live Webcast on 6/13/12 (1 - 2pm EST)
- Patient Centered Medical Home Live Webcast on 7/18/12 (1 2pm EST)
- ICD-9-CM 2012 Code Updates
- ICD-9-CM Code Series (Beginner; Intermediate; Advanced)
- FREE Program Home Health Audit Priorities
- FREE Program ICD-10-CM: Coming to Home Health in 2013

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Our satisfied customers rely on us for our expertise in:

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- Report Code Scans & Audits;
- Corporate and Regulatory Compliance;
- Preparation for Accreditation;
- Performance Improvement;
- Clinical Operations;
- Emergency Disaster Planning;
- Infection Control;

- Administration and Organizational Structure;
- On-site Interim Management;
- Strategic and Business Continuity Planning;
- Staff Education and Retreats;
- Quality Outcome Enhancement;
- Best Practices and Leadership Development; and
- HIPAA.

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