

Chiropractic Coding & Compliance Alert

ICD-10 Update: Must Know: Revisit Your Understanding of Chiropractic Subluxation Now

Do not go by the index when coding for 739 series.

When it comes to coding in ICD-10-CM, be careful to cross check from various sources before submitting your claim. This hold true than for chiropractic codes. Here is a lowdown on the singular discrepancy in the code book index itself, when it comes to chiropractic subluxation ICD-10 codes.

Background: In the good old ICD-9-CM days, when ICD-9 did not really give the definition of subluxation as it relates to the chiropractic profession, DCs used 739.x (Nonallopathic lesions, segmental or somatic dysfunction) and 839.x (Other, multiple, and ill-defined dislocations) to indicate a diagnosis of chiropractic subluxation. The diagnostic codes 739.1 to 739.5 covered the nonallopathic lesions from the neck to the pelvis.

The Issue: 739 Series Does Not Translate Into M99.8_ Series

It's a different story altogether in ICD-10-CM. If you look under "Lesion/nonallopathic" in the ICD-10 index, it says to see "Lesion, biomechanical NEC." Below biomechanical we get M99.81 for the cervical region. As you check the tabular index you will find M99.81 stands for Other biomechanical lesions of cervical region. What's more, GEMS show that M99.81 crosswalks to 738.2, Acquired deformity of neck in ICD-9- CM!

"If you have been participating in any of the webinars/discussions/training offered by CMS, AHIMA, AAPC, The Coding Institute, etc., it pretty much has been drilled into the chiropractors and billers/coders, that you should use the M99.01-07 code set," explains **Elizabeth Earhart, CPC**, with Godshall Chiropractic in Millersville, PA. She adds that, "CMS has even redone their guidelines for codes that can be submitted. The 839 code set is now in the S codes."

Know Your Basics

As you did in ICD-9-CM, it is best to know the ICD-10 codes for the most common and significant conditions that you usually treat. Here are some examples to help you wade through the transition precisely.

Example: Let's take ICD- 9 code 739.1 (Nonallopathic lesions of cervical region not elsewhere classified), which included segmental dysfunction somatic dysfunction.

If you use the GEM calculator or look at the tabular, it directs you to the best match of M99.01 (Segmental and somatic dysfunction of cervical region). Remember that category M99 (Biomechanical lesions, not elsewhere classified) splits into ten possibilities; including these for the head and spine:

- M99.00 (Segmental and somatic dysfunction of head region)
- M99.01 (Segmental and somatic dysfunction of cervical region)
- M99.02 (Segmental and somatic dysfunction of thoracic region)
- M99.03 (Segmental and somatic dysfunction of lumbar region)
- M99.04 (Segmental and somatic dysfunction of sacral region).

Remember: Do not fall into coding chiropractic subluxation as per the code book index, as we await an errata to be released later on to correct this discrepancy.

"Look at what the carriers are putting out," cautions Earhart. "Challenge your EOBs when they come back with denials. Call and find out why it was denied beyond what the generic code on the EOB says."



Final takeaway: We now have about 70,000 ICD-10 codes that represent greater details and specificity. This is the beginning of a new era in U.S. healthcare. There are bound to be some glitches in the beginning of any major project, but with a little awareness, we can realize the higher purpose for which this transition was made.

"Allow yourself more time to code and bill," advises Earhart. "Be patient. Remember not to start off a conversation with support staff negatively; for everyone has been impacted in some way or the other."