

# CDSA ICD-10-CM Training


## *Unit 1*

# General Overview





# Training Objectives

1. Understand why the transition to ICD-10-CM is necessary
  2. Understand the timeline for the transition
  3. Understand the differences between ICD-9-CM and ICD-10-CM codes
  4. Awareness of available translation tools
- 



# Training Essentials

- The CDSA ICD-10-CM training is broken down into units
  - Staff should review the Training Objectives for each unit to determine the extent of training needed to perform their job functions
  - Staff that want to utilize all of the training should complete the units in sequential order (e.g., Unit 1 then Unit 2)
- ICD-10-CM Coding Training Workbook for CDSAs
  - <http://www.ncpublichealth.com/lhd/icd10/training.htm>
  - See “CDSA Training Materials”
- Webinar basics
  - Pause/Play
  - Back/Forward



# Key Points

- ICD-10 will affect everyone covered by HIPAA
- In the United States, ICD-10 consists of two parts:
  - ICD-10-CM diagnosis coding used in all U.S. health care settings
  - ICD-10-PCS procedure coding system used in hospitals
- The change to ICD-10 does not affect CPT coding for outpatient procedures



# Key Points

- ICD-9 code sets will be replaced by ICD-10 on October 1, 2015
- Outpatient claims
  - Outpatient claims for date of service on or after 10/1/15 must be submitted with ICD-10-CM diagnosis codes
  - Claims for services provided prior to 10/1/15 must be submitted with ICD-9-CM diagnosis codes
- Prior Authorizations
  - Prior authorizations with a begin date prior to 10/1/15 that span 10/1/15 will use ICD-9-CM diagnosis codes and do not have to be split
  - Prior authorization with a begin date on or after 10/1/15 must use ICD-10-CM diagnosis codes



# Key Points

- ICD-10 was developed by the World Health Organization (WHO)
  - On Jan 1, 1999, the US changed from ICD-9 to ICD-10 for the coding and classification of mortality data from death certificates
- The ICD-10-CM classification system was developed by the National Center for Health Statistics as a clinical modification to ICD-10
  - ICD-10-CM is a unique system for use in the US for morbidity and mortality reporting
  - WHO authorized the US to develop a clinical modification but modifications to ICD-10 must conform to WHO conventions for ICD-10
- Any revisions to ICD-10-CM are made via an established update process



# What's Changing With ICD-10-CM

ICD-9-CM	ICD-10-CM
3-5 characters	3-7 characters
1 <sup>st</sup> character numeric or alpha (E or V)	1 <sup>st</sup> character is <b>always</b> alpha (no 'U')
Characters 2-5 are numeric	Character 2 always numeric; Characters 3-7 can be alpha or numeric
Decimal after first 3 characters; Alpha characters not case sensitive	Decimal after first 3 characters; Alpha characters not case sensitive
377.75 – Cortical blindness	H47.611 – Cortical blindness, <b><u>right</u></b> side of brain
V54.25 – Aftercare for healing pathologic fracture of upper leg	M84.452D – Pathological fracture, <b><u>left</u></b> femur, <b><u>subsequent encounter</u></b> for fracture with routine healing
14,000 codes – not much specificity	70,000 codes – greater specificity



# Format Structure of ICD-10-CM

## ICD-10-CM

Alpha	#	Alpha or #	•	Alpha or #	Alpha or #	Alpha or #	Alpha or #
Category				Etiology, Anatomic site, Severity (possibly dummy placeholder)			Extension
<p>F82 – Specific developmental disorder of motor function</p> <p>Q03.0 – Malformations of aqueduct of Sylvius</p> <p>Q66.82 – Congenital vertical talus deformity, left foot</p> <p>H47.611 – Cortical blindness, right side of brain</p> <p>O36.0131 – Maternal care for anti-D(Rh) antibodies, third trimester, fetus 1</p> <p>T74.4xxS – Shaken infant syndrome, sequela</p>							





# Extensions

- Code extensions (7th character) have been added to specify:
  - Episode of care for injuries and external causes of injuries
    - S94.11xA – Injury of medial plantar nerve, right leg, initial encounter
  - Fetus number in obstetrics
    - O36.0131 – Maternal care for anti-D(Rh) antibodies, third trimester, fetus 1
- Below are a few limited examples:
  - to identify the encounter type
    - A Initial Encounter
    - D Subsequent Encounter
    - S Sequelae
  - to provide further specificity about the condition being coded
    - A Initial Encounter for closed fracture
    - K Subsequent encounter for fracture with nonunion
  - for single and multiple gestations, to identify the fetus
    - 0 Not applicable (single gestation) or unspecified
    - 1 fetus 1
    - 9 Other fetus
- The extension may be a number or letter and must always be the 7<sup>th</sup> character



# Extensions

## Abuse

- adult —see Maltreatment, adult
- child —see Maltreatment, child

## Maltreatment

- adult
- child
  - abandonment
    - confirmed T74.02
    - suspected T76.02
  - confirmed T74.92
  - history of —see History, personal (of), abuse
  - neglect
    - confirmed T74.02
    - history of —see History, personal (of), abuse
    - suspected T76.02
  - physical abuse
    - confirmed T74.12
    - history of —see History, personal (of), abuse
    - suspected T76.12

## T76 Adult and child abuse, neglect and other maltreatment, suspected

Use additional code, if applicable, to identify any associated current injury

- Excludes1:** adult and child maltreatment, confirmed (T74.-)  
suspected abuse and maltreatment in pregnancy (O9A.3-, O9A.4-, O9A.5-)  
suspected adult physical abuse, ruled out (Z04.71)  
suspected adult sexual abuse, ruled out (Z04.41)  
suspected child physical abuse, ruled out (Z04.72)  
suspected child sexual abuse, ruled out (Z04.42)

The appropriate 7th character is to be added to each code from category T76

- A - initial encounter
- D - subsequent encounter
- S - sequela

### T76.0 Neglect or abandonment, suspected

T76.01 Adult neglect or abandonment, suspected

T76.02 Child neglect or abandonment, suspected

### T76.1 Physical abuse, suspected

T76.11 Adult physical abuse, suspected

T76.12 Child physical abuse, suspected



# Placeholders

- Dummy Placeholders are necessary to ensure the accuracy of certain codes
- Dummy Placeholders are always the letter ‘x’ or ‘X’
  - Can be upper or lower case
- Dummy Placeholders have 2 uses
  - When a code has less than 6 characters and a 7<sup>th</sup> character extension is required ~ the ‘x’ is assigned for all characters less than 6
    - T76.12xA Child physical abuse, suspected, **initial encounter**
  - 5<sup>th</sup> character for certain 6 character codes thus providing for future expansion
    - M53.2x7 Spinal instabilities, lumbosacral region



# Added Features to ICD-10-CM

- ICD-10-CM reflects updated terminology and modern medicine
- ICD-10-CM includes codes for laterality in chapters where laterality is deemed important
  - If a **bilateral** code is not provided and the condition is bilateral, code both left and right side
    - H50.411 Cyclotropia, right eye
    - H50.412 Cyclotropia, left eye
    - There is no code for bilateral
  - When laterality is not **documented**, there is always an unspecified code
    - H47.619 Cortical blindness, unspecified side of brain
  - When a condition is bilateral but there are no distinct codes identifying laterality, use the valid code only once
    - N28.1 – Cyst of kidney, acquired



# Added Features to ICD-10-CM

ICD-10-CM codes are more specific

- Manifestations of diseases may be included in a single code
  - ICD-9-CM: 250.63 Diabetes with neurological manifestations, juvenile type, uncontrolled; 536.3 Gastroparesis
  - ICD-10-CM: E10.43 Type 1 diabetes mellitus with diabetic gastroparesis
- Greater specificity will provide
  - Better statistical data for nosologists, epidemiologists and researchers to track and study disease in the US
  - Claim rejections should be reduced
- Clinical documentation will need to improve in order to code to the highest level of specificity
  - Q90.9 Down syndrome, unspecified
  - Q90.0 Trisomy 21, mosaicism (mitotic nondisjunction)
- Greater flexibility for expansion when new codes are needed





# Added Features to ICD-10-CM (GEMs)

- National Center for Health Statistics has developed Diagnosis Code Set General Equivalence Mappings (GEMs)
  - Bi-directional mappings are available (i.e., 9 to 10 and 10 to 9)
    - <http://www.cdc.gov/nchs/icd/icd10cm.htm>
    - Automated tool developed by AAPC (access available on DPH ICD-10 website under “Additional Resources”)
    - Not a “1 to 1” crosswalk
- Appropriate uses of GEMS
  - When conversion of diagnostic data is going to be done
  - When translating lists of codes for non-clinical purposes
  - For research purposes when trend analysis is needed
- Inappropriate uses of GEMS
  - **Never** use GEMs to crosswalk a diagnosis included in clinical documentation from ICD-9-CM to ICD-10-CM





http://www.ncpublichealth.com/lhd/icd10/resources.htm

ICD-9 to ICD-10 Codes Online ... 2015 ICD-10-CM and GEMs - C... NC Public Health: ICD-10 A...

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### ICD-10: Additional Resources

[- For Local Health Departments Navigation](#)

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    - Communications
    - Training
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    - Additional Resources
  - Purchase of Medical Care Services

**ICD-10 CODE CONVERSION**

ICD-9 to ICD-10  ICD-10 to ICD-9

315.32

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Browser window showing the AAPC ICD-10 Code Translator tool. The URL is <https://www.aapc.com/icd-10/codes/?w=widget2&txtCode=315.31&txtType=9>.

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## ICD-10 Code Translator

**ICD-10-CM General Code Set Training**  
Find Your Location

- Online \$395 | 16 CEUs
- Boot Camps \$495 | 16 CEUs

The ICD-10 code online translator tool allows you to compare ICD-9 to ICD-10 codes. ICD-9 is being expanded from 17,000 to approximately 141,000 ICD-10 codes, and this online tool can help you map that expansion. (Note: this tool only converts ICD-10-CM codes, not ICD-10-PCS.)

ICD-9 to ICD-10  ICD-10 to ICD-9

315.32 **GO**

Add to your website

ICD-9 315.32 > ICD-10 CODE	DESCRIPTOR
F80.2	Mixed receptive-expressive language disorder
H93.25	Central auditory processing disorder

**ICD-10 IMPLEMENTATION TRACKER**

- Step 1: Assign (May 2012 to August 2012)
- Step 2: Assign (August 2012 to December 2012)
- Step 3: Prepare (December 2012 to December 2013)
- Step 4: Prepare (December 2013 to August 2014)
- Step 5: Train (December 2013 to September 2014)
- Step 6: Train (January 2014 to September 2014)
- Step 7: Train (January 2014 to September 2014)
- Step 8: Implement (October 1, 2014)
- Step 9: Implement (October 2013 to December 2013)
- Step 10: Prepare (December 2013 to August 2014)
- Step 11: Train (December 2013 to September 2014)
- Step 12: Train (January 2014 to September 2014)
- Step 13: Implement (October 1, 2014)

**Track Your Progress**

**Countdown to ICD-10**


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## ICD 9/10 Crosswalk

Welcome to the latest version of the crosswalk connecting the old ICD-9 codes to the new ICD-10 codes. Remember, there often isn't a one-to-one connection, with some old codes being replaced by dozens to better match the diagnosis. This crosswalk only serves as a preliminary guide. Try it out. See how your codes compare.

The Division of Medical Assistance will be adding ICD-10 codes to clinical policies just before ICD-10 implementation on October 1. Some existing codes may change, so you will want to check back. We will keep you updated.

[Click to send your ICD-10 Questions and Comments](#)

Note: Enter code without the decimal point. Example for **707.10** enter **70710**

Select Code type:  Enter ICD-9 code:

There was a bad request.

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[Click to send your ICD-10 Questions and Comments](#)

Note: Enter code without the decimal point. Example for 707.10 enter 70710

Select Code type:  Enter ICD-9 code:

Found 4 results for 31532

ICD-9 Code	Description
31532	MIXED RECEPTIVE-EXPRESSIVE LANGUAGE DISORDER
Related ICD-10 Code(s)	
F801	EXPRESSIVE LANGUAGE DISORDER
F802	MIXED RECEPTIVE-EXPRESSIVE LANGUAGE DISORDER
F804	SPEECH AND LANGUAGE DEVELOPMENT DELAY DUE TO HEARING LOSS
H9325	CENTRAL AUDITORY PROCESSING DISORDER

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# Unit 1 – Review Questions

## True/False

1. The World Health Organization (WHO) version of ICD-10 has not been implemented in the United States
2. The 2<sup>nd</sup> and 3<sup>rd</sup> characters of a code are always numeric
3. 315.8 is a valid code in ICD-10-CM
4. Code extensions are always the 7<sup>th</sup> character
5. Dummy placeholders are used when you have no clue what character to use
6. All codes in ICD-10-CM include full code titles
7. ICD-10-PCS codes will replace CPT coding
8. Outpatient claims submitted after October 1, 2015 must contain ICD-10-CM codes
9. GEMs are a crosswalk between ICD-9-CM/ICD-10-CM



# Questions/CEU Information

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Submit Questions to:

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Information for CEUs

<http://publichealth.nc.gov/lhd/icd10/training.htm>