

ICD 10 Coding Alert

Pediatrics Update: Learn Updates For Frequent Diagnoses

Many codes for congenital deformities receive minor but important changes.

The overall ICD-10-CM 2020 updates may seem sparse, but the pediatrics coding community may feel overwhelmed by the changes. Many frequently used codes are being updated, along with coding guidelines that focus on congenital deformities.

Read this accounting of the most significant changes, along with expert commentary, to make sure you're ready for Oct. 1, 2019.

Big picture: Altogether, ICD-10 has deleted seven codes, created 328 new subcategories and codes, and revised 35 subcategories and codes.

Note This Guidance Update

One small but significant change to the 2020 ICD-10 will immediately affect peds coders.

The guidance for H65 (Nonsuppurative otitis media) use has now been relaxed. "In place of the guideline 'code to identify: infectious agent [B95-B97],' the guidance becomes, 'code, if applicable, to identify: infectious agent [B95-B97]," says **Jan Blanchard, CPC, CPMA**, pediatric solutions consultant at Vermont-based PCC.

"The reason for this important change is that typically, the infectious agent for the non-suppurative otitis media [OM] is usually not known," explains **Donelle Holle, RN**, president of Peds Coding Inc., and a healthcare, coding, and reimbursement consultant in Fort Wayne, Indiana.

2020 Brings Congenital Malformations Overhaul

There are also a vast number of revisions to Chapter 17 Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99). They are changes that "all peds practices should review," notes Holle. "Typically, the codes are used as secondary for a pediatric provider, but they may be necessary to be used if a patient presents with an issue where the codes could come into play," Holle adds.

To begin with, "you can now add laterality for many of the Q66.- [Congenital deformities of feet] codes using either 1 for right, 2 for left, and either 0 [as a fifth digit] or 9 [as a sixth digit] for unspecified as appropriate," notes Blanchard.

So, for example, you will now have the ability to report codes such as Q66.10 (Congenital talipes calcaneovarus, unspecified foot) or Q66.212 (Congenital metatarsus primus varus, left foot) with much greater granularity. This will bring all the Q66.- codes in line with Q66.5- (Congenital pes planus) and Q66.8- (Other congenital deformities of feet), which already have that capability, though curiously Q66.6 (Other congenital valgus deformities of feet) still does not.

ICD-10 2020 has also pluralized the code for Ehlers-Danlos syndrome. This will now be Q79.6 (Ehlers-Danlos syndromes) to reflect variants of this connective tissue disorder for which ICD-10 has also assigned the following new codes:

- Q79.60 (Ehlers-Danlos syndrome, unspecified)
- Q79.61 (Classical Ehlers-Danlos syndrome)
- Q79.62 (Hypermobility Ehlers-Danlos syndrome)
- Q79.63 (Vascular Ehlers-Danlos syndrome)
- Q79.69 (Other Ehlers-Danlos syndromes).

Additionally, "ICD-10 has removed Prader-Willi syndrome from the synonyms for Q87.1 [Congenital malformation syndromes predominantly associated with short stature] and given it its own code, Q87.11, while all other synonyms are now defined as 'Other' under Q87.19," Blanchard notes.

Note Encounter Code Revisions

ICD-10 also introduced separate codes in the Z01.0 (Encounter for examination of eyes and vision) category, and "practices will need to be certain to add these codes, as they are different from the existing Z01.00 [Encounter for examination of eyes and vision without abnormal findings] and Z01.01 [... with abnormal findings] codes," Holle says.

Now, you will be able to document a failed vision screening without abnormal findings (Z01.020) and with abnormal finding (Z01.021). "These new six-digit codes state that the encounter was specifically for failed vision screenings, with or without abnormal findings. These will be very important to use correctly," Holle cautions. "The codes will also help justify the need for further vision or hearing testing, which could be very important especially if a vision or hearing test was performed during that same year in a well care visit," Holle adds.

The change brings the vision codes into line with the Z01.1 (Encounter for examination of ears and hearing) codes. And, like the current hearing and vision codes, there is also a note that tells you to use an additional code to specify what the abnormal findings are if you do document Z01.021.

Lastly, there is a small but very significant change to the notes for the Z68 (Body mass index [BMI]) codes. ICD-10 has now changed the age parameters for both the pediatric and adult BMI codes, with the cutoff for the pediatric codes being lowered from 20 years of age to 19, and the cutoff for the adult codes being lowered from 21 years to 20.

Quite why ICD-10-CM has instituted these changes remains a mystery. "I can't find any rationale for this change," Blanchard says.

"Coders and billers have to realize that sometimes the changes just don't make sense!" Holle says.

Do Your Homework

"I encourage coders to get in there and review these changes personally. No one knows your practice like you do, so you should look through the addenda for those special items you alone will notice," Blanchard advises.

To view the whole 2010 ICD-10-CM Addenda, go to www.cms.gov/Medicare/Coding/ICD10/2020-ICD-10-CM.html and download the zip file labeled 2020 Addenda.