

Home Health ICD-9/ICD-10 Alert

ICD-10: Get Ready For A Whole New Diagnosis Coding System

ICD will leap from 17,000 to 155,000 codes in 2011.

Feeling confident about your diagnosis coding? Get ready to shake things up -- it will soon be time to master a brand new incarnation of the system.

Plus: A slew of new codes will throw the prospective payment system mastery you've gained since the PPS revisions into disarray.

However, the proposed implementation date for the new system isn't until 2011, the **Centers for Medicare & Medicaid Services** revealed in the proposed rule issued on its website Aug. 15.

"The greatly expanded ICD-10-CM code sets will enable HHS to fully support quality reporting, pay-for-performance, bio-surveillance, and other critical activities," notes **Health and Human Services** Secretary **Mike Leavitt** in a release.

"Developed almost 30 years ago, ICD-9 is now widely viewed as outdated because of its limited ability to accommodate new procedures and diagnoses," CMS said in the release.

"Now is the right time to move forward with the transition from ICD-9 to ICD-10," CMS Acting Administrator **Kerry Weems** maintained. "We recognize that the transition to ICD-10 will require some upfront costs, but each year of delay would create additional costs."

Nearly 140 countries already use the new ICD-10 system for coding and reporting mortality data, the **National Association for Home Care & Hospice** notes.

Speak up: Comments on the rule are due to CMS Oct. 21.

While there's still more groundwork to lay, it's not too early to start implementation planning and preparation -- and to take advantage of the lead time, says **Sue Bowman, RHIA, CCS**, director of coding policy and compliance with **American Health Information Management Association**.

Know These ICD-10 Differences

Many changes in disease classification come along with the growth from ICD-9-CM's fewer than 17,000 codes to ICD-10-CM's more than 155,000. To start familiarizing yourself with ICD-10, take a look at the following differences between the two systems:

- **More Specificity.** Level of detail and specifics are greatly expanded in ICD-10-CM. But don't let that scare you. While ICD-10 can provide greater specificity, it won't require more detailed documentation. ICD-10 will still accommodate less detailed diagnoses such as "hypertension" or "diabetes." Other initiatives such as pay-for-performance and quality measures will require more detailed documentation, Bowman says. ICD-10 will simply provide the means for reporting it.
- **Newer terminology.** ICD-10-CM updates medical terminology and classification of disease to be consistent with medical practice.
- **More details.** With ICD-10, you can provide more detail with a single code than you can in ICD-9. Added detail makes ICD-10-CM more applicable to non-hospital health care encounters -- a plus for coders in other specialty areas such as

home health. ICD-10-CM also adds the ability to describe laterality (affected side of the body), particularly in the neoplasm and injury chapters.

- **More characters.** Codes in ICD-10-CM are all alphanumeric and can be up to seven characters in length. The seventh character, referred to as an extension, is used in some chapters to capture episode of care, such as initial encounter, subsequent encounter, or sequelae, and other additional information.

For example, with ICD-10-CM, you could report M80.021d (Subsequent encounter for fracture with routine healing, postmenopausal osteoporosis with current pathological fracture, right humerus) where in ICD-9 you had less specific codes such as 733.11 (Pathologic fracture of humerus) and 733.01 (Senile osteoporosis) to report for this patient.

- **More combination codes.** ICD-10 combination codes provide detail that requires more than one code in ICD-9. For example, in ICD-9-CM, for a patient with type II diabetes and diabetic retinopathy, you would code 250.50 (Diabetes with ophthalmic manifestations, type II or unspecified type, not stated as uncontrolled) and 362.01 (Background diabetic retinopathy). In ICD-10-CM, there is a single code for each type of diabetes with each possible complication, so you would use a code like E11.31 (Type 2 diabetes mellitus with diabetic background retinopathy).

- **More "excludes" notes.** ICD-10-CM has two types of excludes notes. The first type, Excludes1, reports a true excludes note, representing something mutually exclusive to the code. For example, code Z47.1 (Aftercare following joint re-placement surgery) carries the note: "Excludes1 aftercare for healing fracture-code to fracture with extension d."

Excludes2 identifies diseases or conditions that are not considered included in the code but which may occur concurrently and can be coded in addition.

For example, category Z48 (Encounter for other surgical aftercare) lists an Excludes2 note that reads "Excludes2: encounter for attention to artificial openings (Z43) encounter for fitting and adjustment of prosthetic and other devices (Z44-Z46)." List these codes in addition to the Z48 code if appropriate.

Next Steps

Once you've become familiar with ICD-10-CM and the way it works and looks, you'll want to get some official training. But that can wait until three to six months before the final implementation date, Bowman says.

Two to three days of training should be adequate for trained ICD-9 coders to learn what they need to know to make the transition, Bowman says.

Good news: Training for ICD-10-CM probably won't eat up any additional money, Bowman points out. Coders already require continuing education to keep up with changes, so money from that budget can be used to train for ICD-10.

Added bonus: There will be no new ICD-9 codes to learn the year ICD-10 is implemented.