

Outpatient Facility Coding Alert

ICD-10-CM Updates: Get Busy Learning This Brand-New Set of ICD-10-CM Codes

No specialty is safe when it comes to ICD-10-CM 2020.

The 2020 edition of ICD-10-CM is just around the way. As summer rolls around, you've become accustomed to getting an in-depth glimpse at the most important changes, and this year's preview of new, revised, and deleted codes is right on time.

Beginning in October, you'll have to make room for a plethora of new codes, including a set of specified orbital fracture codes, pressure-induced deep tissue damage codes, and codes for phlebitis/thrombophlebitis and embolism/thrombosis diagnoses of deep veins of the calf.

Dive in for your initial look into another jam-packed set of updates for ICD-10-CM 2020.

Look Out for New Vascular Disease Codes Involving Peroneal, Muscular Veins

For scans that involve phlebitis, thrombophlebitis, or embolism/thrombosis diagnoses, you'll have a new set of codes to consider depending on the site.

Refresher: When ICD-10-CM alludes to "muscular" veins, it is referring to the soleal and gastronemicus veins located in the calf. The peroneal vein is another vessel located in the calf. Each of these vessels are considered deep veins.

Previously, when coding phlebitis, thrombophlebitis, or embolism/thrombosis of the peroneal or muscular veins, you've had to resort to I82.49- (Acute embolism and thrombosis of other specified deep vein of lower extremity). Beginning in October, however, you'll have the option of reporting each respective condition with the following codes:

- I80.24- (Phlebitis and thrombophlebitis of peroneal vein)
- I80.25- (Phlebitis and thrombophlebitis of muscular vein)
- I82.45- (Acute embolism and thrombosis of peroneal vein)
- I82.46- (Acute embolism and thrombosis of calf muscular vein).

"With respect to usage, these new codes would generally support peripheral vascular studies such as duplex scans of extremity veins," notes **Sarah L. Goodman, MBA, CHCAF, COC, CCP, FCS**, president and CEO of SLG, Inc. Consulting in Raleigh, North Carolina.

Report Specified Forms of Atrial Fibrillation, Pulmonary Embolism

Next up, you'll want to make a note of a few important changes to pulmonary embolism and atrial fibrillation reporting. ICD-10-CM makes a note to elaborate a little further on various facets of these conditions. First, ICD-10-CM creates two new codes to report single subsegmental and multiple segmental pulmonary embolisms:

- I26.93 (Single subsegmental pulmonary embolism without acute cor pulmonale)
- I26.94 (Multiple subsegmental pulmonary emboli without acute cor pulmonale).

ICD-10-CM also expands on coding options of persistent and chronic forms of atrial fibrillation. ICD-10-CM will delete the existing code I48.1 (Persistent atrial fibrillation) and replace it with the following codes:

- I48.11 (Longstanding persistent atrial fibrillation)
- I48.19 (Other persistent atrial fibrillation).

On a similar note, ICD-10-CM will delete existing code I48.2 (Chronic atrial fibrillation) and replace it with the following codes:

- I48.20 (Chronic atrial fibrillation, unspecified)
- I48.21 (Permanent atrial fibrillation).

Get to Know this New Deep Tissue Damage Code Set

Another brand-new code set for 2020 involves a set of pressure-induced deep damage codes. These codes are to be utilized for diagnoses of a subclass of pressure ulcers, specifically known as pressure-induced deep tissue injuries (DTI). These injuries will be represented by codes for a number of regions that you'd typically find a pressure ulcer:

- L89.0- (Pressure-induced deep tissue damage of elbow)
- L89.1- (Pressure-induced deep tissue damage of back)
- L89.2- (Pressure-induced deep tissue damage of hip)
- L89.3- (Pressure-induced deep tissue damage of buttock)
- L89.46 (Pressure-induced deep tissue damage of contiguous site of back, buttock and hip)
- L89.5- (Pressure-induced deep tissue damage of ankle)
- L89.6- (Pressure-induced deep tissue damage of heel)
- L89.816 (Pressure-induced deep tissue damage of head)
- L89.896 (Pressure-induced deep tissue damage of other site)
- L89.96 (Pressure-induced deep tissue damage of unspecified site).

Here's one change to consider that the coding community as a whole can get behind. Since the creation of expanded breast lump codes, there's been a stream of questions on how to report a lump that overlaps quadrants. ICD-10-CM have put those concerns to rest with the following two new codes:

- N63.15 (Unspecified lump in the right breast, overlapping quadrants)
- N63.25 (Unspecified lump in the left breast, overlapping quadrants).

Behold This Long-Awaited New Code Set

Here's a set of specialty-specific ICD-10-CM codes for orbital wall and orbital roof fractures. For many coders, this code set has been a long time coming. "These new orbital fracture codes are very helpful," says **Kimberly Quinlan, CPC**, senior medical records coder for the University of Rochester Medical Center's Department of Otolaryngology in Rochester, New York. "When it comes to ICD-10-CM coding, the more specific, the better - so these will definitely be used," Quinlan emphasizes.

Prior to 2020, you've had to resort to S02.8- (Fractures of other specified skull and facial bones) for reporting of an orbital wall or orbital roof fracture. Now, there's a vast array of site-specific codes to utilize in the appropriate instances:

- S02.12- (Fracture of orbital roof)
- S02.83- (Fracture of medial orbital wall)
- S02.84- (Fracture of lateral orbital wall)
- S02.85X- (Fracture of orbit, unspecified).

Get Specific with Hx of In-Situ Neoplasms

Finally, get familiar with a few important new personal history codes involving in-situ neoplasms and a new code for presence of a neurostimulator:

- Z86.002 (Personal history of in-situ neoplasm of other and unspecified genital organs)
- Z86.003 (Personal history of in-situ neoplasm of oral cavity, esophagus and stomach)
- Z86.004 (Personal history of in-situ neoplasm of other and unspecified digestive organs)
- Z86.005 (Personal history of in-situ neoplasm of middle ear and respiratory system)
- Z86.006 (Personal history of melanoma in-situ)

- Z86.007 (Personal history of in-situ neoplasm of skin)
- Z96.82 (Presence of neurostimulator).