



# ICD 10 PRACTICAL APPLICATION

2013

# OBJECTIVES

- ▶ Participants will conduct hands on coding application
- ▶ Participants will gain some basic understanding of the use of ICD 10 CM coding

# INFECTIOUS AND PARASITIC DISEASES

- ▶ Certain **diseases were rearranged** in Chapter 1 of ICD-10-CM. For example:
- ▶ A separate subchapter, or block, was created and appropriate conditions grouped together for infections with a predominantly sexual mode of transmission (A50-A64).
- ▶ **Viral hepatitis** (B15-B19) and **Other viral diseases** (B25-B34) are additional examples of separate blocks being created with appropriate conditions grouped together.
- ▶ Some **terminology changes and revisions** to the classification of specific infectious and parasitic diseases occurred in ICD-10-CM. For instance:
- ▶ The term **sepsis** replaced septicemia throughout Chapter 1.
- ▶ **Streptococcal sore throat** and its inclusion terms, found in the Infectious and Parasitic Disease chapter of ICD-9-CM, are reclassified in ICD-10-CM to Chapter 10, Diseases of the respiratory system.
- ▶ Many of the Chapter 1 ICD-10-CM **codes have been expanded** to reflect manifestations of the disease with the use of fourth and fifth characters allowing the infectious disease and manifestation to be captured in one code instead of two

# NEOPLASMS

- ▶ In ICD-10-CM, the block of codes for **in situ neoplasms** now appears before the block for **benign neoplasms**.
- ▶ The addition of a separate fifth character for **extranodal and solid organ sites** in ICD-10-CM is a change in classification. ICD-9-CM has a fifth digit for unspecified site in codes for Hodgkin's disease, non-Hodgkin's lymphoma, peripheral, and cutaneous T-cell lymphomas.
- ▶ There are a few terminology changes (e.g., "contiguous sites" in ICD-9-CM is called "overlapping lesion" in ICD-10-CM) and many of the codes require an additional character for laterality.

# DISEASES OF THE BLOOD

- ▶ **Diseases and disorders have been grouped into subchapters or blocks** making it easier to identify the type of conditions classified to Chapter 3.
- ▶ **Modifications have been made to specific categories** that bring the terminology up to date with current medical practice
- ▶ **Classification changes** provide greater specificity than found in ICD-9-CM.

# ENDOCRINE, NUTRITIONAL and METABOLIC DISEASES

- ▶ **Diabetes mellitus and malnutrition have their own subchapter** in ICD-10-CM; in ICD-9-CM, these conditions were grouped with diseases of other endocrine glands and nutritional deficiencies respectively.
- ▶ **Code titles have been revised** in a number of places in Chapter 4.
- ▶ A significant change to ICD-10-CM is **the classification of diabetes mellitus**. Instead of a single category (250) as in ICD-9-CM, there are five categories for diabetes mellitus in ICD-10-CM. Additionally, diabetes mellitus codes have been expanded to reflect manifestations and/or complications of the disease by using fourth or fifth characters (rather than by using an additional code to identify the manifestation). Whether or not the diabetes mellitus is stated as controlled or uncontrolled is **not** a factor in ICD-10-CM code selection.

# MENTAL AND BEHAVIORAL DISORDERS

- ▶ Given what has been discovered in the past 20 years about the effects of nicotine, ICD- 10-CM contains a separate category **F17 for nicotine dependence with subcategories** to identify the specific tobacco product and nicotine-induced disorder; ICD-9-CM uses a single code, 305.1, for tobacco use disorder or tobacco dependence.
- ▶ The identification of the stage of the **substance use** (i.e., continuous or episodic) is not a part of ICD-10-CM; a single ICD-10-CM code identifies not only the substance but also the disorder the substance use induced.
- ▶ There continues to be codes for substance dependence "in remission."

# DISEASES OF THE NERVOUS SYSTEM

- ▶ One change of note is that **only diseases of the nervous system are contained in Chapter 6** of ICD-10-CM.
- ▶ **Diseases of the sense organs** (i.e., eye/adnexa and ear/mastoid processes) **each have their own chapter** in ICD-10-CM; these are combined into a single chapter in ICD-9-CM.
- ▶ A few categories in Chapter 6 have **rephrased titles** and, in some cases, encompass a combination of conditions.
- ▶ A number of codes for diseases of the nervous system have been **expanded** in ICD-10-CM.
- ▶ The **classification of sleep disorders** has undergone a significant change in ICD-10-CM.
- ▶ These disorders are now included in Chapter 6 rather than the signs and symptoms chapter where ICD-9-CM classified them
- ▶ Sleep apnea has its own subcategory (G47.3) with fifth character specificity to identify

# DISEASES OF THE EYE

- ▶ In ICD-9-CM, the conditions classified in ICD-10-CM Chapter 7 are located in Chapter 6, Diseases of the Nervous System and Sense Organs.
- ▶ ICD-10-CM Chapter 7 has a different organization than what is found in ICD-9-CM Chapter 6. While the structure is still by "site" for diseases of the eye and adnexa, the order differs.
- ▶ Some categories in Chapter 7 have undergone title changes to reflect the terminology in use today (e.g., ICD-9-CM uses "senile cataract" while ICD-10-CM utilizes the descriptor "age-related cataract").
- ▶ Many of the classification changes in Chapter 7 have to do with the expansion of characters to provide for laterality. ICD-10-CM contains codes for right side, left side, and—in some instances—bilateral sides for diseases of the eye and adnexa.

# DISEASES OF THE EAR

- ▶ The conditions classified in ICD–10–CM Chapter 8 were located in ICD–9–CM Chapter 6, Diseases of the Nervous System and Sense Organs.
- ▶ Diseases of the ear and mastoid process have been arranged into blocks, making it easier to identify the types of conditions that would occur in:
  - ▶ — The external ear (block 1)
  - ▶ — The middle ear and mastoid (block 2)
  - ▶ — The inner ear (block 3)
  - ▶ — Other disorders of the ear (block 4)
  - ▶ — Intraoperative and postprocedural complications (block 5); these complications are grouped at the end of the chapter rather than scattered throughout different categories.

# DISEASES OF THE EAR

- ▶ **Category and subcategory titles have been revised** in a number of locations in Chapter 8.
- ▶ Although Chapter 8 in ICD-10-CM basically parallels the corresponding section in Chapter 6 of ICD-9-CM, there are quite a few changes. These **changes include:**
  - ▶ Greater specificity added at the fourth-, fifth- and sixth-character levels
    - The delineation of laterality
    - The addition of many more "code first underlying disease" notes
  - ▶ One last noted **classification change** in this chapter is that the ICD-9-CM category "381, Nonsuppurative otitis media and Eustachian tube disorders" has been split into two categories in ICD-10-CM; **H65, Nonsuppurative otitis media** and **H68, Eustachian salpingitis and obstruction.**

# DISEASES OF THE CIRCULATORY SYSTEM

- ▶ The terminology used to describe several cardiovascular conditions has been revised to reflect more current medical practice
- ▶ In ICD-9-CM, hypertension codes classify the type of hypertension (benign, malignant, unspecified).
- ▶ In ICD-10-CM, hypertension codes no longer classify the type.

# DISEASES OF THE RESPIRATORY SYSTEM

- ▶ Chapter 10 of ICD-10-CM is organized similarly to ICD-9-CM; however, **diseases have been rearranged.**
- ▶ Also, **modifications** have been made to specific categories that bring the terminology up-to-date with current medical practice.
- ▶ Other enhancements to Chapter 10 include **classification changes** that provide greater specificity than found in ICD-9-CM.practice.

# DISEASES OF THE DIGESTIVE SYSTEM

- ▶ **New subchapters** have been added to the chapter for diseases of the digestive system. For instance:
- ▶ In ICD-10-CM, **diseases of the liver** have their own subchapter or block while these conditions were grouped with other diseases of the digestive system in ICD-9-CM.
- ▶ Some terminology changes and revisions to the **classification of specific digestive conditions** have occurred in ICD-10-CM as well.
- ▶ ICD-10-CM category K50, **Crohn's disease**, has been expanded to the fourth, fifth, and sixth character in contrast to ICD-9-CM category 555, Regional enteritis. The **expansion at the fourth character level** specifies the site of the Crohn's disease, the fifth character indicates whether a complication was present, and the sixth character further classifies the specific complication.
- ▶ In ICD-9-CM, the presence or absence of obstruction is used as an axis for classifying ulcers. In ICD-10-CM a fairly substantial **classification change** was made, and the **identification of obstruction is not a part of the ICD-10-CM ulcer code structure**.

# DISEASES OF THE SKIN

- ▶ Chapter 12 represents a complete restructuring:
- ▶ It brings together groups of diseases that are related to one another in some way.
- ▶ Greater **specificity** has been added to many of the codes at the fourth-, fifth- and even the sixth-character levels.
- ▶ Some categories in Chapter 12 have undergone **title changes** to reflect terminology in use today. For instance, ICD-10-CM uses "androgenic alopecia" while this term is not used at all in ICD-9-CM.

# DISEASES OF THE MUSCULOSKELETAL SYSTEM

- ▶ **Almost every code in chapter 13 of ICD-10-CM has been expanded in some way. The expansion includes very specific sites as well as laterality. Many codes were moved from various chapters in ICD-9-CM to Chapter 13 in ICD-10-CM.**

# DISEASES OF THE MUSCULOSKELETAL SYSTEM

- ▶ **Category M80** in ICD-10-CM classifies the type of osteoporosis with the site of a current pathological fracture into one combination code.
- ▶
- ▶ Some categories and subcategories in Chapter 13 require the use of **seventh characters**. The seventh characters found in Chapter 13 are:
  - ▶ • A initial encounter for fracture
  - ▶ • B 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

# DISEASES OF THE GENITOURINARY SYSTEM

- ▶ Changes were necessary in some parts of Chapter 14 because of outdated terminology.

# PREGNANCY / CHILD BIRTH

- ▶ With respect to **classification changes**, episode of care is no longer a secondary axis of classification for most conditions classified in Chapter 15. Instead ICD-10-CM identifies the **trimester in which the condition occurred** at the fifth- and sixth-character level.
- ▶ **Code titles have been revised** in a number of locations in Chapter 15. For instance, ICD-9-CM's terminology states the indication for care such as inlet contractions of pelvis (653.2). ICD-10-CM terminology is much more descriptive of what the code represents (e.g., O33.2, Maternal care for disproportion due to inlet contractions of pelvis).

# PREGNANCY/CHILDBIRTH

- ▶ ICD-10-CM requires the **use of a seventh character** to identify **the fetus** to which certain complication codes apply
- ▶ The ICD-10-CM codes for **obstructed labor** incorporate the reason for the obstruction into the code, therefore **only one code is required** rather than two as in ICD-9-CM. For example, to code obstructed labor due to face presentation, the following two ICD-9-CM codes are required: 660.0x, Obstruction caused by malposition of fetus at onset of labor, and 652.4x, Face or brow presentation. In ICD-10-CM, only code O64.2xxx, Obstructed labor due to face presentation, is coded.

# PERINATAL PERIOD

- ▶ Chapter 16 of ICD-10-CM also contains some **terminology updates**.
- ▶ Additionally, in the first block in ICD-10-CM, newborns affected by maternal factors and by complications of pregnancy, labor and delivery, the phrase "suspected to be" is included in the code title as a **nonessential modifier** to indicate that the codes are used when the listed maternal condition is specified as **the cause of confirmed or suspected newborn morbidity or potential morbidity**.

# PERINATAL PERIOD

- ▶ **Some revisions to the classification have occurred as well. For instance, the subclassification for 2500 grams and over for birth weight is no longer an option for category P05, Disorders of newborn related to slow fetal growth and fetal malnutrition.**

# CONGENITAL ABNORMALITIES

- ▶ The arrangement of ICD-10-CM's Chapter 17 is an improvement over ICD-9-CM's Chapter 14. **Congenital malformations, deformations, and chromosomal abnormalities** have been grouped into subchapters or blocks making it easier to identify the types of conditions classified to Chapter 17.
- ▶ **Modifications** have been made to **specific categories** that bring the terminology up-to-date with current medical practice.
- ▶ Other enhancements to Chapter 17 include **classification changes** that provide greater specificity than found in ICD-9-CM.

# SYMPTOMS, SIGNS and ABNORMAL LAB FINDINGS, NEC

- ▶ Chapter 18 of ICD-10-CM has undergone some **organizational changes**. For example, in ICD-10-CM codes for general symptoms and signs follow those related specifically to a body system or other relevant grouping.
- ▶ In comparing Chapter 18 of ICD-10-CM to Chapter 16 of ICD-9-CM, it is evident that some **codes have been moved from one chapter to another**.
- ▶ A fairly **substantial classification change** was made to **hematuria**. Various types of hematuria are coded in Chapter 18 unless included with the underlying condition such as acute cystitis with hematuria. Then in those cases, the code is found in Chapter 14, Diseases of the genitourinary system

# INJURY, POISONING and EXTERNAL CAUSES

- ▶ A significant modification was made to the organization of Chapter 19:
  - ▶ • In ICD-9-CM, type of injury is the first axis of classification for the injuries.
  - ▶ • In ICD-10-CM, specific types of injuries found in categories S00-S99 of Chapter 19 are arranged by body region beginning with the head and concluding with the ankle and foot. This means that **injury types are grouped together under the site** where an injury occurred.
  - ▶ • Generally, the listings of conditions that follow the site are as follows:
    - ▶ — Superficial injury
    - ▶ — Open wound
    - ▶ — Fracture
    - ▶ — Dislocation and sprain
    - ▶ — Injury of nerves
    - ▶ — Injury of blood vessels
    - ▶ — Injury of muscle and tendon
    - ▶ — Crushing injury
    - ▶ — Traumatic amputation
    - ▶ — Other and unspecified injuries
- ▶ Some categories in Chapter 19 have undergone **title changes** to reflect terminology in use today.

# INJURY, POISONING and EXTERNAL CAUSES

- ▶ In ICD-10-CM, codes from blocks T20-T32 classify burns and corrosions. The term **corrosion** is an **added term** that is new in ICD-10-CM.
- ▶ The burn codes identify thermal burns, except for sunburns, that come from a heat source.
  - ▶ • The burn codes are also for burns resulting from electricity and radiation.
  - ▶ • Corrosions are burns due to chemicals.
- ▶ A significant **classification change** was made to poisonings by and adverse effects of drugs, medicaments and biological substances (T36-T50):
- ▶ ICD-10-CM does not provide different category codes to identify poisonings versus adverse effect. Instead, **under a single category for a specific drug** are codes for poisonings, adverse effects, and underdosing of drugs, medicaments, and biological substances.
- ▶ **Underdosing** is a new term and is defined as taking less of a medication than is prescribed by a physician or the manufacturer's instructions with a resulting negative health consequence

# EXTERNAL CAUSES FOR MORBIDITY

- ▶ **Codes for external causes are no longer found in a supplemental classification** in ICD- 10-CM. The causes currently located in the ICD-9-CM "E" code chapter have been disseminated to Chapter 19, Injury, Poisoning and Certain Other Consequences of External Causes, or to Chapter 20, External Causes of Morbidity.
- ▶ Codes in Chapter 20 capture:
  - ▶ • The cause of the injury or health condition
  - ▶ • The intent (unintentional or accidental, and intentional—such as suicide or assault)
  - ▶ • The place where the event occurred
  - ▶ • The activity of the patient at the time of the event
  - ▶ • The person's status (e.g., civilian, military)
- ▶ **Changes in terminology** were also necessary due to the revisions made overall to this chapter.
- ▶ In numerous instances, conditions included as ICD-9-CM subcategory codes have been given a **specific category code** in ICD-10-CM, which allows expansion of codes at the fourth-, fifth-, or sixth-character level.

# FACTORS INFLUENCING HEALTH STATUS

- ▶ The **listing of codes** for factors influencing health status and contact with health services is a bit different in ICD-10-CM than what is found in ICD-9-CM:
- ▶ Some categories in Chapter 21 have **rephrased titles** to better reflect the situations the codes represent.
- ▶ Some conditions in ICD-10-CM **no longer have the specificity** that they did in ICD-9-CM



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