WHY I NEED TO KNOW ABOUT ICD – 10

April 2014
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Senate delays ICD-10, patches SGR

March 31, 2014 | Tom Sullivan, Editor

The U.S. Senate voted Monday night to pass the Protecting Access to Medicare Act of 2014, which both pushes back the compliance deadline for ICD-10 and preserves the pay rate for doctors treating Medicare patients.

Senators moved the bill along by a vote of 64 to 35.

As was the case in the House hearing last Thursday, members of Congress spoke passionately about how problematic the bill and the process of cramming it through have been.

“We need to restore sanity to the Medicare payment system,” said Majority Leader Harry Reid (D-NV) at the beginning of the debate. “The fact remains, this legislation is not perfect, it’s not ideal.”

Later, Sen. Orrin Hatch (R-UT) added: “I’m not going to make the perfect the enemy of the good. I plan to vote in favor of the SGR bill today.”

Hatch, as it turned out was in the majority. The provision to delay ICD-10 may go largely unnoticed in the general citizenry, yet it was among the flaws that sparked something of an uproar in the healthcare realm, where the code set conversion is among the most contentious issues.

“This idea of bundling a ‘bad thing’ with a ‘good thing’ in a bill that is sure to pass because of the ‘good thing’ is sort of crazy,” said healthcare technology consultant Steve Sisko.
What you will learn:

1. ICD-10 is better than ICD-9

2. Why is documentation important?

3. What to do next?
ICD is not new
1662: London Bills of Mortality—attempt to define mortality rate and causes under age 6 in England
International Classification of Diseases (ICD) is an official copyrighted publication of the World Health Organization (WHO)

- 1900: First of decennial revisions to International List of Causes of Death
- 1946: WHO takes over ICD
- 1948: ICD-6 combines morbidity and mortality lists together
- 1968: Public Health Service published ICD-8
- 1975: WHO releases ICD-9
- 1979: US Clinical Modification (ICD-9-CM) is published and becomes the primary reference for morbidity and mortality statistics
  - a public-private collaboration (cooperating parties)
  - National Center for Health Statistics/CDC (NCHS)
  - Centers for Medicare and Medicaid Services (CMS)
  - American Hospital Association
  - American Health Information Management Association
Background and facts

• WHO released **ICD-10** in 1990
• Each Country creates their own version Ex: **ICD-10 CA**
• There will be **2 ICD-10s** in the US (kind of)
• US version is **ICD-10 CM** (68 000 codes) is only for diagnoses
• US version also includes **ICD-10 PCS** (78 000 codes) for procedures
• US is the only country that uses **ICD-10 PCS**
• **ICD-10** is not a more specific version of **ICD-9**
Case

6 year old girl presents with sore throat, fever, and difficulty swallowing.

This is the second visit for the same symptoms in the last 2 months.

Tonsils are enlarged and red; rapid strep test is positive.
What is it?

ICD – 9:
034.0 Streptococcal sore throat

ICD – 10:
J03.01 Acute recurrent streptococcal tonsillitis
ICD-10 is more specific

What if the tonsils were not inflamed? Just the pharynx?

ICD – 10:
J02.0 Streptococcal *pharyngitis*
Case

- Patient presents for seizures.

- He has had occasional seizures, mainly when he does not take his medications.

- After he received a dose of treatment, he is now starting to wake up and is no longer convulsing.
Which code describes this patient best?

**ICD – 9:**
Epilepsy, unspecified, without mention of intractable epilepsy (345.90)

**ICD – 10:**
Seizure disorder, poorly controlled with break-through seizures, without status epilepticus (G40.919)
Case

- Patient presents for initial visit.
- She has Diabetes Mellitus type 1
- 8 weeks gestation
Which code describes this patient best?

**ICD – 9:**
Diabetes mellitus of mother, complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication (648.03)

**ICD – 10:**
Pre-existing diabetes mellitus, type 1, first trimester, (O24.011)
Case

- Child presents for pain of Left ear.
- Exam reveals tympanic inflammation and pus.
- This is the third episode in 1 year.
Which code describes this patient best?

**ICD – 9:**
Acute suppurative otitis media in diseases classified elsewhere (382.02)

**ICD – 10:**
Acute suppurative otitis media of Left ear, recurrent (H66.004)
Case

Patient lost her **insurance** and started **skipping medications** because she cannot afford to buy them all the time.
Which code describes this patient best?

**ICD – 9:**
Personal history of noncompliance with medical treatment, presenting hazards to health (V15.81)

**ICD – 10:**
Intentional under-dosing of medication due to financial hardship (Z91.120)

- You can also find: Patient’s unintentional under-dosing of medication regimen due to age-related debility
Case

• Patient has an acute MI

• 2-D echocardiogram reveals a thrombus in the left ventricle.
Which code describes this patient best?

ICD – 9:
Other ill-defined heart diseases (429.89)

ICD – 10:
Intracardiac thrombosis (I51.3)

Other AMI complications can be coded:
Hemopericardium, Ruptured heart, Internal heart damaged (ASD, VSD), Ruptured papillary muscle
ICD-10 provides additional clarity:

1. Elimination of episodes of care for obstetric codes

2. Changes in time frames:
   Early vs. Late pregnancy (20 weeks)

3. Code extensions to denote the specific fetus in multiple gestation pregnancies
Notable enhancement is trimester of pregnancy

ICD-9-CM
649.53 Spotting complicating pregnancy, antepartum

ICD-10-CM
O26.851 Spotting complicating pregnancy, first trimester
O26.852 Spotting complicating pregnancy, second trimester
O26.853 Spotting complicating pregnancy, third trimester
O26.859 Spotting complicating pregnancy, unspecified trimester

Trimesters are defined in ICD-10-CM as:
- First trimester: Fewer than 14 weeks, zero days
- Second trimester: 14 weeks, zero days to fewer than 28 weeks, zero days
- Third trimester: 28 weeks, zero days until delivery
Case

70 y/o patient on dialysis has a de-clotting of his AV fistula

ICD-9
39.49 – other revision of vascular procedure

ICD-10
36870 - Percutaneous AV thrombectomy
Case

56 y/o undergoes bladder surgery with ileal conduit creation

ICD-9
56.89 – other repair of ureter

ICD-10 – Bypass of the Right Ureter to the Ileum with Autologous Tissue Substitute, Open Approach
Makes more sense

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>K5000</td>
<td>Crohn's disease of small intestine without complications</td>
</tr>
<tr>
<td>K50011</td>
<td>Crohn's disease of small intestine with rectal bleeding</td>
</tr>
<tr>
<td>K50012</td>
<td>Crohn's disease of small intestine with intestinal obstruction</td>
</tr>
<tr>
<td>K50013</td>
<td>Crohn's disease of small intestine with fistula</td>
</tr>
<tr>
<td>K50014</td>
<td>Crohn's disease of small intestine with abscess</td>
</tr>
<tr>
<td>K50018</td>
<td>Crohn's disease of small intestine with other complication</td>
</tr>
<tr>
<td>K50019</td>
<td>Crohn's disease of small intestine with unspecified complications</td>
</tr>
<tr>
<td>K5010</td>
<td>Crohn's disease of large intestine without complications</td>
</tr>
<tr>
<td>K50111</td>
<td>Crohn's disease of large intestine with rectal bleeding</td>
</tr>
<tr>
<td>K50112</td>
<td>Crohn's disease of large intestine with intestinal obstruction</td>
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<td>K50114</td>
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</tr>
<tr>
<td>K50118</td>
<td>Crohn's disease of large intestine with other complication</td>
</tr>
<tr>
<td>K50119</td>
<td>Crohn's disease of large intestine with unspecified complications</td>
</tr>
<tr>
<td>K5080</td>
<td>Crohn's disease of both small and large intestine without complications</td>
</tr>
<tr>
<td>K50811</td>
<td>Crohn's disease of both small and large intestine with rectal bleeding</td>
</tr>
<tr>
<td>K50812</td>
<td>Crohn's disease of both small and large intestine with intestinal obstruction</td>
</tr>
<tr>
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</tr>
<tr>
<td>K50814</td>
<td>Crohn's disease of both small and large intestine with abscess</td>
</tr>
<tr>
<td>K50818</td>
<td>Crohn's disease of both small and large intestine with other complication</td>
</tr>
<tr>
<td>K50.9</td>
<td>Crohn's disease, unspecified</td>
</tr>
<tr>
<td>K50.90</td>
<td>Crohn's disease, unspecified, without complications</td>
</tr>
<tr>
<td>K50.91</td>
<td>Crohn's disease, unspecified, with complications</td>
</tr>
<tr>
<td>K50.911</td>
<td>Crohn's disease, unspecified, with rectal bleeding</td>
</tr>
<tr>
<td>K50.912</td>
<td>Crohn's disease, unspecified, with intestinal obstruction</td>
</tr>
<tr>
<td>K50.913</td>
<td>Crohn's disease, unspecified, with fistula</td>
</tr>
<tr>
<td>K50.914</td>
<td>Crohn's disease, unspecified, with abscess</td>
</tr>
<tr>
<td>K50.918</td>
<td>Crohn's disease, unspecified, with other complication</td>
</tr>
<tr>
<td>K50.919</td>
<td>Crohn's disease, unspecified, with unspecified complications</td>
</tr>
</tbody>
</table>
5550 Reg enteritis, sm intest
5551 Reg enteritis, lg intest
5552 Reg enterit sm/lg intest
5559 Regional enteritis NOS

K5000 Crohn's disease of small intestine without complications
K50011 Crohn's disease of small intestine with rectal bleeding
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K50113 Crohn's disease of large intestine with fistula
K50114 Crohn's disease of large intestine with abscess
K50118 Crohn's disease of large intestine with other complication
K50119 Crohn's disease of large intestine with unspecified complications
K5080 Crohn's disease of both small and large intestine without complications
K50811 Crohn's disease of both small and large intestine with rectal bleeding
K50812 Crohn's disease of both small and large intestine with intestinal obstruction
K50813 Crohn's disease of both small and large intestine with fistula
K50814 Crohn's disease of both small and large intestine with abscess
K50818 Crohn's disease of both small and large intestine with other complication
  - K50.9 Crohn's disease, unspecified
  - K50.90 Crohn's disease, unspecified, without complications
  - K50.91 Crohn's disease, unspecified, with complications
  - K50.911 Crohn's disease, unspecified, with rectal bleeding
  - K50.912 Crohn's disease, unspecified, with intestinal obstruction
  - K50.913 Crohn's disease, unspecified, with fistula
  - K50.914 Crohn's disease, unspecified, with abscess
  - K50.918 Crohn's disease, unspecified, with other complication
  - K50.919 Crohn's disease, unspecified, with unspecified complications
The Only Thing New is Complications  
4 → 28
Some codes will have the same wording between the 2 codes sets

<table>
<thead>
<tr>
<th>ICD-9</th>
<th>ICD-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>003.21 Salmonella Meningitis</td>
<td>A02.21 Salmonella Meningitis</td>
</tr>
</tbody>
</table>
ICD-9-CM has certain specificities that get simplified in I-10

<table>
<thead>
<tr>
<th>ICD-9</th>
<th>ICD-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>010.90 Primary tuberculous infection, unspecified, unspecified</td>
<td>A15.7 <strong>Primary respiratory tuberculosis</strong></td>
</tr>
<tr>
<td>010.91 Primary tuberculous infection, unspecified, bacteriological or histological examination not done</td>
<td></td>
</tr>
<tr>
<td>010.92 Primary tuberculous infection, unspecified, bacteriological or histological examination unknown (at present)</td>
<td></td>
</tr>
<tr>
<td>010.93 Primary tuberculous infection, unspecified, tubercle bacilli found (in sputum) by microscopy</td>
<td></td>
</tr>
<tr>
<td>010.94 Primary tuberculous infection, unspecified, tubercle bacilli not found (in sputum) by microscopy, but found by bacterial culture</td>
<td></td>
</tr>
<tr>
<td>010.95 Primary tuberculous infection, unspecified, tubercle bacilli not found by bacteriological examination, but tuberculosis confirmed histologically</td>
<td></td>
</tr>
<tr>
<td>010.96 Primary tuberculous infection, unspecified, tubercle bacilli not found by bacteriological or histological examination, but tuberculosis confirmed by other methods</td>
<td></td>
</tr>
</tbody>
</table>
ICD-10-CM will be able to comply with guideline documentation: Ex. asthma NHLBI Guidelines

- J45.20 Mild intermittent, uncomplicated
- J45.21 Mild intermittent with (acute) exacerbation
- J45.22 Mild intermittent with status asthmaticus
- J45.30 Mild persistent, uncomplicated
- J45.31 Mild persistent with (acute) exacerbation
- J45.32 Mild persistent with status asthmaticus
- J45.40 Moderate persistent, uncomplicated
- J45.41 Moderate persistent with (acute) exacerbation
- J45.42 Moderate persistent with status asthmaticus
- J45.50 Severe persistent, uncomplicated
- J45.51 Severe persistent with (acute) exacerbation
- J45.52 Severe persistent with status asthmaticus
- J45.901 Unspecified asthma with (acute) exacerbation
- J45.902 Unspecified asthma with status asthmaticus
- J45.909 Unspecified asthma, uncomplicated
- J45.990 Exercise induced bronchospasm
- J45.991 Cough variant asthma
ICD-9 is outdated

- No longer robust enough to meet health care needs
- No longer clinically accurate (a lot has changed in 30 years)
- Structure limits the ability to expand
- Makes comparison of State, National and International morbidity and mortality data difficult
Validity of using ICD-9-CM codes to identify selected categories of obstetric complications, procedures and co-morbidities.
Goff SL¹, Pekow PS, Markenson G, Knee A, Chasan-Taber L, Lindenauer PK.
Assess the validity of using composites of ICD-9-CM codes to identify selected categories obstetric complications and risk factors associated with complications.

Conclusion: Use of composite sets of ICD-9-CM codes may be a valid method to identify patients within these complication categories.
Advantages of ICD-10

Reflects **advances in medicine and medical technology**
- uses current medical terminology and classification of diseases
- more **specificity**

**Laterality** *(Right or Left)* and episode of care

**Flexible**
- can quickly incorporate emerging diagnoses

*(even ICD-10 is starting to be outdated in certain areas)*
There’s obviously also:

Inappropriate (excessive) parental pressure Z62.6

Person on ground injured by being sucked into jet engine (V97.33)
They’ve always been there in ICD-9

E845 — Accident involving spacecraft

E979.5 - Terrorism involving nuclear weapons, Blast effects, Exposure to ionizing radiation from nuclear weapon, Fireball effects, Heat from nuclear weapon, Other direct and secondary
Unlike the ICD-9 codes, ICD-10-CM obstetrical codes are not divided by antepartum, delivery, and postpartum status, but most new codes indicate the **trimester of pregnancy** in their final character.
Documentation Concepts for OB

- Document trimester or weeks of gestation (e.g. 2\textsuperscript{nd} trimester)

- Pre-existing condition or infection (e.g. HIV)

- Documentation must clarify when condition not affecting pregnancy (e.g. broken finger)

- Specify the need to induce or perform C-section delivery before the onset of labor
Key Impacts for OB

- Trimester
- Pre-existing Conditions
- Associated Conditions
- Underlying cause
- Identify Affected Fetus
- Fetal Conditions
TRIMESTER

• **Current trimester**

This assists with identifying the level of risk and severity of the condition

Ex:
Low Weight Gain in Pregnancy, 2\textsuperscript{nd} trimester
PRE-EXISTING CONDITIONS

- Any Condition that exists prior to pregnancy

Ex:
Bicornuate Uterus, Diabetes Mellitus type 1, 34 weeks
ASSOCIATED CONDITIONS

• Common Conditions associated with pregnancy

Ex:
Placenta Previa and Breech Presentation
UNDERLYING CAUSE

- **Underlying Reason, Infectious agent, virus or other agent**

Ex:
Obstructed labor due to Fetopelvic Disproportion
IDENTIFY AFFECTED FETUS

- **Identify the affected fetus by number**

  Ex:
  - Triplet Pregnancy, 30 weeks, baby#3 breech
FETAL CONDITIONS

• **Known or suspected conditions**

  Ex:
  Large for dates
Known or suspected conditions

Ex:
Large for dates
The change to ICD-10-CM does not affect CPT or HCPCS coding for outpatient procedures and physician services.
ICD-10 PCS
<table>
<thead>
<tr>
<th>ICD-9-CM Diagnosis Codes</th>
<th>ICD-10-CM Diagnosis Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-5 Characters in length</td>
<td>3-7 Characters in length</td>
</tr>
<tr>
<td>Approximately 14,000 codes</td>
<td>Approximately 69,000 available codes</td>
</tr>
<tr>
<td>First digit may be alpha; 2nd through 5th is numeric</td>
<td>Character 1 is alpha; character 2 and 3 are numeric; character 4 through 6 can be either</td>
</tr>
<tr>
<td><strong>Limited space for adding new codes</strong></td>
<td><strong>Flexible</strong> for adding new codes</td>
</tr>
<tr>
<td>Lacks detail</td>
<td>Specific</td>
</tr>
<tr>
<td>Lacks laterality</td>
<td>Has laterality</td>
</tr>
<tr>
<td><strong>Difficult to analyze</strong> data due to non-specific codes</td>
<td>Specificity improves coding accuracy and richness of data for analysis</td>
</tr>
<tr>
<td>Codes are non-specific and do not adequately define diagnoses needed for medical research</td>
<td><strong>Detail improves the accuracy</strong> of data used for medical research</td>
</tr>
<tr>
<td>Does not support interoperability because it is not used by other countries</td>
<td>Supports interoperability and the exchange of health data between other countries and the U.S.</td>
</tr>
</tbody>
</table>
Why your words matter - *Take away slide*

Words → Data → Quality
How do payers “know” you?
Hierarchical Condition Categories
Risk Adjustment = Term to remember

<table>
<thead>
<tr>
<th>HCC Category</th>
<th>Title</th>
<th>HCC Coefficient</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCC15</td>
<td>Diabetes with Renal or Peripheral Circulatory Manifestation</td>
<td>0.508</td>
</tr>
<tr>
<td>HCC16</td>
<td>Diabetes with Neurologic or Other Specified Manifestation</td>
<td>0.408</td>
</tr>
<tr>
<td>HCC17</td>
<td>Diabetes with Acute Complications</td>
<td>0.339</td>
</tr>
<tr>
<td>HCC18</td>
<td>Diabetes with Ophthalmologic or Unspecified Manifestation</td>
<td>0.259</td>
</tr>
<tr>
<td>HCC19</td>
<td>Diabetes without Complication</td>
<td>0.162</td>
</tr>
</tbody>
</table>
Why your words matter - Take away slide

Words → Data → Quality
CMS website

Use reimbursement data as feedback to improve payment policies.

ICD-10 codes enable the capture of more accurate data, which enables fair and equitable reimbursement policies for new technologies and more accurate payments/reimbursement rates for new procedures. ICD-10 codes provide richer data from the claims process that could inform changes and improvements to payment policy and allow for the design of better health care delivery systems.
CMS website

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• Learn basics of ICD-10 and your specialty
• Document completely
• Document as specific as possible
• Document with quality in mind.