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

Presented by:
AHEC &
NCHIMA ICD-10 Faculty
ICD-10-CM
Mission 2014

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

Numeric or Alpha (E or V)

Category

Etiology, anatomic site, manifestation

3 – 5 Characters
ICD-10-CM Structure – Format

Category | Etiology, anatomic site, severity | Additional Characters

Alpha (Except U) | 2 - 7 Numeric or Alpha | Added code extensions (7th character) for obstetrics, injuries, and external causes of injury

S 3 2 | 0 1 0 | A

3 – 7 Characters

North Carolina AHEC
## 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 not case-sensitive
## Diagnosis Code Comparisons

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
</tr>
</thead>
<tbody>
<tr>
<td>3 Characters – 486</td>
<td>3 Characters – C37</td>
</tr>
<tr>
<td>4 Characters – 428.0</td>
<td>4 Characters – A18.4</td>
</tr>
<tr>
<td>5 Characters – 427.31</td>
<td>5 Characters – B58.81</td>
</tr>
<tr>
<td></td>
<td>6 Characters – I69.042</td>
</tr>
<tr>
<td></td>
<td>7 Characters – S35.411A</td>
</tr>
</tbody>
</table>
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
Comparison of Codes
3 digits, alpha, 6 digits

**ICD 9 CM**
- 401.9 Hypertension
- 240.9 Goiter, unspecified
- 249.5 (362.07) Diabetic retinopathy with macular edema

**ICD 10 CM**
- I10 Essential hypertension
- E04.9 Nontoxic goiter, unspecified
- E11.311 Type II diabetes mellitus with unspecified diabetic retinopathy with macular edema
ICD-10 CM

Similarities
How is ICD-10-CM Similar to ICD-9-CM?

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
How is ICD-10-CM Similar to ICD-9-CM?

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
How is ICD-10-CM Similar to ICD-9-CM?

• 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
How is ICD-10-CM Similar to ICD-9-CM?

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

- Alphanumeric (alpha characters are not case-sensitive)
- 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
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 extensions and placeholders.
- Both of these require the coder to use an alphabetic character in a location other than the first position.
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
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
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:

1. 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.
Specificity looks like this...

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
</tr>
</thead>
<tbody>
<tr>
<td>821.01 Fracture of femur, shaft, closed</td>
<td>S72301A Unspecified fracture of shaft of right femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72301G Unspecified fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72302A Unspecified fracture of shaft of left femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72302G Unspecified fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72309A Unspecified fracture of shaft of unspecified femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72309G Unspecified fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72321A Displaced transverse fracture of shaft of right femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72321G Displaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72324A Nondisplaced transverse fracture of shaft of right femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72324G Nondisplaced transverse fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72325A Nondisplaced transverse fracture of shaft of left femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72325G Nondisplaced transverse fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72326A Nondisplaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72326G Nondisplaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72328A Displaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72328G Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72329A Displaced transverse fracture of shaft of unspecified femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72329G Displaced transverse fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72331A Displaced oblique fracture of shaft of right femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72331G Displaced oblique fracture of shaft of right femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72332A Displaced oblique fracture of shaft of left femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72332G Displaced oblique fracture of shaft of left femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S72333A Displaced oblique fracture of shaft of unspecified femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S72333G Displaced oblique fracture of shaft of unspecified femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
</tbody>
</table>

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

Example: Burns

942.23- 2nd Degree Burn of Abdomen

- 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
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]
    – 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

**Step 1**

*Look up term in Alphabetic Index:*

Hypertension, hypertensive (accelerated) (benign) (essential) (idiopathic) (malignant) (systemic) I10
Hypertension (con’t)

**Step 2**

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 (O10-O11, O13-O16)

*Excludes2:* essential (primary) hypertension involving vessels of brain (I60-I69) essential (primary) hypertension involving vessels of eye (H35.0)
ICD-10-CM Coding Examples:

Type I diabetes mellitus with diabetic nephropathy

**Step 1**

*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)

**Step 2**

*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