

# **Pediatric Coding Alert**

# ICD-10: Let 'Z' Codes be Your Friends When Ordering Neonatal Tests

Pediatricians frequently order tests on newborns, often requiring your office to provide the proper diagnosis code on lab requisitions. Choosing the correct ICD-10 code when you do not yet know a diagnosis means relying on Z codes to ensure the appropriate tests are ordered. Depending on whether the test is a screening or diagnostic test, you can typically nail down your diagnosis choices to the 'Z' series of the ICD-10 manual.

**Keep in mind:** If definitive test results come back before you submit your claim, you should report the definitive diagnosis instead of the reason for the test on your claim. However, the following rules apply if you have to submit the claim without knowing the final diagnosis.

#### **Tests When a Family History Exists**

You'll often conduct a test because there is a family history of a condition. For example, a baby is born to a father who has sickle-cell trait, so the baby is tested for sickle-cell trait and disease. You should use a code denoting family history of the condition, such as Z83.2 (Family history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism), when ordering the test.

Likewise, you might look to codes from the Z82 (Family history of certain disabilities and chronic diseases [leading to disablement]) or the Z84 (Family history of other conditions) series to conduct tests for other conditions that the baby could inherit due to a family disease.

In addition to choosing the appropriate diagnosis code, pediatricians can bill for obtaining the specimen, either by heel stick (36416, Collection of capillary blood specimen [eg, finger, heel, ear stick]) or venipuncture (36406, Venipuncture, younger than age 3 years, necessitating the skill of a physician or other qualified health care professional, not to be used for routine venipuncture; other vein).

### **Screening Tests**

One test, for phenylketonuria (PKU, 84030), is performed for every baby. The diagnosis code to use when ordering this screening test Z13.228 (Encounter for screening for other metabolic disorders). Although every state requires screening for PKU, this does not necessarily mean that it will be reimbursed.

Other screening tests may include those for hypothyroidism (84437 and Z13.29, Encounter for screening for other suspected endocrine disorder), galactosemia (82776, Galactose-1-phosphate uridyl transferase; screen; and Z13.228, Encounter for screening for other metabolic disorders), toxoplasmosis (86777, Antibody; Toxoplasma; and Z11.8, Encounter for screening for other infectious and parasitic diseases) and hemoglobinopathy (83020, Hemoglobin fractionation and quantitation; electrophoresis [eg, A2, S, C, and/or F]); and Z13.0, Encounter for screening for diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism).

## **Tests for Signs and Symptoms**

When a baby has a symptom that prompts the pediatrician to order a certain test, use that symptom as the diagnosis code for the requisition. For example, babies occasionally need testing for high bilirubin levels due to neonatal jaundice. The code for this test is 88720 (Bilirubin, total, transcutaneous). Use diagnosis code P59.9 (Neonatal jaundice, unspecified) when ordering this test.

