

Overview of ICD-10-CM & ICD-10-PCS

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The Path to Performance

- ICD-10 code sets allow providers to “drill down” into manifestations of diseases and conditions for appropriate treatment plans
- Provide linkage between genetic risk factors (pre-disposition) and pre-existing conditions on chronic illnesses and diseases
- Support clinical trial protocols



- ICD-10-CM codes provide greater specificity, accuracy and laterality when assigning diagnosis codes that can improve quality measures and outcomes
- ICD-10-PCS codes allow for expansion and emerging technology in procedures

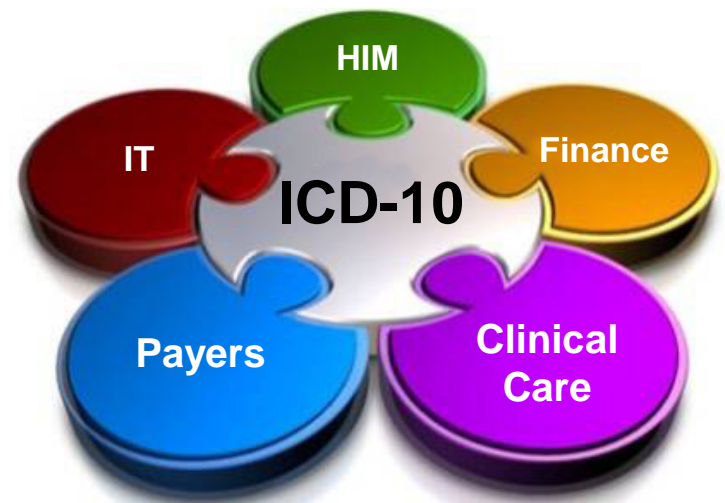


Global use of ICD-10: Catching up with the industrialized world



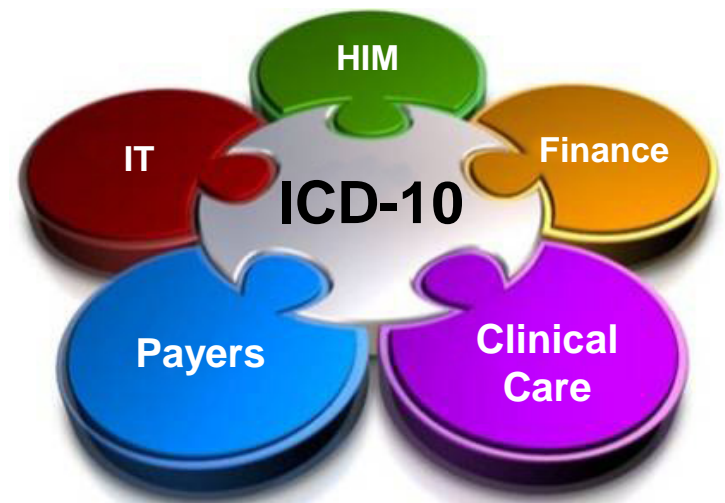
Areas to be Impacted by ICD-10

- HIM
 - Education (Staff/physicians)
- Finance
 - Budget preparations
 - Reallocation of staff (resources)
- Clinical Care
 - Documentation
 - EMR/EHR



Areas to be Impacted by ICD-10 (cont.)

- Payers
 - Payment delays
 - Incorrect payments
- IT
 - System reconfiguration and software upgrades
 - System interfacing upgrades



ICD-9-CM vs. ICD-10-CM/PCS

Number of ICD codes as of 2009

Diagnosis Codes

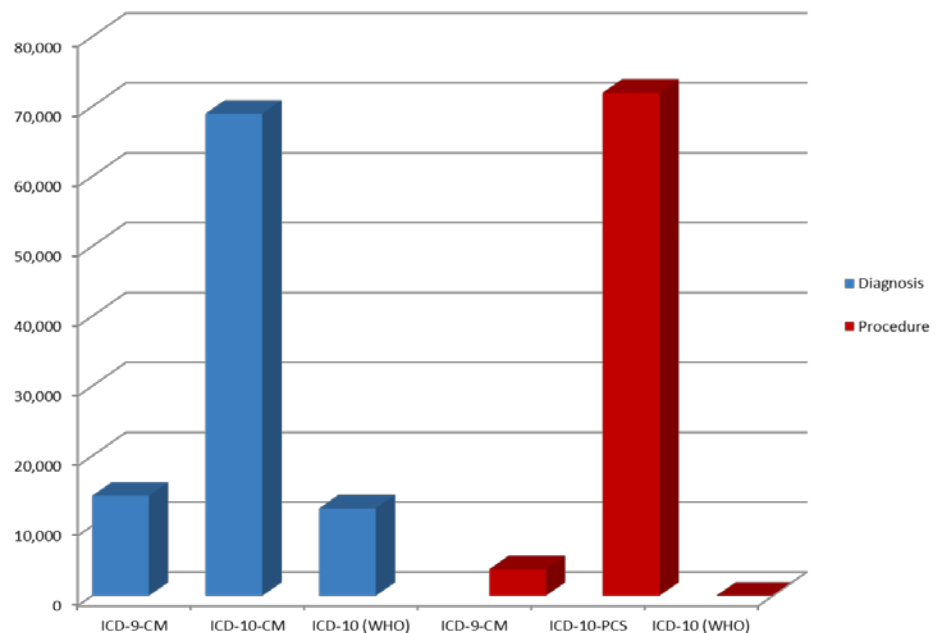
✓ ICD-9-CM: 13,000

✓ ICD-10-CM: 68,000

Procedure Codes

✓ ICD-9-CM: 3,800

✓ ICD-10-PCS: 72,000



- ICD-9 (Total, both Diagnosis and Procedures): 16,800
- ICD-10 (Total, both CM and PCS): 140,000+

ICD-9-CM vs ICD-10-CM/PCS Format



ICD-9-CM vs ICD-10-CM/PCS Format

ICD-9-CM	ICD-10-CM/PCS
3-5 alphanumeric characters	Seven (7) alphanumeric characters
Contains both diagnosis and procedure codes	1st character numeric-all letters except "U" in CM
Lacks detail	Contains specificity (e.g., trimester, laterality)
Limited space for expansion of new codes	Flexibility for adding new codes
Generic terms used for anatomical sites	Specific terms for anatomic sites (e.g. gallbladder, appendix)

ICD-9-CM vs. ICD-10-CM Format

ICD-9-CM Format

1 **7** **3**

Category

3 **X**

Etiology, anatomical site, manifestation

ICD-10-CM Format

1 **7** **3**

Category

3 **0** **X**

Etiology, anatomical site,
and severity

X

Extension

- Some ICD-10-CM categories have seven (7) characters
 - If the seventh character is required, there are instruction notes in the Tabular List
 - If a code requires seven characters and there are six characters, a placeholder of “x” must be used to fill in the space

Seventh Characters and Placeholders (cont.)

- If a placeholder of “X” is used, the seventh character may be used to indicate encounter for care.
 - A-Initial encounter
 - D-Subsequent encounter
 - S- Sequela

Seventh Characters and Placeholders Example

An 75-year old female is discharged home following hip replacement surgery. After returning home, she developed a superficial wound infection at the incision site. Home health care has been ordered to assist with care of the wound. The physician ordered wound care three times per week along with gait training to assist with restoration of the gait abnormality.

- Code Assigned: T81.4XXA Infection following a procedure initial episode. The appropriate 7th character is to be added to each code from category T81.
 - ✓ 7th T81.4
 - A-Initial encounter
 - D-Subsequent encounter
 - S- Sequela

- ICD-10-CM codes that use “XX” as multiple placeholder characters, 5th and 6th allows for future expansion of that code
 - Example: -O33.5 Maternal care for disproportion due to unusually large fetus
 - If the fetus affected is number 2 Code assigned: O33.5XX2

Dummy Placeholders (cont.)



O33.5 7th character “0” is for single gestations and multiple gestations where the fetus is unspecified. 7th characters 1 through 9 are for cases of multiple gestations to identify the fetus for which the code applies. The appropriate code from category O38, Multiple gestations, must also be assigned when assigning code O33.6 with a 7th character of 1 through 9.

0 not applicable or unspecified	4 fetus 4
1 fetus 1	5 fetus 5
2 fetus 2	9 other fetus
3 fetus 3	

- Hypertension Table has been omitted in ICD-10-CM; hypertension codes have been included in the Alpha and Tabular Indexes
- External causes of Injury codes (E codes) are no longer prefixed with an “E.” External codes are now called “External Causes of Morbidity” and are prefixed with a “V”

ICD-10 Omissions and Deletions (cont.)

- “V” codes (Status codes) are now “Z” codes and called “Factors Influencing Health Status and Contact with Health Services
- Table of Chemicals and Drugs now part of index-”Injury, Poisoning and Certain Other Consequences of External Causes”

- Neoplasms now include laterality (C00-D49)
 - C50.0-Malignant neoplasm of nipple and areola
 - C50.011 Malignant neoplasm of nipple and areola, right female breast
 - C50.012 Malignant neoplasm of nipple and areola, left female breast
 - C50.019 Malignant neoplasm of nipple and areola, unsp. female breast



- C50.019 Malignant neoplasm of nipple and areola, unsp. female breast
- C50.021 Malignant neoplasm of nipple and areola, right male breast
- C50.022 Malignant neoplasm of nipple and areola, left male breast
- C50.029 Malignant neoplasm of nipple and areola, unsp. male breast

- Neoplasms behaviors now included in code D29-
 - Benign neoplasm of male genital organs
 - D29.0 Benign neoplasm of penis
 - D29.1 Benign neoplasm of prostate
 - D29.2 Benign neoplasm of testis
 - D29.20 Benign neoplasm of unspecified testis
 - D29.21 Benign neoplasm of right testis
 - D29.22 Benign neoplasm of left testis
 - Certain benign neoplasms may be found in the specific body system chapters

- Diabetes mellitus codes are all combination codes in ICD-10-CM. There are more than 200 codes for Diabetes mellitus.
- Diabetes codes no longer classified as controlled or uncontrolled. Instead ICD-10-CM Diabetes mellitus codes are classified as inadequately controlled, out of control, and poorly controlled diabetes mellitus by type with hyperglycemia.

- To accurately code Diabetes mellitus, the physician documentation must include the following:
 - Type of diabetes
 - Body system affected
 - Use of Insulin
 - Any complications
 - Any manifestations
 - Reason(s) for secondary diabetes mellitus

New Diabetes Categories (E08.00-E13.9)

- E08, Diabetes mellitus due to underlying condition
- E09, Drug or chemical induced diabetes mellitus
- E10, Type I diabetes mellitus
- E11, Type II diabetes mellitus
- E13, Other specified diabetes mellitus



Diabetes Mellitus Case Example 1

A 48-year old male, a type I diabetic with stage 3 chronic kidney disease is being treated to regulate his insulin dosage. He has an abscessed right incisor, which has been determined to be responsible for his elevated blood sugar. Assign code(s): E10.22; N18.3; K04.7

- E10.22 Diabetes mellitus, type I with CKD
- N18.3 CKD, stage 3
- K04.7 Abscess, tooth, teeth (root)



Diabetes Mellitus Case Example 2

A 40-year old female is being treated for ongoing management of steroid-induced diabetes mellitus from prolonged use of corticosteroids, which have now been discontinued. The patient's diabetes is being managed with insulin that she has been taking for the past two years. Assign code(s): E09.9; T38.0X5S; Z79.4

Diabetes Mellitus Case Example 2 (cont.)

- E09.9: Diabetes due to drug or chemical
- T38.0X5S: Adverse effect, corticosteroids, Sequela
- Z79.4: Long-term (current) (prophylactic) drug therapy (use of), insulin

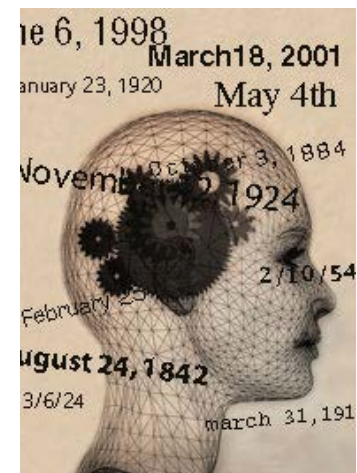


Nervous System Case Example 1

A 74-year old male has been experiencing increasing dementia and forgetfulness. He has been wandering off and leaving his daughter's home and forgetting where he is or where he is going. The diagnosis of dementia due to early-onset Alzheimer's has been established. Assign code(s): G30.0; F02.81; Z91.83

Nervous System Case Example 1 (cont.)

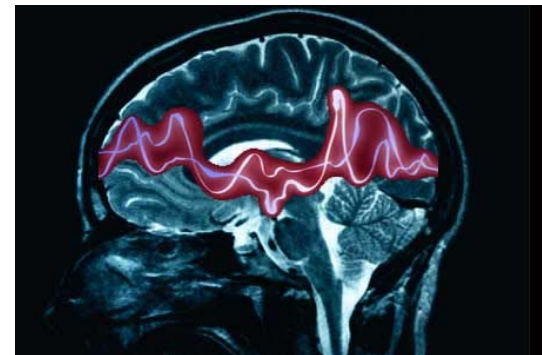
- G30.0: Alzheimer's Disease, early onset with behavior disturbance
- F02.81: Dementia, in Alzheimer's Disease
- Z91.83: Wandering, in diseases classified elsewhere



Nervous System Case Example 2

A 16-year old male is being seen to manage his juvenile myoclonic epilepsy. He has not responded to treatment and was diagnosed with an intractable seizure. Assign code(s): G40.B19

- G40.B19 Epilepsy, epileptic, epilepsia (attack) (cerebral) (convulsion) (fit) (seizure), juvenile myoclonic, intractable



- Factors Influencing Health Status & Contact with Health Services (Z00-Z99)
 - These codes replaced “V” codes as reasons for encounters.
 - Z00 5th- Encounter for general examination without complaint, suspected or reported diagnosis
 - Z00.0-Encounter for general adult medical exam
 - Z00.00- Encounter for general adult medical exam without abnormal findings
 - Z00.01-Encounter for general adult medical exam with abnormal findings

- Z75 4th Problems related to medical facilities and other health care
 - Z75.0-Medical services not available in home
 - Z75.1-Persons awaiting admission to adequate facility elsewhere
 - Z75.2-Other awaiting period for investigation and treatment

- Z75 4th Problems related to medical facilities and other health care (cont.)
 - Z75.3-Unavailability and inaccessibility of other helping agencies
 - Z75.5-Holiday relief care
 - Z75.8-Other problems related to medical facilities and other health care
 - Z75.9-Unspecified problem related to medical facilities and other health care



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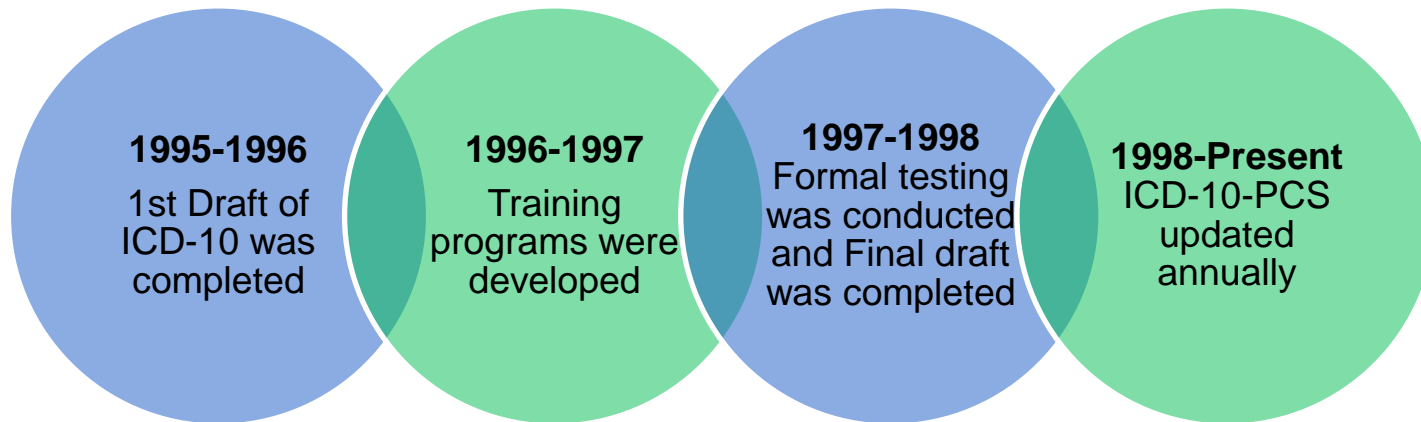
CEU Code: 31530LNL

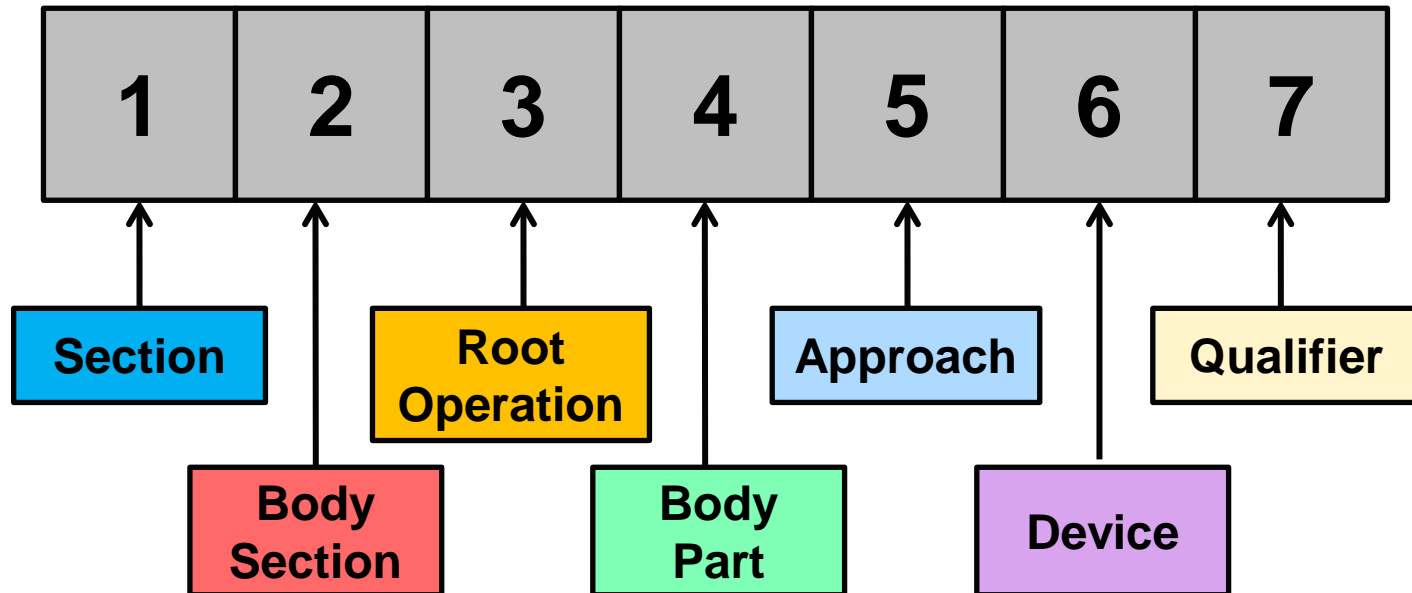
Overview of ICD-10-PCS



The Path to Performance

Road to ICD-10-PCS





- There are seven (7) characters in each ICD-10-PCS (Procedural Coding System) code. Each character has a slightly different meaning related to that particular section. “I” and “O” are not used in PCS.

ICD-10-PCS Characters and Examples

- All of the ICD-10-PCS codes have seven (7) characters with each representing a different aspect of the procedure

Character 1	Character 2	Character 3	Character 4
Section	Body System	Root Operation	Body Part
Medical/Surgical Obstetrics Placement Administration Measurement and Monitoring	Central Nervous System Respiratory System Gastrointestinal Hepatobiliary System & Pancreas	Alteration Bypass Change Destruction Change Detachment Fusion Replacement Resection	Appendix Gallbladder Upper Lip Lower Lip Esophagus Jugular vein, left Jugular vein, right Inferior Parathyroid gland, left or right

ICD-10-PCS Characters and Examples (cont.)

Character 5	Character 6	Character 7
Approach	Device	Qualifier
Open Percutaneous Percutaneous Endoscopic Via Natural or Artificial Opening Via Natural or Artificial Opening Endoscopic External	Grafts and Prostheses Implants Simple or Mechanical Appliances Electronic Appliances	Unique values for individual procedures. E.g., Identify destination site in a bypass.

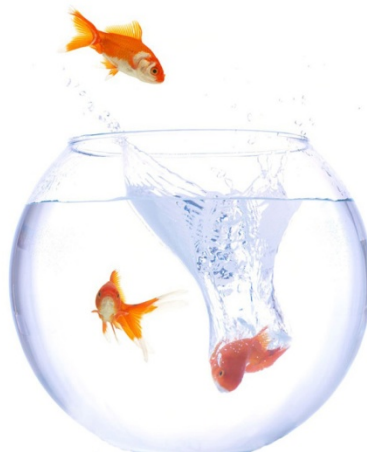
ICD-9-CM vs. ICD-10-PCS Codes

- Comparing ICD-9-CM Procedure Codes to ICD-10-PCS Codes

ICD-9



ICD-10



- A physician performs a laparoscopic-assisted vaginal hysterectomy (LAVH).
 - ICD-9-CM Code: 68.51
 - ICD-10-PCS Code assigned: 0UT9FZZ

Section	Body System	Root Operation	Body Part	Approach	Device	Qualifier
Med/Surg	Female Reproductive System	Resection	Uterus	Via Natural or Artificial Opening with Percutaneous Endoscopic Assistance	None	None
0	U	T	9	F	Z	Z

- A physician performs an open cholecystectomy to remove gallstones/calculi.
 - ICD-9-CM Code: 51.22
 - ICD-10-PCS Code assigned: 0FT40ZZ

Section	Body System	Root Operation	Body Part	Approach	Device	Qualifier
Med/Surg	Hepatobiliary System & Pancreas	Resection	Gallbladder	Open	None	None
0	F	T	4	0	Z	Z

- A physician performs an open appendectomy
 - ICD-9-CM Code : 47.09
 - ICD-10-PCS Code assigned: 0DTJ0ZZ

Section	Body System	Root Operation	Body Part	Approach	Device	Qualifier
Med/Surg	Gastrointestinal System	Resection	Appendix	Open	None	None
0	D	T	J	0	Z	Z

- A physician performs a laparoscopic appendectomy
 - ICD-9-CM Code : 47.01
 - ICD-10-PCS Code assigned: 0DTJ4ZZ

Section	Body System	Root Operation	Body Part	Approach	Device	Qualifier
Med/Surg	Gastrointestinal System	Resection	Appendix	Percutaneous Endoscopic	None	None
0	D	T	J	4	Z	Z

ICD-10-CM & PCS Documentation Challenges

- Transition to ICD-10 will require physicians/providers to capture additional information
- ICD-10-CM contains multiple combination codes; therefore, the documentation must be complete, accurate, and reflect the association between manifestations and comorbid conditions
- Documentation must be comprehensive to support ICD-10 specificity code sets

ICD-10-CM & PCS Documentation Challenges

- “If it wasn’t documented, it wasn’t done”



- Reduce ambiguity and redundancy
- Increased flexibility for adding new codes
- Improve knowledge of medical terminology and anatomy
- Provide transparency for reimbursement and compliance

ICD-10-CM & PCS Benefits (cont.)

- Alleviate worries about reduction in payments and claims denials for additional information requested by Payers
- Improve data collection and tracking of new diseases and technologies
- Improve patient outcomes



ICD-10-CM & PCS Transition

- CMS has set the date to transition to ICD-10 October 1, 2014



Questions





AAPC CEU



CEU Code: 31540KLB

Thank you for your time.

Please contact TruBridge with
any questions or for more
information.



The Path to Performance

- ICD-10-CM: The Complete Official Draft Code Set , 2013 Edition by Ingenix
- ICD-10-PCS: The Complete Official Draft Code Set , 2013 Edition by Ingenix
- <http://www.cms.gov/Medicare/Coding/ICD10/>
- <http://www.aapc.com/ICD-10/>
- www.ahima.org/icd10
- www.ama-assn.org/icd10-code-set
- <http://www.healthcareitnews.com/news/ama-thinking-seriously-about-icd-11>
- <http://journal.ahima.org/2012/05/16/coding-diabetes-mellitus-in-icd-10-cm-4/>