


12:45 – 1:30 pm

**HTT/ICD-10 and HCC
Codes for Primary Care**

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Presenter Disclosure Information

The following relationships exist related to this presentation:

- ▶ Robert Baldor, MD, FAAFP: No financial relationships to disclose.

Off-Label/Investigational Discussion

- ▶ In accordance with pmiCME policy, faculty have been asked to disclose discussion of unlabeled or unapproved use(s) of drugs or devices during the course of their presentations.

**ICD 10 & HCC Coding
for
Primary Care**

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International Classification of Diseases

- A standard list of alphanumeric diagnostic codes developed by WHO for use worldwide
- Records patient symptoms/diagnoses
 - Claims reimbursement
 - Clinical research
- U.S. developed clinical modification (ICD-9-CM)
 - Expanded number of diagnosis codes
 - Developed procedure coding system

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ICD-9 is Limited...

- 30+ years old
- Many categories full, difficult to incorporate emerging diagnoses/procedures/technology
- Imprecise for identifying diagnoses/procedures

The ICD 10 codes

- Greater specificity, more clinical information
 - Improved ability to measure health care services
- Increased sensitivity with grouping and reimbursement methodologies
 - Decreased need for claims documentation
- New codes enhance public health surveillance

ICD-10 Implementation

1990: Endorsed by World Health Assembly

2002: Published in 42 languages

- 138 countries for mortality
- 99 countries for morbidity

1999: U.S. implemented for mortality

- Death certificates

October 1, 2015...

- ICD-10 required for Medicare, Medicaid and everyone covered by Health Insurance Portability Accountability Act (HIPAA) claims
- Does not affect CPT coding for outpatient procedures

It's a **10!**

- Codes increasing from 13,000 to > 69,000!!!!
- Focus on new codes relevant to your specialty
- For many PCPs, more like 20 - 50 codes
- Code map your most frequently used codes
- Avoid unspecified codes

3 main types of changes...

1. Definition Changes
2. Terminology Differences
3. Increased Specificity

But also ensure the information is captured in your documentation.....

1. Definition Changes....

Benign or malignant hypertension no longer exists

- Instead document the following...

Type: essential, secondary, etc.

Causal relationships: renal, pulmonary, etc

- Examples....

- I10 Essential (primary) hypertension
- I11.9 Hypertensive heart disease without heart failure
- I15.0 Renovascular hypertension

2. Terminology Differences

Asthma codes updated for current classification

- Document severity:

J45.2 Mild intermittent asthma

J45.3 Mild persistent asthma

J45.4 Moderate persistent asthma

J45.5 Severe persistent asthma

- But also document...

Temporal Factors: Acute, chronic, intermittent, persistent, status asthmaticus

Cause: Exercise, cough variant, related to smoking, chemical or particulate cause, occupational

3. Increased Specificity

Abdominal pain documentation...

- Location: Generalized, RUQ, LLQ, periumbilical
- Quality of pain: Colicky, tenderness, rebound

ICD-10 Examples...

R10.31 Right lower quadrant pain

R10.32 Left lower quadrant pain

R10.33 Periumbilical pain

3. Increased Specificity

Injury documentation

- Episode of Care: Initial, subsequent, sequelae
- Site: As specific as possible
- Etiology: How (e.g. sports, MVA, pedestrian)
- Place: School, work, other

S42.001A: Closed fracture, unspecified part of R clavicle, initial encounter

3. Increased Specificity

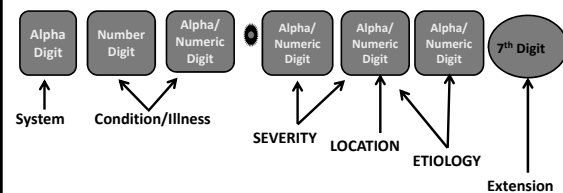
Laterality – Left Versus Right

C50.1 Malignant neoplasm, central portion of breast

C50.111 Malignant neoplasm, central portion of right female breast

C50.112 Malignant neoplasm, central portion of left female breast

ICD-10 diagnosis codes have between 3 and 7 characters



Not all ICD-10 codes must have 7 digits

- A code is invalid if it has not been coded to the full number required
- 7th digit only used in situations to provide data about the characteristic of the encounter

S42.001A: Closed fracture, unspecified part of R clavicle, initial encounter

Injuries and External Causes
7th Digit.....

Value	Descriptor
A	Initial encounter
D	Subsequent encounter
S	Sequela

The 'Dummy' placeholder "X"

X is used with certain codes

- Allow for future changes
- To fill out empty characters when a code contains fewer than 6 characters and a 7th character applies

S70.01XA Contusion of R Hip, initial encounter

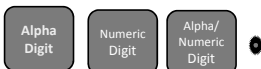
First Letter codes for the system



System
Involved

G codes for nervous system

First Letter codes for the system



System
Involved

J codes for respiratory system

Diseases of Systems

A00-B99 Infectious, Parasitic
C00-D49 Neoplasms
D50-D89 Blood, Immune System
E00-E89 Endocrine, Nutritional, Metabolic
F01-F99 Mental, Behavioral, Neurodevelopmental Disorders
G00-G99 Nervous System
H00-H59 Eye and adnexa
H60-H95 Ear and mastoid process
I00-I99 Circulatory system
J00-J99 Respiratory system
K00-K95 Digestive system
L00-L99 Skin and subcutaneous tissue
M00-M99 Musculoskeletal system and connective tissue
N00-N99 Genitourinary system

Other Diseases

O00-O9A Pregnancy, childbirth, puerperium
P00-P96 Perinatal conditions
Q00-Q99 Congenital, chromosomal abnormalities
R00-R99 Abnormal clinical or laboratory findings, not elsewhere classified
S00-T88 Injury, poisoning, other consequences
V00-Y99 External causes of morbidity
Z00-Z99 Factors influencing health status, other health services

Next 2 numbers code for the condition



System
Involved

J **4** **5** Asthma

Respiratory
System

Next 2 numbers code for the condition



System Involved



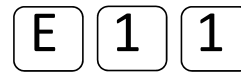
Type 1 Diabetes Mellitus

Endocrine System

Next 2 numbers code for the condition



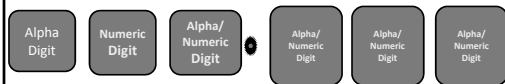
System Involved



Type 2 Diabetes Mellitus

Endocrine System

The next 3 codes refer to the etiology, anatomy *or* severity

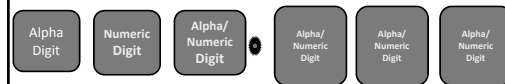


SEVERITY LOCATION ETIOLOGY



Type 2 Diabetes Mellitus, with chronic kidney disease

The next 3 codes refer to the etiology, anatomy *or* severity



SEVERITY LOCATION ETIOLOGY



ASTHMA, Mild intermittent, acute exacerbation

The next 3 codes refer to the etiology, anatomy *or* severity...



System Involved



Migraine

Neurology System

Migraine....

Migraine NOS

G43.909 Migraine, unspecified, not intractable, without status migrainosus

Migraine without aura NOS

G43.009 Migraine without aura, not intractable, without status migrainosus

Migraine with aura NOS

G43.109 Migraine with aura, not intractable, without status migrainosus

The next 3 codes refer to the etiology,
anatomy or severity...



System
Involved



Neurology
System

Headache

I've got a Headache...

Tension headache NOS

G44.209 Tension-type HA, unspecified, not intractable

Episodic tension-type headache NOS

G44.219 Episodic tension-type HA, not intractable

Chronic tension-type headache NOS

G44.229 Chronic tension-type HA, not intractable

Cluster headache syndrome NOS

G44.009 Cluster HA syndrome, unspecified, not intractable

You have a UTI....

N39.0 Urinary tract infection, site not specified

N30.00 Acute cystitis without hematuria

N30.01 Acute cystitis with hematuria

N30.90 Cystitis, unspecified w/o hematuria

N30.91 Cystitis, unspecified with hematuria

I've got a sore throat.....

J02 Acute pharyngitis

J02.0 Streptococcal pharyngitis

J02.8 Acute pharyngitis due to other specified organisms

- Additional code (B95-B97) to identify agent

J02.9 Acute pharyngitis, unspecified

J03 Acute tonsillitis

J03.0 Streptococcal tonsillitis

J03.00 Acute streptococcal tonsillitis, unspecified

J03.01 Acute recurrent streptococcal tonsillitis

J03.90 Acute tonsillitis, unspecified

I Can't Breathe...

J44: COPD

J44.9 COPD, unspecified (NOS)

J44.1 COPD with (acute) exacerbation

J44.0 COPD with acute lower respiratory infection

- Additional code (B95-B97) to identify agent

Use additional code to identify:

Z72.0 Tobacco use

Z87.891 H/O tobacco use

Z57.31 Occupational exposure to tobacco smoke

Acute Respiratory Infections

J06.9* Acute upper respiratory infection, unspecified

J20.9* Acute bronchitis, unspecified

J20.0 Acute bronchitis due to *Mycoplasma pneumoniae*

J20.1 Acute bronchitis due to *Hemophilus influenzae*

J20.2 Acute bronchitis due to streptococcus

J20.3 Acute bronchitis due to coxsackievirus

J20.4 Acute bronchitis due to parainfluenza virus

J20.5 Acute bronchitis due to respiratory syncytial virus

J20.6 Acute bronchitis due to rhinovirus

J20.7 Acute bronchitis due to echovirus

J20.8 Acute bronchitis due to other specified organisms

Joint Pains.....

Joint	Right	Left	Unspecified
Shoulder	M25.511	M25.512	M25.519
Elbow	M25.521	M25.522	M25.529
Wrist	M25.531	M25.532	M25.539
Hip	M25.551	M25.552	M25.559
Knee	M25.561	M25.562	M25.569
Ankle	M25.571	M25.572	M25.579

More than a third of new ICD-10 codes are to add laterality (left, right, bilateral)....

Limb Pains.....

Joint	Right	Left	Unspecified
Arm	M79.601	M79.602	M79.609
Hand	M79.641	M79.642	M79.649
Thigh	M79.651	M79.652	M79.659
Foot	M79.671	M79.672	M79.673
Toes	M79.674	M79.675	M79.676

CMS ICD-10 Grace Period...

For the first year Medicare claims will not be denied solely based on the specificity of the diagnosis codes as long as they are from the appropriate family of ICD-10 codes.....

Family of Codes...

- CMS has defined the 'family' as the three - character category, such as J45 (asthma)
- However, most categories include additional characters that provide more information, such as the type of condition. (for example, J45.21 for Asthma, mild intermittent, acute exacerbation)
- You still must provide a "valid" code, which means will likely have to report more than just the initial 3 category characters...

Only Medicare.....

- The loosening of the specificity requirement does not extend to Medicaid claims, only to those billed under the Medicare fee-for-service Part B physician fee schedule.
- It also doesn't extend to private payers unless those payers determine to offer similar flexibility

A word about HCC codes...

Hierarchical Condition Category Model

- Category of medical conditions that map to a corresponding group of ICD-9 codes
 - 3,000 ICD-9 codes map to 87 different HCCs
- ICD-10 will impact the number of HCCs
- HCC risk-adjustment codes are determined from claims data

HCC is for risk adjustment...

- Many payers moving to value based payments
- Higher rates of reimbursement to care for 'higher risk' patients
- A complete medical diagnosis builds an accurate health risk profile for each patient
- Report each patient's current & active diagnoses on an annual basis

Web Resources

General ICD-10 Information

- www.cms.hhs.gov/ICD10

CMS Coding System & Training Manual

- www.cms.hhs.gov/ICD9ProviderDiagnosticCodes/0_8_ICD10.asp

External Cause Code Reporting

- If you have not been reporting ICD-9-CM external cause codes, you will not be required to report ICD-10-CM codes found in Chapter 20 (External causes of morbidity: V00-Y99) unless a new State or payer-based requirement about the reporting of these codes is instituted.

Routine exam, with HTN and not taking prescribed meds daily...

ICD-9-CM Diagnosis Codes

V70.0 Routine medical exam
401.9 Unspecified essential
hypertension

ICD-10-CM Diagnosis Codes

Z00.01 Encounter for general adult
medical exam w/ abnormal
findings
I10 Essential (primary)
hypertension
T46.5X6A Underdosing of other
antihypertensive drugs,
initial encounter