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At the Forefront of Healthcare Transformation



ICD-10-CM CODING WORKSHOP CONVENTIONS & GUIDELINES


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OBJECTIVES




- ICD-10-CM Conventions**
 - Importance of using ICD-10 Conventions
 - Major Convention changes in ICD-10-CM
- ICD-10-CM Guidelines**
 - Importance of using ICD-10 Guidelines
 - Major Guideline changes in ICD-10-CM
- ICD-10-CM Chapter-Specific Guidelines**
 - Major Guideline changes in specific chapters of ICD-10-CM

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ICD-10-CM



ICD-10-CM CONVENTIONS

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MAJOR MODIFICATIONS IN ICD-10 CM CONVENTIONS


- Placeholder Character
- Seventh Character
- Abbreviations
 - NEC
 - NOS
- Punctuation
 - Parentheses, Brackets, Colon
- Instructional Notes
 - Includes/Excludes
 - Code First
 - Use Additional Code
- Relational Terms
 - And -
 - With -
- Changes from ICD-9

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PLACEHOLDER



- ICD-10-CM utilizes a **Placeholder Character – "X"** for codes that may require a 6th or 7th character, but may not have a 5th or 6th character.
- Example:
 - M80.08XA**, Other osteoporosis with current pathological fracture, vertebra(e), Initial encounter
 - T56.0X2S**, Toxic effect of lead and its compounds, intentional self-harm, Sequela

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SEVENTH CHARACTERS

- Some categories require a **seventh character** to provide further *specificity* about the condition being coded.
- May be a number or a letter
- Must **always** be the *seventh character*.
- Examples:
 - O64.3XX1, Obstructed labor due to brow presentation, fetus 1
 - S02.110B, Type 1 occipital condyle fracture, initial encounter for open fracture
 - T17.220D, Food in pharynx causing asphyxiation, subsequent encounter

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7TH CHARACTER INJURY EXTENSIONS

Character	7 th Character Meaning
A	Initial Encounter/Closed Fracture
B	Initial Encounter/Open Fracture
D	Subsequent Encounter/Fracture Routine Healing
G	Subsequent Encounter/Fracture Delayed Healing
K	Subsequent Encounter/Fracture Nonunion
P	Subsequent Encounter/Fracture Malunion
S	Sequela

When 7th character is applicable, and no 5th/6th character is applicable, placeholder "x" must be assigned

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CODE STRUCTURE

Alpha (except U) 2 - 7 Numeric or Alpha Additional Characters

T 5 8 . 1 1 x A

Category Etiology, anatomic site, severity Added code extensions (7th character) for: substitutes, injuries, and external causes of injury

3 - 7 Characters

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ABBREVIATIONS - NEC

- **Not Elsewhere Classified - NEC**
- Types of **specified conditions** that have not been classified anywhere else in the code set
- Alphabetic Index uses NEC for a code description that will direct the coder to the Tabular List showing an Other Specified code description
- Example:
 - H26.8 Other specified cataract
 - I25.89 Other forms of chronic ischemic heart disease

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ABBREVIATIONS – NOS

- **Not Otherwise Specified – NOS**
- **Unspecified**
- Available for use when the documentation of the condition identified by the provider is insufficient to assign a more specific code.
- Example:
 - H40.9 Unspecified glaucoma
 - J12.9 Viral pneumonia, unspecified

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PUNCTUATION

- **() Parentheses – Nonessential Modifiers**
 - Supplementary words that may be present or absent in the disease or procedure which do not affect the code assignment
- *Examples: Alphabetic Index*
 - **Diabetes, diabetic** (mellitus) (sugar)
 - **Hemophilia** (classical) (familial) (hereditary)
- *Examples: Tabular List*
 - **I10**, Essential (primary) hypertension
 - **K51.011**, Ulcerative (chronic) pancolitis with rectal bleeding

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PUNCTUATION

- **[] Brackets**
 - Alphabetic Index: Identify Manifestation Codes
 - Tabular List: Synonyms
- *Examples: Alphabetic Index*
 - Disease, Alzheimer's G30.9 [F02.80]
 - Nephrosis, in amyloidosis E85.4 [N08]
- *Examples: Tabular List*
 - B06, Rubella [German measles]
 - J00, Acute nasopharyngitis [common cold]

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PUNCTUATION

- **: Colons**
 - Used in Tabular List after an incomplete term which needs at least one of the modifiers following the code to make it assignable
 - Used with both "Includes" and "Excludes" Notes
- **Example:**
 - **G73.7 Myopathy in diseases classified elsewhere**
Excludes1: myopathy in:
 - rheumatoid arthritis (M05.32)
 - sarcoidosis (D86.87)
 - scleroderma (M34.82)
 - systemic lupus erythematosus (M32.19)

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INSTRUCTIONAL NOTES

- **Inclusion Notes**
 - Inclusion Notes are used to clarify the conditions included within a particular chapter, section, category, subcategory or code
- **Example:**
 - K25 Gastric Ulcer
Includes: erosion (acute) of stomach
pylorus ulcer (peptic)
stomach ulcer (peptic)

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INSTRUCTIONAL NOTES

- **Exclusion Notes**
 - **Excludes1:** Pure "excludes" note – means cannot be CODED here.
 - The code excluded should never be used at the same time as the code above the Excludes1 note.
 - Used when two codes cannot occur together.
 - **Example:**
 - E11 Type 2 Diabetes Mellitus
Excludes1: Gestational Diabetes (O24.4-)
Postprocedural Diabetes Mellitus (E13.-)
Type 1 Diabetes Mellitus (E10.-)

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INSTRUCTIONAL NOTES

- **Exclusion Notes**
 - **Excludes2:** means code not INCLUDED with this code.
 - Indicates that the condition excluded is not included by the code, but it is acceptable to use both codes if the patient has both conditions and there is appropriate documentation for both conditions.
 - Example:
 - J37.1 Chronic laryngotracheitis
 - Excludes2: acute laryngotracheitis (J04.2)
 - acute tracheitis (J04.1)

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INSTRUCTIONAL NOTES

Excludes1&2 Tip:

Excludes1:
Only **1** code can be used

Excludes2:
2 codes can be use if both are appropriate and there is proper documentation for both



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INSTRUCTIONAL NOTES

- **“Code First” & “Use Additional Code”**
- Used for Sequencing Priority – Found in Tabular
- When a particular disease or condition has many manifestations that go along with it, always code the underlying disease first, followed by the manifestation.
- Example:
 - **E66 Overweight and Obesity**
 - **Code first** obesity complicating pregnancy, childbirth and the puerperium, if applicable (O99.21-)
 - **Use additional code** to identify body mass index (BMI), if known (Z68.-)

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RELATIONAL TERMS

- **“AND”** should be interpreted to mean either **“and”** or **“or”**
 - Example:
 - A18.0 Tuberculosis of bones and joints
 - Tuberculosis of bones
 - Tuberculosis of joints
 - Tuberculosis of bones and joints
- **“WITH”** should be interpreted to mean **“associated with”** **“in”** or **“due to”**

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CHANGES FROM ICD-9

- Injury Regrouping
 - Grouped by **Anatomical Site** rather than Types of Injury

ICD-9-CM:
Fractures (800-829)
Sprains/Strains (840-848)

ICD-10-CM:
Injuries to Head (S00-S09)
Injuries to Neck (S10-S19)

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CHANGES FROM ICD-9

- No V/E Codes
 - Are now incorporated into main classifications

E Codes:

- Chapter 20: External causes of morbidity
- V, W, X, Y Codes

Examples:
W21.03XA, Struck by baseball, initial encounter
Y92.320, Baseball field as the place of occurrence of the external cause

V Codes:

- Chapter 21: Factors influencing health status and contact with health services
- Z Codes

Examples:
Z39.2 Encounter for routine postpartum follow-up
Z38.0 Single liveborn infant, born in hospital

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ICD-10-CM

ICD-10-CM GUIDELINES

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MAJOR MODIFICATIONS IN ICD-10 CM GUIDELINES

- Level of Detail
- Laterality
- Integral Parts of Disease
- Acute and Chronic Conditions
- Combination Code
- Sequela (Late Effects)
- Chapter-Specific Coding Guidelines

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LEVEL OF DETAIL

- ICD-10-CM diagnosis codes are composed of 3 to 7 characters
- When reporting diagnosis codes, **report the codes at their highest number** of characters available
 - The 4th, 5th, 6th and 7th characters provide greater detail
 - A code is **invalid** if it has not been coded to the full number of characters required for that code, including the 7th character

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LATERALITY 

- **Laterality** specifies whether the condition occurs on the *left* side, *right* side, or is *bilateral*
- If no bilateral code is provided, assign separate codes for the left side and the right side
- Example:
C50.511 Malignant neoplasm, lower outer quadrant of right female breast

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ICD-10-CM GUIDELINES 

- **Integral Parts of Disease**
- **Signs and symptoms** that *are associated* routinely with a disease process should not be assigned as additional codes
- **Signs and symptoms** that *may not be associated* routinely with a disease process should be coded when present
- Examples:
 - **Patient with Gastroenteritis with Nausea and Vomiting**
 - Only code the Gastroenteritis
 - **Patient with Irritable Bowel Syndrome with Diarrhea, Nausea and Vomiting**
 - Code the Irritable Bowel Syndrome, Nausea, and Vomiting

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ICD-10-CM GUIDELINES 

- **Chronic and Acute Conditions**
- If the same condition is described as both acute and chronic, code both and sequence the acute code first

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COMBINATION CODE 

- New **combination codes** are a single code used to classify:
 - Two diagnoses
 - A diagnosis with an associated manifestation
 - A diagnosis with an associated complication
- Example:
 - K57.21 Diverticulitis of large intestine with perforation and abscess with bleeding
 - E11.341 Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema

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SEQUELA (LATE EFFECTS) 

- A **Sequela** is the condition produced, or the *late effect*, after the acute phase of an illness or injury has terminated.
 - No time limit
- **Two codes required:**
 - *First code* – Originating Condition of the Sequela
 - *Second code* – The Sequela
- Example:
 - **Scar after burn**
 - *First Code: Scar* (Originating Condition)
 - *Second Code: Burn* (Sequela)

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ICD-10-CM 

CHAPTER-SPECIFIC CODING GUIDELINES

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HOW TO LOOK-UP GUIDELINES

- Example: **I.C.1.a.2.a**
- Beginning of Codebook
 - Section **I.** Conventions, general coding guidelines and chapter specific guidelines
 - **C.** Chapter-Specific Coding Guidelines
 - Chapter **1:** Certain Infectious and Parasitic Diseases (A00-B99)
 - **a.** Human immunodeficiency virus (HIV) infections
 - **2)** Selection and sequencing of HIV codes
 - **(a)** Patient admitted for HIV-related condition

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CHAPTER 1: CERTAIN INFECTIOUS AND PARASITIC DISEASES

- **Human Immunodeficiency Virus (HIV) Infections**
 - **I.C.1.a.2.a**
 - If a patient is admitted for HIV-related condition, the principal diagnosis should be B20, HIV, followed by additional diagnosis codes for all reported HIV-related conditions.
 - **I.C.1.a.2.b**
 - If a patient with HIV is admitted for a condition unrelated to HIV, the code for the unrelated condition should be the principal diagnosis. Other diagnoses would be B20 followed by additional diagnosis codes for all reported HIV-related conditions.

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CHAPTER 1: CERTAIN INFECTIOUS AND PARASITIC DISEASES

- **Sepsis I.C.1.d.1.a**
 - For a sepsis diagnosis code, assign the code for the underlying systemic infection
- **Severe Sepsis I.C.1.a.1.b**
 - **Minimum of 2 codes**
 - *First code:* Underlying systemic infection
 - *Second code:* From subcategory R65.2, Severe Sepsis
- **Septic Shock I.C.1.a.2**
 - *First code:* Underlying systemic infection
 - *Second code:* R65.21, Severe sepsis with septic shock OR T81.12, Postprocedural septic shock

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CHAPTER 2: NEOPLASMS

- Treatment of **Malignancy**: I.C.2.a
 - Malignancy is Primary Diagnosis
 - Any Metastatic Sites Code Second
- Treatment of **Secondary Site** (Metastasis): I.C.2.b
 - Secondary Site is Primary Diagnosis
 - Primary Malignancy is coded as an additional code
- Primary Malignancy **Previously Excised**: I.C.2.d
 - Code from *Category Z85, Personal History of malignant neoplasm*, should be used

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CHAPTER 2: NEOPLASMS

EXCEPTION: ANEMIA I.C.2.I.4

- When the patient is being treated *only* for Anemia associated with a Malignancy, the Malignancy is sequenced as the Principal Diagnosis followed by code **D63.0, Anemia in neoplastic disease**

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CHAPTER 5: MENTAL, BEHAVIORAL, AND NEURODEVELOPMENTAL DISORDERS

- I.C.5.b.1
- **"In Remission"**
 - Selection of codes for 'in remission' for categories F10-F19, Mental and behavioral disorders due to psychoactive substance use requires the providers clinical judgment.

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CHAPTER 9: DISEASES OF THE CIRCULATORY SYSTEM

- **Acute Myocardial Infarction (AMI)**
- **Subsequent AMI: I.C.9.e.4**
 - A code from category I22 is to be used when a patient who has suffered an AMI has a new AMI within the **4 week time frame** of the initial AMI. A code from category I22 must be used in conjunction with a code from category I21. The sequencing of the I22 and I21 code depends on the circumstances of the encounter.

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CHAPTER 12: DISEASES OF THE SKIN AND SUBCUTANEOUS TISSUE

- **Pressure Ulcer Codes:**
- **I.C.12.a.1**
 - Single combination codes that identify:
 - Site
 - Laterality
 - Stage (1-4, Unspecified, Un-stagable)
 - Assign as many codes as needed to identify all the pressure ulcers if more than one
- **I.C.12.a.6**
 - Assign the code for the highest state reported for each site

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CHAPTER 15: PREGNANCY, CHILDBIRTH, AND THE PUERPERIUM

- **I.C.15.a.2:** Chapter 15 codes **Only Used on the Mothers Record**
- **I.C.15.a.3:** Final Character in Code added for **Trimester**
- **I.C.15.a.4:** Selection of trimester for inpatient admissions that encompass more than one trimesters
 - Code Trimester for when **Condition Began** if it overlaps into a subsequent Trimester


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CHAPTER 16: CERTAIN CONDITIONS ORIGINATING IN THE PERINATAL PERIOD

- **I.C.16.a.1:** Chapter 16 Codes **Only Used on Child's Record**
- **I.C.16.a.4:** Chapter 16 Codes may be used throughout life of the patient if the condition is still present



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CHAPTER 18: SYMPTOMS, SIGNS, AND ABNORMAL CLINICAL AND LABORATORY FINDINGS, NOT ELSEWHERE CLASSIFIED

- **I.C.18.a:** Codes that describe *signs and symptoms* are **acceptable** when a **definitive diagnosis has not been established** by the provider
- **I.C.18.b:** When symptoms are **not routinely** found with the final diagnosis, code:
 - First Code, **Definitive Diagnosis**
 - Second Code, **Symptom**
- Signs or symptoms that are routinely found with a disease process should not be assigned as additional codes

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CHAPTER 19: INJURY, POISONING, AND CERTAIN OTHER CONSEQUENCES OF EXTERNAL CAUSES

- **I.C.19.d.1:** **Burns** (From Heat Source) vs. **Corrosions** (Due to Chemicals)
- Burns are classified by **Depth**:
 - 1st Degree – Erythema
 - 2nd Degree – Blistering
 - 3rd Degree – Full-Thickness Involvement
- Sequence the code that reflects the **highest degree of burn** when more than one burn is present first

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CONVENTIONS AND GUIDELINES SELF CHECK REVIEW

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1. The ICD-10-CM code for electrocution is T75.4 and requires the use of a seventh character to identify the encounter. Which of the following is the correct code for an initial encounter to treat the electrocution?

- a. T75.4A
- b. T75.4XA
- c. T75.4XXA
- d. T75.4

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2. Nonessential modifiers are enclosed in:

- a. Boxes
- b. Brackets
- c. Parentheses
- d. Colons

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3. True or false? When a *Excludes2* notes appears under a code, it is acceptable to use both the code and the excluded code together.

a. True
b. False

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4. The first character of an ICD-10-CM code is:

a. Always a number
b. Always a letter
c. Can be either a number or letter
d. None of the above

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5. True or false? When the term "and" is used in a narrative statement it is interpreted to mean only "and."

a. True
b. False

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SUMMARY 

- There are many new changes in ICD-10-CM and learning the new guidelines will be imperative to the switch on October 1, 2015.
- Focus on Specific Guidelines that are used in your practice or line of work.
- Training is Critical to Prepare Staff for Change!

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NEXT STEPS 

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