Welcome to PMI’s Webinar Presentation

Brought to you by:
Practice Management Institute®
pmiMD.com

Meet the Presenter...

On the topic:
ICD-10-CM Coding Refresher

Karen Scott, MAEd, CMC
Welcome to Practice Management Institute’s Webinar and Audio Conference Training. We hope that the information contained herein will give you valuable tips that you can use to improve your skills and performance on the job. Each year, more than 40,000 physicians and office staff are trained by Practice Management Institute. For 30 years, physicians have relied on PMI to provide up-to-date coding, reimbursement, compliance and office management training. Instructor-led classes are presented in 400 of the nation’s leading hospitals, healthcare systems, colleges and medical societies.

PMI provides a number of other training resources for your practice, including national conferences for medical office professionals, self-paced certification preparatory courses, online training, educational audio downloads, and practice reference materials. For more information, visit PMI’s web site at [www.pmiMD.com](http://www.pmiMD.com)

Please be advised that all information in this program is provided for informational purposes only. While PMI makes all reasonable efforts to verify the credentials of instructors and the information provided, it is not intended to serve as legal advice. The opinions expressed are those of the individual presenter and do not necessarily reflect the viewpoint of Practice Management Institute. The information provided is general in nature. Depending on the particular facts at issue, it may or may not apply to your situation. Participants requiring specific guidance should contact their legal counsel.

CPT® is a registered trademark of the American Medical Association.
ICD-10-CM Coding Refresher

Presented by
Karen Scott, MAEd, CMC

Brought to you by
Practice Management Institute®

ICD-10-CM: General Guidelines

• Where are they?

• Why do I need them?
ICD-10-CM: General Guidelines: Conventions

• What are they?
• Why do I need them?
• Conventions that deserve an explanation:
  ▪ NEC
  ▪ NOS
  ▪ And
  ▪ With

ICD-10-CM: General Guidelines: Conventions

• More conventions:
  ▪ See
  ▪ See Also
  ▪ Code also
  ▪ Includes
  ▪ Excludes1
  ▪ Excludes2
ICD-10-CM: General Guidelines: Conventions

- Punctuation:
  
  [ ] Brackets
  
  ( ) Parentheses

ICD-10-CM: General Guidelines

- Rule #1: Start in the Index
- Rule #2: Never code directly from the Index
- Rule #3: Code to the highest level of specificity, which brings us to...
- Placeholder “X”
ICD-10-CM: General Guidelines

• Signs and Symptoms
• Multiple coding for a single condition
• Acute and Chronic Conditions
• Combination code

ICD-10-CM: General Guidelines

• Impending or Threatened Condition
• Laterality
• Sequela (Late Effects)
ICD-10-CM: Chapter-Specific Guidelines

**Chapter 1: Certain Infectious and Parasitic Diseases (A00-B99)**

- Sequencing of HIV codes
  - Admit for HIV-related condition – B20
  - HIV positive admit, unrelated condition – unrelated condition, B20, HIV-related conditions
  - Asymptomatic HIV – Z21
  - Inconclusive HIV test – R75
  - HIV and Pregnancy – O98.7-, B20, HIV-related conditions
  - HIV Testing Encounter – Z11.4

- Sequencing of Sepsis, Sever Sepsis, Septic Shock
  - Sepsis – code underlying infection
  - Severe sepsis – underlying infection, R65.2-, organ dysfunction
  - Septic shock – systemic infection, R65.21 (or T81.12), organ dysfunction
ICD-10-CM: Chapter-Specific Guidelines

Chapter 2: Neoplasms (C00-D49)

- Not all cancers are found in the Table of Neoplasms
  - Adenoma, lipoma,
- Sequencing:
  - Treatment for malignancy – code the malignancy first EXCEPT when encounter is for chemo/radiation/immunotherapy, then Z51.- first, followed by code for malignancy
  - If secondary site is being treated, code it first followed by primary site
  - As long as treatment is directed at cancer, code the patient with malignancy

ICD-10-CM: Chapter-Specific Guidelines

Chapter 2: Neoplasms (C00-D49)

- Complications and sequencing
  - Anemia due to malignancy – malignancy coded first, then anemia
  - Anemia due to treatment – anemia coded first, then malignancy
  - Dehydration due to malignancy – dehydration sequenced first, then malignancy
  - When patient is seen solely for chemo, immuno, or radiation therapy – Z51.- followed by malignancy
ICD-10-CM: Chapter-Specific Guidelines

Chapter 2: Neoplasms (C00-D49)
• But wait... there’s more on sequencing!
• Encounter to treat primary malignancy – primary site, then any metastatic sites
• Encounter to treat secondary site – metastatic site, then primary site
• Malignancy in a pregnant patient – O9A.1-, then malignancy code
• Complication due to neoplasm – complication, then malignancy (except anemia)
• Pathologic fracture due to neoplasm – M84.5, the malignancy

ICD-10-CM: Chapter-Specific Guidelines

Chapter 4: Endocrine, Nutritional, Metabolic Diseases (E00-E89)
• Biggest area here: Diabetes
  ▪ Combination codes for type of diabetes, body system affected, complications
  ▪ Sequenced based on reason for the encounter
ICD-10-CM: Chapter-Specific Guidelines

Chapter 5: Mental, Behavioral and Neurodevelopmental Disorders (F01-F99)
- F45.41, pain exclusively related to psychological factors
- Use, Abuse, and Dependence
  - Both use and abuse documented, code abuse only
  - Both abuse and dependence are documented, code only dependence
  - Use, abuse, and dependence are all documented, code only dependence
  - Both use and dependence are documented, code only dependence

Chapter 6: Diseases of the Nervous System (G00-G99)
- G81 and some G83.- Dominant/nondominant side
  - Ambidextrous patients, default is dominant
  - Left side default is non-dominant
  - Right side default is dominant
- Pain
  - G89.- sequenced first when encounter is for pain control or management
  - No time frame for chronic pain
  - Neoplasm-related pain can be sequenced first if encounter is for pain management
  - Central pain syndrome and chronic pain syndrome are not the same as “chronic pain.”
ICD-10-CM: Chapter-Specific Guidelines

Chapter 7: Diseases of the Eye and Adnexa (H00-H59)
• Glaucoma
  ▪ Guidelines are really helpful here
  ▪ Bilateral code if same type and stage
  ▪ Unilateral if bilateral glaucoma but different type and/or stages

ICD-10-CM: Chapter-Specific Guidelines

Chapter 9: Diseases of the Circulatory System (I00-I99)
• Very specific guidelines for hypertension
• Assumes causal relationship between hypertension and heart as well as hypertension and kidney
  ▪ Hypertension with Heart Disease – I11.- and I50.-
  ▪ Hypertensive Chronic Kidney Disease – I12.- and N18.-
  ▪ Hypertensive Heart and Chronic Kidney Disease – I13.- and N18.-
• Refer to guidelines for sequencing
ICD-10-CM: Chapter-Specific Guidelines

Chapter 9: Diseases of the Circulatory System (I00-I99)
• I69, Sequelae of Cerebrovascular Disease
  ▪ If I60-67 were cause of sequela
• Alphabet soup: AMI, STEMI and NSTEMI
  ▪ Code for type 1 AMI very site specific
  ▪ If NSTEMI evolves to STEMI, code STEMI
  ▪ If STEMI evolves to NSTEMI, code STEMI
• I22, subsequent AMI
  ▪ When patient has had a type 1 (or unspecified) AMI within 4 weeks of the initial type 1 AMI
  ▪ Rules change if not a type 1 AMI

ICD-10-CM: Chapter-Specific Guidelines

Chapter 10: Diseases of the Respiratory System (J00-J99)
• Respiratory failure can be first or secondary diagnosis, depending on the reason for encounter
• Code only confirmed cases of influenza due to certain identified viruses (J09 and J10)
ICD-10-CM: Chapter-Specific Guidelines

**Chapter 12**: Diseases of the Skin and Subcutaneous Tissue (L00-L99)

- **Pressure Ulcers**
  - L89.- identifies the site and stage of the ulcer
  - Code as many as needed to identify all pressure ulcers
  - Documentation should support ulcer stage
  - Healed pressure ulcers?
- Same rules apply to non-pressure ulcers

---

ICD-10-CM: Chapter-Specific Guidelines

**Chapter 13**: Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)

- **Site and Laterality**
  - Very, very specific as to bone, joint, or muscle involved as well as multiple sites
- **Bone, joint or muscle conditions due to previous injury**
  - found here
- **Pathological fractures**
  - Fractures due to an underlying condition (malignancy, osteoporosis, etc.)
  - Osteoporosis with versus without pathological fracture
  - 7th characters!
ICD-10-CM: Chapter-Specific Guidelines

Chapter 14: Diseases of the Genitourinary System (N00-N99)
- Stages of Chronic Kidney Disease – N18.-
- If both a stage of CKD and ESRD are documented, code only N18.6
- Don’t forget to code Dialysis status – Z99.2

Chapter 15: Pregnancy, Childbirth, and the Puerperium (O00-O9A)
- Chapter 15 codes have sequencing priority over all other chapters
- Coded only to maternal record
- Final character for most codes indicates trimester
  - Some indicate fetus for complication code
- Guidelines critical for this chapter
ICD-10-CM: Chapter-Specific Guidelines

Chapter 15: Pregnancy, Childbirth, and the Puerperium (O00-O9A)

- Selecting first-listed code for prenatal visits
  - If no complications are present – Z34
  - High-risk pregnancy – O09
- Delivery with no complications – O80
- Encounter with no delivery – code reason for encounter
- Encounter with delivery – code reason(s) for encounter, most related to the delivery first
- Outcome of delivery on maternal record any time a delivery occurs – Z37.

ICD-10-CM: Chapter-Specific Guidelines

Chapter 15: Pregnancy, Childbirth, and the Puerperium (O00-O9A)

- Fetal condition affecting management of mother
  - Only code if management of mother is affected - O35-O36
  - In utero surgery
    - Coded from category O35, nothing coded for fetus
  - HIV in pregnancy
    - O98.7- and HIV-related illness
ICD-10-CM: Chapter-Specific Guidelines

Chapter 15: Pregnancy, Childbirth, and the Puerperium (O00-O9A)

- Normal delivery – O80
  - Only code for outcome of normal delivery is Z37.0
- Trimesters are defined as:
  - 1st trimester – first day of LMP to less than 14 weeks 0 days
  - 2nd trimester – 14 weeks 0 days to less than 28 weeks 0 days
  - 3rd trimester – 28 weeks 0 days to delivery

ICD-10-CM: Chapter-Specific Guidelines

Chapter 16: Certain Conditions Originating in the Perinatal Period (P00-P96)

- Codes never for use on maternal record
- Birth episode – code from Z38.- on newborn record
- Codes can be used throughout life of patient as long as condition originated in perinatal period
- Observation of newborns for suspected conditions
  - Conditions not found – Z05.-
  - Can be used for readmission
- Codes for prematurity, fetal retardation, low birth weight, immaturity status are subject to doctor’s determination and documentation
ICD-10-CM: Chapter-Specific Guidelines

Chapter 17: Congenital malformations, deformations, and chromosomal abnormalities (Q00-Q99)
- Assign when documented
- If a unique code does not exist, assign codes for manifestations
- Codes can be used throughout life of the patient
- If malformation has been corrected, use personal history code

Chapter 18: Symptoms, signs, and abnormal clinical laboratory findings, not elsewhere classified (R00-R99)
- Assign when a diagnosis is not classifiable elsewhere
- Code when a definitive diagnosis has not been established
- Do not assign symptoms routinely associated with a condition
- Death NOS – R99
  - Very limited use
ICD-10-CM: Chapter-Specific Guidelines

Chapter 19: Injury, poisoning, and certain other consequences of external causes (S00-T88)

- Traumatic fractures – 7th characters!
  - Code separate injuries unless a combination code is provided
  - Do not code superficial injuries when associated with more severe injuries of the same site
  - A fracture not indicated as open or closed is coded to closed
  - A fracture not indicated as displaced or nondisplaced is coded to displaced

- 7th character “A,” initial encounter, for each encounter where the patient is receiving active treatment
- 7th character “D,” subsequent encounter, for each encounter where the patient has completed active treatment and is receiving routine care during the healing or recovery phase
- 7th character “S,” sequela, is for complications or conditions that arise as a direct result of a condition
ICD-10-CM: Chapter-Specific Guidelines

**Chapter 19:** Injury, poisoning, and certain other consequences of external causes (S00-T88)

- Coding of Burns and Corrosions
  - Burns: thermal, except sunburns, from heat source
  - Corrosions: chemical
- Sequence burn of the highest degree first
- Burns of the same anatomic site are coded to highest degree
- Infected burns are additionally coded for the infection
- Code to extent of body surface – T31 or T32
- Rule of Nines (except children) unless doctor documents otherwise

---

ICD-10-CM: Chapter-Specific Guidelines

**Chapter 19:** Injury, poisoning, and certain other consequences of external causes (S00-T88)

- Adverse Effects, Poisoning, Underdosing and Toxic Effects
  - Table includes substance as well as intent
  - Do not code directly from the Table
  - Use as many codes as necessary
  - If two or more drugs, code each individually
- Adverse effect: when a drug has been properly prescribed and administered but patient has a reaction
  - Code nature of the adverse effect, followed by the adverse effect code (T36-T50) to the 7th character
ICD-10-CM: Chapter-Specific Guidelines

Chapter 19: Injury, poisoning, and certain other consequences of external causes (S00-T88)

• Poisoning: improper use of a medication
  ▪ First code T36-T50
  ▪ 5th or 6th character describes intent (accidental, intentional self-harm, assault, undetermined)
  ▪ Do not code intentional unless documented
• Underdosing: taking less than prescribed
  ▪ Never a first-listed diagnosis
• Toxic effect: harmful substances ingested or comes in contact
  ▪ Same 5th or 6th characters as poisoning

ICD-10-CM: Chapter-Specific Guidelines

Chapter 20: External Causes of Morbidity (V00-Y99)

• Has its own index!
• Never sequenced as first-listed codes
• Can be used with any code from A00-T88.9, Z00-Z99
• Assign for each encounter for which the injury or condition is being treated
• Assign as many as necessary to fully explain each cause
• Sequencing:
  ▪ External cause
  ▪ Place of occurrence
  ▪ Activity
ICD-10-CM: Chapter-Specific Guidelines

Chapter 20: External Causes of Morbidity (V00-Y99)
- Multiple External Cause Coding Guidelines
  - External cause codes for child and adult abuse take priority over all other external cause codes
  - Codes for terrorism events take priority over all other codes except child and adult abuse
  - Codes for cataclysmic events take priority over all other codes except child and adult abuse and terrorism
  - Codes for transport accidents take priority over all other codes except child and adult abuse, terrorism, and cataclysmic events

Chapter 21: Factors influencing health status and contact with health services (Z00-Z99)
- Z codes explain the reason for an encounter when a patient requires health services but is not ill nor injured
- Can be used in any health setting
- Alphabetic Index main terms:
  - Admission
  - Aftercare
  - Attention (to)
  - Care
  - Carrier
  - Checking
  - Contraception
  - Counseling
  - Dialysis
  - Donor
  - Examination
  - Fitting
  - Healthy
  - History
  - Maintenance
  - Maladjustment
  - Observation
  - Problem
  - Procedure
  - Prophylactic
  - Replacement
  - Screening
  - Status
  - Supervision
  - Test
  - Transplant
  - Unavailability
  - Vaccination
Thank you for your time.

Questions?