

Part B Insider (Multispecialty) Coding Alert

ICD-10: Prepare For These 6 Ob-Gyn ICD-10 Changes Effective Oct. 1

October revisions will keep the denials at a minimum.

Remember how you had thought you had lost a code for when a laparoscopic surgery becomes an open one? ICD-10 will resolve this as of October 1, when you'll add Z53.31 (Laparoscopic surgical procedure converted to open procedure) to your coding possibilities ☐ and that's not all.

As of October 1, you'll have a total of 1,900 new diagnosis codes, 313 deleted codes, and 351 revised ICD-10-CM codes to learn ☐ which means your ICD-10 gynecology coding just got more complicated. We've broken down the changes affecting you, so you can start planning how to use them now.

"The coding changes should be welcome by most as they have been on the list of things that needed to be improved since 2012, but due to the freeze and postponement in implementation, we had to wait," says **Melanie Witt, RN, MA**, independent ob-gyn consultant in Guadalupita, NM. "Review the list of changes now to get ready, and try pulling some medical records to see how your providers are currently documenting the base condition. In this way, both you and your providers will know if there is a lapse in documentation, and you will be prepared to code more specifically on October 1."

Note: Next month, you'll learn about your new obstetric ICD-10 options.

Keep in mind: "The code lists that have been posted on the CMS and CDC websites are NOT the final list. The Addenda to be published in June is the complete, final list of code changes going into effect this October," says **Sue Bowman, MJ, RHIA, CCS, FAHIMA**, Senior Director of Coding Policy and Compliance at AHIMA.

1. Don't Overlook These Vulvar Hypertrophy, Dyspareunia Changes

You've also got some new specifications for hypertrophy and dyspareunia conditions.

Vulvar hypertrophy: You will strike N90.6 (Hypertrophy of vulva) from your coding possibilities. Instead, you'll have these options:

- N90.60 (Unspecified hypertrophy of vulva),
- N90.61 (Childhood asymmetric labium majus enlargement [CALME]), and
- N90.69 (Other specified hypertrophy of vulva).

Dyspareunia: You will add N93.1 (Pre-pubertal vaginal bleeding) in October. In addition, you should delete N94.1 (Dyspareunia), and instead choose from these four new codes:

- N94.10 (Unspecified dyspareunia),
- N94.11 (Superficial [introital] dyspareunia),
- N94.12 (Deep dyspareunia),
- N94.19 (Other specified dyspareunia).

"These additions will certainly expand information about the patient's condition, but now is also the time to make sure providers are aware of what is coming so that they can be clearer in their documentation," Witt says.

2. Expand Your N83 Options To Specify Laterality

Beginning October 1st, you'll have more specific ovarian cyst options. They will expand to include unspecified, right, and left sides, as follows:



3. You Have Subtle Revisions to Implement As Well

Not only will you have new ICD-10 codes to replace deleted ones, but you will also have revisions. You should not fail to learn these changes as well, because even the subtlest descriptor terminology shifts can turn your claim into a denial.

For instance, N99.113 (Postprocedural anterior urethral stricture) will become (Postprocedural anterior **bulbous** urethral stricture). You will also add code N99.115 (Postprocedural fossa navicularis urethral stricture).

Other revisions include:

- N99.520 (Hemorrhage of other external stoma of urinary tract) becomes (Hemorrhage **of incontinent** stoma of urinary tract).
- N99.521 (Infection of other external stoma of urinary tract) becomes (Infection **of incontinent** stoma of urinary tract).
- N99.522 (Malfunction of other external stoma of urinary tract) becomes (Malfunction **of incontinent** stoma of urinary tract).

o Note: You will add codes N99.523 (Herniation **of incontinent** stoma of urinary tract) and N99.524 (Stenosis **of incontinent** stoma of urinary tract).

- N99.528 (Other complication of other external stoma of urinary tract) will become (Other complication **of incontinent** stoma of urinary tract).
- N99.530 (Hemorrhage of other stoma of urinary tract) will become (Hemorrhage **of continent** stoma of urinary tract).
- N99.531 (Infection of other stoma of urinary tract) will become (Infection **of continent** stoma of urinary tract).
- N99.532 (Malfunction of other stoma of urinary tract) will become (Malfunction **of continent** stoma of urinary tract).

o Note: You will also add N99.533 (Herniation of continent stoma of urinary tract) and N99.534 (Stenosis of continent stoma of urinary tract).

- N99.538 (Other complication of other stoma of urinary tract) will become (Other complication **of continent** stoma of urinary tract).

"Here again, provider documentation makes or breaks the use of the most specific code. In this case 'continent' refers to the surgeon having created a substitute bladder (usually using bowel) and then attaching the ureters and urethra to it so the patient can urinate naturally. If the urethra is also removed, the surgeon may instead create a bladder reservoir out of the small intestine and then creates an opening into the abdominal cavity by creating a valve that remains closed until the patient self-catheterizes to empty the reservoir. The patient remains in control of urination (or is continent). 'Incontinent' means that the patient has a reservoir, but the opening through the abdominal wall (the stoma) does not have a valve so urine continuously leaks out into an external drainage bag which the patient empties every few hours and replaces with a clean, empty bag," Witt explains.

You'll also have some postprocedural hemorrhage and hematuria revisions/additions to note:

- N99.820 (Postprocedural hemorrhage and hematoma of a genitourinary system organ or structure following a

genitourinary system procedure) will become (Postprocedural hemorrhage of a genitourinary system organ or structure following a genitourinary system procedure).

- N99.821 (Postprocedural hemorrhage and hematoma of a genitourinary system organ or structure following other procedure) will become (Postprocedural hemorrhage of a genitourinary system organ or structure following other procedure).
- You'll add N99.840 (Postprocedural hematoma of a genitourinary system organ or structure following a genitourinary system procedure).
- You'll also add N99.841 (Postprocedural hematoma of a genitourinary system organ or structure following other procedure).

4. Shift Your Urinary Diagnoses

On October 1, you will delete R31.2 (Other microscopic hematuria) and add R31.21 (Asymptomatic microscopic hematuria) and R31.29 (Other microscopic hematuria). This won't be the only urogynecologic diagnosis change you'll need to implement.

You'll also delete R39.19 (Other difficulties with micturition) and add the following codes:

- R39.191 (Need to immediately re-void),
- R39.192 (Position dependent micturition), and
- R39.198 (Other difficulties with micturition).

You'll also add R39.82 (Chronic bladder pain) to your urogynecology coding cache.

Strike through R82.7 (Abnormal findings on microbiological examination of urine) and tack on R82.71 (Bacteriuria) and R82.79 (Other abnormal findings on microbiological examination of urine) to your coding options.

Additionally, you'll delete R93.4 (Abnormal findings on diagnostic imaging of urinary organs) and add the following options:

- R93.41 (Abnormal radiologic findings on diagnostic imaging of of renal pelvis, ureter, or bladder),
- R93.421 (Abnormal radiologic findings on diagnostic imaging of right kidney),
- R93.422 (Abnormal radiologic findings on diagnostic imaging of left kidney),
- R93.429 (Abnormal radiologic findings on diagnostic imaging of unspecified kidney), and
- R93.49 (Abnormal radiologic findings on diagnostic imaging of other urinary organs).

5. Hone Your Vaginal Mesh and Prosthetic Diagnoses

You'll need to alter how you report vaginal mesh diagnoses. Here's how they shape up:

You should revise T83.711A from (Erosion of implanted vaginal mesh and other prosthetic materials to surrounding organ or tissue, initial encounter) to (Erosion of implanted vaginal mesh to surrounding organ or tissue, initial encounter). In other words, you'll strike "other prosthetic materials" from the descriptor. You'll do the same for the other seventh digits (T83.711D, ...subsequent encounter; T83.711S ... sequela).

Brand new mesh codes include:

- T83.712A (Erosion of implanted urethral mesh to surrounding organ or tissue, initial encounter), T83.712D (... subsequent encounter), and T83.712S (... sequela)
- T83.713A (Erosion of implanted urethral bulking agent to surrounding organ or tissue, initial encounter), T83.713D (... subsequent encounter), and T83.713S (... sequela).
- T83.714A (Erosion of implanted ureteral bulking agent to surrounding organ or tissue, initial encounter), T83.714D (... subsequent encounter), and T83.714S (... sequela).

You should also revise T83.721A (Exposure of implanted vaginal mesh and other prosthetic materials into vagina, initial encounter) to (Exposure of implanted vaginal mesh into vagina, initial encounter). Again, strike "other prosthetic materials" from the descriptor. The same goes for T83.721D (... subsequent encounter) and T83.721S (...sequela).

"This change was made to clarify that the code is only to be used for vaginal mesh. The 'other prosthetic materials' will have their own designated code such as urethral mesh and urethral/ureteral bulking codes listed below," Witt says.

More new mesh/bulking codes include:

- T83.722A (Exposure of implanted urethral mesh into urethra, initial encounter), T83.722D (... subsequent encounter), and T83.722S (... sequela).
- T83.723A (Exposure of implanted urethral bulking agent into urethra, initial encounter), T83.723D (... subsequent encounter), and T83.723S (... sequela).
- T83.724A (Exposure of implanted ureteral bulking agent into ureter, initial encounter), T83.724D (... subsequent encounter), and T83.724S (... sequela).
- T83.81XA (Embolism of genitourinary prosthetic devices, implants and grafts, initial encounter) will become (Embolism **due to** genitourinary prosthetic devices, implants and grafts, initial encounter). The same goes for T83.81XD (... subsequent encounter) and T83.81XS (... sequela).
- T83.82XA (Fibrosis of genitourinary prosthetic devices, implants and grafts, initial encounter) will become (Fibrosis **due to** genitourinary prosthetic devices, implants and grafts, initial encounter). The same goes for T83.82XD (... subsequent encounter) and T83.82XS (... sequela).
- T83.83XA (Hemorrhage of genitourinary prosthetic devices, implants and grafts, initial encounter) will become (Hemorrhage **due to** genitourinary prosthetic devices, implants and grafts, initial encounter). The same goes for T83.83XD (... subsequent encounter) and T83.83XS (... sequela).
- T83.84XA (Pain from genitourinary prosthetic devices, implants and grafts, initial encounter) will become (Pain **due to** genitourinary prosthetic devices, implants and grafts, initial encounter). The same goes for T83.84XD (... subsequent encounter) and T83.84XS (... sequela).
- T83.85XA (Stenosis of genitourinary prosthetic devices, implants and grafts, initial encounter) will become (Stenosis **due to** genitourinary prosthetic devices, implants and grafts, initial encounter). The same goes for T83.85XD (... subsequent encounter) and T83.85XS (... sequela).
- T83.86XA (Thrombosis of genitourinary prosthetic devices, implants and grafts, initial encounter) will become (Thrombosis **due to** genitourinary prosthetic devices, implants and grafts, initial encounter). The same goes for T83.86XD (... subsequent encounter) and T83.86XS (... sequela).

6. Finally, Adopt This Mish Mash of Other Gynecologic Dx's

You'll have a handful of other gynecologic related diagnoses to adopt.

Mastitis: No longer will report N61 (Inflammatory disorders of breast). Instead, you will have N61.0 (Mastitis without abscess) and N61.1 (Abscess of the breast and nipple).

Prediabetes: You will have R73.03 (Prediabetes) as of October 1.

Hormone sensitive malignancy status: You should get ready to report Z19.1 (Hormone sensitive malignancy status) and Z19.2 (Hormone resistant malignancy status).

Viral hepatitis: You'll condense your viral hepatitis codes. No longer will you report Z22.50 (Carrier of unspecified viral hepatitis), Z22.51 (Carrier of viral hepatitis B), Z22.52 (Carrier of viral hepatitis C), and Z22.59 (Carrier of other viral hepatitis). Instead, you will have one code: Z22.5 (Carrier of viral hepatitis).

Per the Coordination and Maintenance Committee Meeting minutes: The idea of a "healthy carrier" of viral hepatitis is no longer in favor. Instead, this condition is considered a form of chronic viral hepatitis. The change is due to the potential for chronic viral hepatitis to be associated with hepatocellular carcinoma, or with reactivation of hepatitis, Witt says. Due

to this change in clinical understanding, WHO has made changes in ICD-10, effective January 2016, to deactivate the code Z22.5 (Carrier of viral hepatitis).

"It is proposed to eliminate this subcategory in ICD10-CM, and that such cases should be coded to category B18 (Chronic viral hepatitis). As they are keeping the base code they may be transitioning to the WHO recommendation in stages (there was no information as to the rationale of their final decision)," Witt says.

Prophylactic encounters: Here are your new prophylactic encounter codes:

- Z29.11 (Encounter for prophylactic immunotherapy for respiratory syncytial virus [RSV])
- Z29.12 (Encounter for prophylactic antivenin)
- Z29.13 (Encounter for prophylactic Rho[D] immune globulin)
- Z29.14 (Encounter for prophylactic rabies immune globin)
- Z29.3 (Encounter for prophylactic fluoride administration)
- Z29.8 (Encounter for other specified prophylactic measures)
- Z29.9 (Encounter for prophylactic measures, unspecified).

Other encounters: You will have other encounter codes to report:

- Z30.015 (Encounter for initial prescription of vaginal ring hormonal contraceptive)
- Z30.016 (Encounter for initial prescription of transdermal patch hormonal contraceptive device)
- Z30.017 (Encounter for initial prescription of implantable subdermal contraceptive)
- Z30.44 (Encounter for surveillance of vaginal ring hormonal contraceptive device)
- Z30.45 (Encounter for surveillance of transdermal patch hormonal contraceptive device)
- Z30.46 (Encounter for surveillance of implantable subdermal contraceptive).

Lastly, two other new codes of note are Z79.84 (Long term [current] use of oral hypoglycemic drugs) and Z98.891 (History of uterine scar from previous surgery). In particular, you would use Z79.84 to report use of Metformin or Glyburide in type 2 diabetic patients, Witt says.

Editor's Note: Don't forget that next month, we'll be delving into all of the ICD-10 changes to your obstetric diagnosis codes.