

Home Health ICD-9/ICD-10 Alert

ICD-10: Prepare for More Characters and More Excludes with ICD-10

Add these **4 items to your ICD training checklist and bring staff on board early.**

You don't have to wait for a formal training class to get to know ICD-10. Go ahead and introduce yourself to some of the new coding system's key differences including longer codes, new notes, and placeholders.

1. Digit details: You're used to ICD-9 codes with 3 to 5 digits, but ICD-10 codes can range from 3 to 7 digits, says **Malinda Stanley, RHIA, MPA, CPC, CPC-I**, AHIMA-approved ICD-10 trainer. And while an ICD-9 code can begin with a letter (as in E or V codes), they are far more likely to begin with a number. On the other hand, all ICD-10 codes begin with a letter, followed by two numbers. Digits 4 through 7 can be alpha or numeric in ICD-10.

2. Magic number 7: Certain codes in the ICD-10 manual require you to list a seventh digit to provide information about the characteristic of the encounter, Stanley says. If you report on six digits for these diagnoses, you're submitting an invalid code and courting a claim rejection.

For example: You would list one of the following seventh digits when providing aftercare for a fracture:

D Subsequent encounter for fracture with routine healing

G Subsequent encounter for fracture with delayed healing

K Subsequent encounter for fracture with nonunion

P Subsequent encounter for fracture with malunion

3. Placeholder X: ICD-10 uses the character "X" as a placeholder in certain codes to allow for future expansion or to fill empty character slots when a code contains fewer than six characters but requires a seventh digit to explain a characteristic of the encounter.

For example: ICD-10 code S03.0xxD (Dislocation, jaw, subsequent encounter) is only four characters long but requires a seventh character to denote that it is a subsequent encounter, Stanley says.

4. Two kinds of excludes: The ICD-9 system uses excludes notes to let you know when a code isn't appropriate for certain conditions. ICD-10 mixes things up a bit by using two different kinds of excludes notes.

Like the excludes notes you're used to in ICD-9, ICD-10's "Excludes 1" notes indicate that a code identified in the note and the code where the note appears cannot be reported together because the two conditions cannot occur together, Stanley says.

Excludes 2 notes, on the other hand, indicate that the condition identified in the note is not part of the condition represented by the code where the note appears, so both codes may be reported together.

For example: The entry in ICD-10 for essential (primary) hypertension (I10) includes the following excludes notes. Excludes 1: hypertensive disease complication pregnancy, childbirth and the puerperium (O10-O16). Excludes 2: essential (primary) hypertension involving vessels of brain (I60-I69), essential (primary) hypertension involving vessels of eye (H35.0)