ICD 10 CM: Training & Implementation Issues for The Provider Office

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ICD-10-CM Mission 2014

- Why ICD-10?
- Mechanics of ICD-10





Why ICD-10?





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Why are we doing this?

Here is an excerpt taken from the final ruling

"...[T]he ICD-10 code sets provide a standard coding convention that is flexible, providing unique codes for all substantially different health conditions. It also allows new diagnoses to be easily incorporated as new codes for both existing & future clinical protocols. ICD-10-CM provides specific diagnosis & treatment information that can improve quality measurements and patient safety, and the evaluation of medical processes and outcomes."





Global use of ICD-10: Catching up with the industrialized world



ICD-10 Mechanics





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What is ICD-10-CM?

ICD-10-CM

- –US clinical modification of the World Health Organization's ICD-10
- -Diagnostic coding system (no procedure codes)
 - Used for coding of all Outpatient (including physician offices) & Inpatient.
 - More codes to provide more specificity
 - Ability to be easily expanded





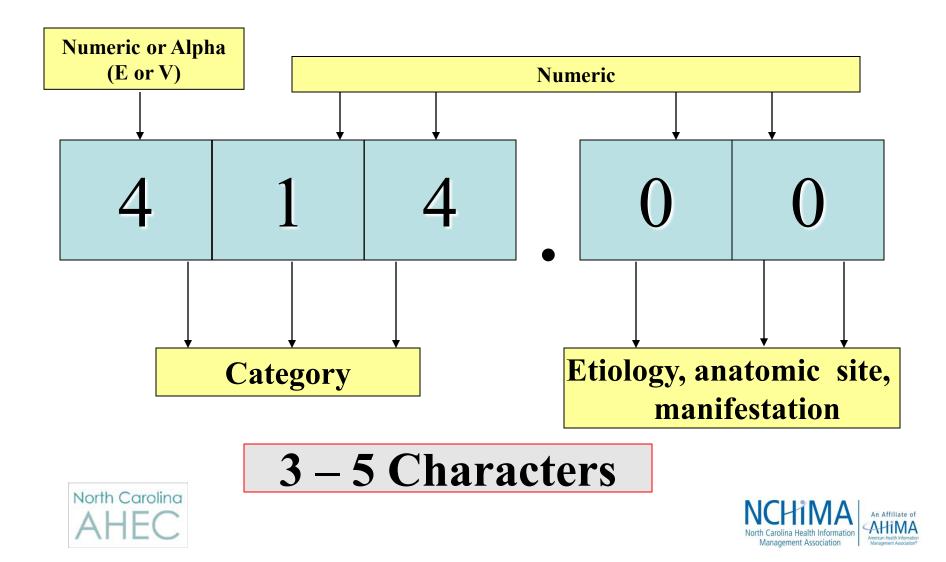
ICD-10-CM Significant Improvements

- Enhanced system flexibility
- Better reflection of current medical terminology
- Expanded detail relevant to ambulatory and managed care encounters
- Incorporation of recommended revisions to ICD-9-CM that could not be accommodated
- HIPAA criteria for code set standards are met

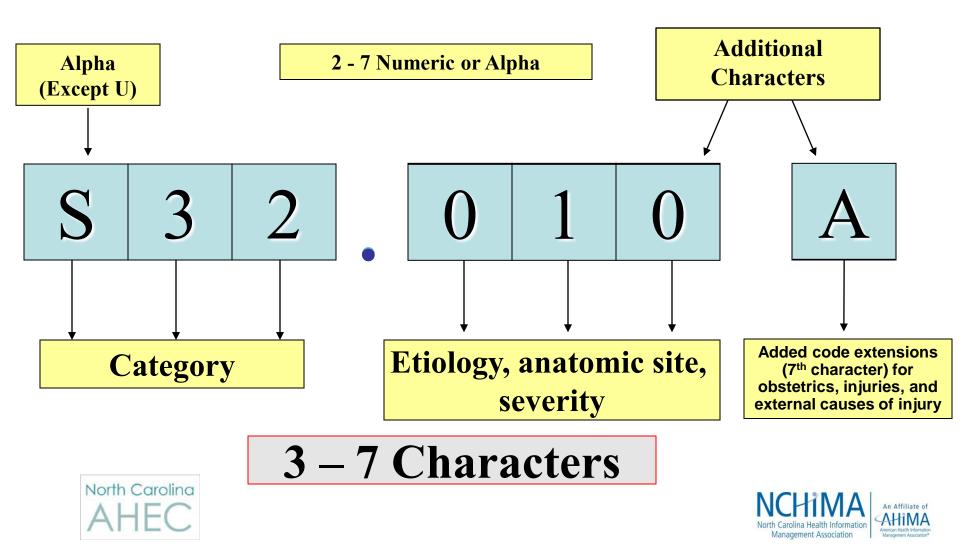




ICD-9-CM Structure – Format



ICD-10-CM Structure – Format



ICD-10-CM Structure

ICD-9-CM

3 - 5 characters

- First character is numeric or alpha (E or V)
- 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





Diagnosis Code Comparisons

ICD-9-CM

ICD-10-CM

- 3 Characters 486
- 4 Characters 428.0
- 5 Characters 427.31

- 3 Characters C37
- 4 Characters A18.4
- 5 Characters B58.81
- 6 Characters 169.042
- 7 Characters S35.411A





Changes in Organization

- ICD-10-CM consists of 21 chapters.
- Some chapters include the addition of a sixth character.
- ICD-10-CM includes full code titles for all codes (no referencing back to common fourth and fifth digits).
- V and E codes are no longer supplemental classifications .They have their own chapter.





- Sense organs are no longer in the nervous system disorders. Eye (Chapter 7) and Ear (Chapter 8) have their own chapters
- Injuries are grouped by anatomical site rather than injury category.
- Postoperative complications have been moved to procedure-specific body system chapter.





ICD 9 CM vs. ICD 10 CM

ICD 9 CM

•13,000 Codes

•Not a lot of specificity

ICD 10 CM

•68,000 Codes

•Allows for greater specificity

•Provides info for clinical decision making and clinical outcomes

•Better understanding of complications and research



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Comparison of Codes 3 digits, alpha, 6 digits

ICD 9 CM

•401.9 Hypertension

•240.9 Goiter, unspecified

ICD 10 CM

•I10 Essential hypertension

•E04.9 Nontoxic goiter, unspecified

•249.5 (362.07) Diabetic retinopathy with macular edema •E11.311 Type II diabetes mellitus with unspecified diabetic retinopathy with macular edema





ICD-10 CM

Similarities





Format

- Tabular List and Index
 - Chapters in Tabular structured similarly to ICD-9-CM, with minor exceptions
 - A few chapters have been restructured
 - Sense organs (eye and ear) separated from Nervous
 System chapter and moved to their own chapters
 - Index structured the same as ICD-9-CM
 - Alphabetic Index of Diseases and Injuries
 - Alphabetic Index of External Causes
 - Table of Neoplasms
 - Table of Drugs and Chemicals





Divided into Alphabetic Index and Tabular List

- Structure and format are the same
- Index is alphabetical list of terms and their corresponding codes
 - Alphabetic Index lists main terms in alphabetical order with indented subterms under main terms
 - Index is divided into 2 parts: Index to Diseases and Injuries and Index to External Causes





- Tabular List is a chronological list of codes divided into chapters based on body system or condition
- Tabular List is presented in code number order
- Same hierarchical structure
- Codes are invalid if they are missing an applicable character
- Codes are looked up the same way
 - Look up diagnostic terms in Alphabetic Index
 - Then verify code number in Tabular List





Many conventions have same meaning

- Abbreviations, punctuation, symbols, notes such as "code first" and "use additional code"
- Nonspecific codes ("unspecified" or "not otherwise specified") are available to use when detailed documentation to support more specific code is not available
- ICD-10-CM Official Guidelines for Coding and Reporting accompany and complement ICD-10-CM conventions and instructions

Adherence to the official coding guidelines in all healthcare settings is required under the Health Insurance Portability and Accountability Act

An Affiliate

ICD-10-CM

Differences





How is ICD-10-CM Different From ICD-9-CM?

- Alphanumeric (alpha characters are <u>not</u> casesensitive)
- Codes can be up to 7 characters in length
- Code titles are more complete
- Specificity and detail significantly expanded
- Certain diseases reclassified to reflect current medical knowledge





ICD-10-CM New Features

Combination codes for conditions and common symptoms or manifestations

Combination codes for poisonings and external causes

Added laterality

Expanded codes (injury, diabetes, alcohol/substance abuse, postoperative complications)

Injuries grouped by anatomical site rather than injury category





ICD-10-CM - Combination Codes

I25.110 Atherosclerotic heart disease of native coronary artery with unstable angina pectoris

- K71.51 Toxic liver disease with chronic active hepatitis with ascites
- K50.814 Crohn's disease of both small and large intestine with abscess
- N41.01 Acute prostatitis with hematuria
- E11.311 Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema
- K57.21 Diverticulitis of large intestine with perforation and abscess with bleeding





Extensions and Placeholders New for ICD 10 CM

- Two noteworthy modifications to the code format that coders need to be aware of are <u>extensions and placeholders</u>.
- Both of these require the coder to use an alphabetic character in a location other than the first position.





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What is an Extension?

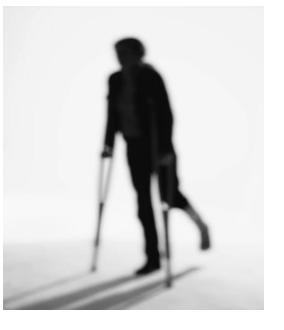
- Code extensions (seventh character) have been added for injuries and external causes to identify the encounter: initial, subsequent, or sequela.
- The extensions are:
 - A Initial encounter
 - D Subsequent encounter
 - S Sequelae





ICD-10-CM - Injury and External Cause 7th Character

The extension also exists to provide further specificity about the condition being coded. The extension may be a number or letter and must always be the seventh character



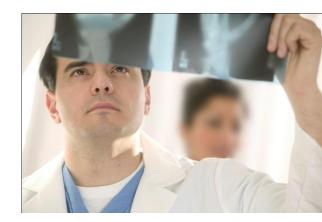




ICD-10-CM - Fracture Extensions

- A Initial encounter for closed fracture
- B Initial encounter for open fracture
- D Subsequent encounter for fracture with routine healing
- G Subsequent encounter for fracture with delayed healing
- K Subsequent encounter for fracture with nonunion
- P Subsequent encounter for fracture with malunion
- S Sequelae

North Carolina





ICD-10-CM – Fracture Extensions (con't)

- A Initial encounter for closed fracture
- B Initial encounter for open fracture type I or II (open NOS)
- C Initial encounter for open fracture type IIIA, IIIB, or IIIC
- D Subsequent encounter for closed fracture with routine healing
- E Subsequent encounter for open fracture type I or II with routine healing
- F Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
- G Subsequent encounter for closed fracture with delayed healing





ICD-10-CM - Fracture Extensions (con't)

- H Subsequent encounter for open fracture type I or II with delayed healing
- J Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
- K Subsequent encounter for closed fracture with nonunion
- M Subsequent encounter for open fracture type I or II with nonunion
- N Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with nonunion





ICD-10-CM - Fracture Extensions (con't)

- P Subsequent encounter for closed fracture with malunion
- Q Subsequent encounter for open fracture type I or II with malunion
- R Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with malunion
- S Sequelae





ICD-10-CM Open Fracture Designations

- 7th characters for open fractures are based on Gustilo classification – requires physician documentation of open fracture type:
 - I wound less than 1 cm with minimal soft tissue injury
 - II wound greater than 1 cm with moderate soft tissue injury
 - III High energy wound greater than 1 cm with extensive soft tissue damage
 - IIIA adequate soft tissue cover
 - IIIB inadequate soft tissue cover, requiring regional or free flap
 - IIIC involves vascular injury requiring repair





Dummy Placeholder

- A second important change to code format is the use of a dummy placeholder. The placeholder is always the letter "x" and it has two uses:
- As the fifth character for certain 6 character codes. The "x" provides for future expansion without disturbing the sixth character structure.





Coding to the highest level of specificity

2. When a code has less than 6 characters and a 7th character extension is required. The "x" is assigned for all characters less than six in order to code to meet the requirement of coding to the highest level of specificity.



35



Specificity looks like this...

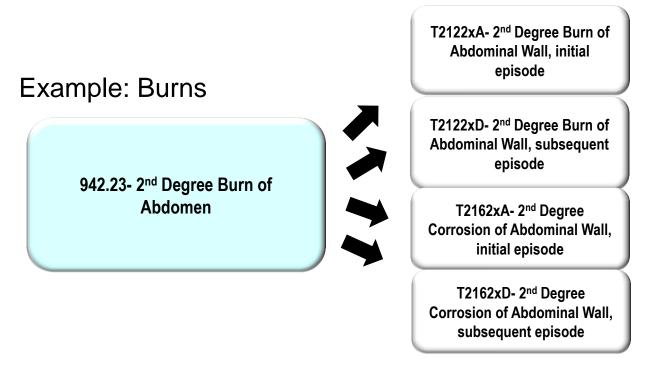
			ICD-10-CM	-10-CM	
		S72301A Unspecified fracture of shaft of right femur, initial encounter for closed fracture	S72322A Displaced transverse fracture of shaft of left femur, initial encounter for closed fracture	S72326A Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture	
		S72301G Unspecified fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing	S72322G Displaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing	S72326G Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing	
ICD-9-CM		S72302A Unspecified fracture of shaft of left femur, initial encounter for closed fracture	S72323A Displaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture	S72331A Displaced oblique fracture of shaft of right femur, initial encounter for closed fracture	
821.01 Fracture of femur, shaft, closed		S72302G Unspecified fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing	S72323G Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing	S72331G Displaced oblique fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing	
		S72309A Unspecified fracture of shaft of unspecified femur, initial encounter for closed fracture	S72324A Nondisplaced transverse fracture of shaft of right femur, initial encounter for closed fracture	S72332A Displaced oblique fracture of shaft of left femur, initial encounter for closed fracture	
		S72309G Unspecified fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing	S72324G Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing	S72332G Displaced oblique fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing	
		S72321A Displaced transverse fracture of shaft of right femur, initial encounter for closed fracture	S72325A Nondisplaced transverse fracture of shaft of left femur, initial encounter for closed fracture	S72333A Displaced oblique fracture of shaft of unspecified femur, initial encounter for closed fracture	
		S72321G Displaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing	S72325G Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing	S72333G Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing	
	· ·	Many possible codes			

Benefits

ICD-10 codes are **more specific**, which means there is **potential** for...

- More accurate payment for procedures
- Fewer rejected claims
- Better coding compliance
- Better understanding of outcomes and quality data
- Enhanced disease management
- Facilitation of computer-assisted coding systems
- Improved documentation
- Better interoperability for EHRs
- Greater flexibility for expansion of new codes

Better decisions with ICD-10



- ICD-9 codes do not distinguish between thermal and chemical burns
- ICD-10 codes have separate codes for thermal versus chemical burns
- Documentation is key!

Dummy Placeholder Example

T75.4xxA

- ICD-10-CM code for electrocution
- requires the use of a seventh character to identify the encounter as an initial encounter.





Laterality

• ICD-10-CM includes codes for laterality. There are codes for right side, left side, and bilateral sides. These are located in those chapters where it was determined to be appropriate. An unspecified side code is also available when the side is not designated.





ICD-10-CM - Laterality Examples

C50.211 Malignant neoplasm of upper-inner quadrant of right female breast

H02.032 Senile entropion of right lower eyelid

M05.271 Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot

S80.261A Insect bite (nonvenomous), right knee, initial encounter





ICD-10-CM Excludes Notes

Excludes1:

Means NOT CODED HERE

Code being excluded is never used at the same time with code above the Excludes1

- The two conditions cannot occur together such as congenital form vs. acquired form of same condition
- Example:
 - B06 Rubella [German measles]

North Carolina Excludes1: congenital rubella (P35.0)



ICD-10-CM Excludes Notes

Excludes2:

Means NOT INCLUDED HERE

Excluded condition is not part of the condition represented by the code

When appropriate- acceptable to use both codes together if patient has both conditions at the same time

- Example:
 - J03 Acute tonsillitis
 - Excludes2: chronic tonsillitis (J35.0)





ICD-10-CM Coding Examples:

Hypertension

<u>Step 1</u>

Look up term in Alphabetic Index:

Hypertension, hypertensive (accelerated) (benign) (essential) (idiopathic) (malignant) (systemic) I10





ICD-10-CM Coding Examples

Hypertension (con't)

<u>Step 2</u>

Verify code in Tabular:

I10 Essential (primary) hypertension Includes: high blood pressure hypertension (arterial) (benign) (essential) (malignant) (primary) (systemic) *Excludes1:* hypertensive disease complicating pregnancy, childbirth and the puerperium (010-011, 013-016) **Excludes2**: essential (primary) hypertension involving vessels of brain (160-169) essential (primary) hypertension involving vessels of eye (H35.0) North Carolina





ICD-10-CM Coding Examples:

Type I diabetes mellitus with diabetic nephropathy

<u>Step 1</u>

Look up term in Alphabetic Index:

- Diabetes, diabetic (mellitus) (sugar) E11.9
 - type 1 E10.9

with

nephropathy E10.21





ICD-10-CM Coding Examples

Type I diabetes mellitus with diabetic nephropathy (con't) <u>Step 2</u>

Verify code in Tabular:

E10 Type 1 diabetes mellitus

E10.2 Type 1 diabetes mellitus with kidney complications

E10.21 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



