



Understanding ICD-10-CM Tabular Instructions to Improve Documentation and Coding

Gloryanne Bryant, RHIA, CDIP, CCS, CCDS

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About the Presenter



Gloryanne Bryant, RHIA, CDIP, CCS, CCDS
AHIMA ICD-10-CM/PCS Trainer

- Ms. Bryant has over 40 years of experience in HIM Coding, CDI and Compliance.
- Gloryanne is the Past-President and Director of CHIA having been an HIM volunteer on local, state and national levels and served on and led many CHIA, AHIMA, HFMA and ACDIS workgroups and committees. Gloryanne served two years on the AHA Coding Clinic EAB.
- She is a sought-after advisor, mentor, national educator, speaker and author on clinical coding compliance and ethics, reimbursement, CDI, physician querying, coding regulations (ICD-10-CM/PCS, CPT, MS-DRGs, and HCCs).
- Over the past four years she was an Expert Witness and Consultant for clinical coding, documentation, charging and MS-DRGs. Currently, she works part-time as an Independent HIM Coding & CDI Compliance Consultant.



Goals/Objectives

1. Brief review of the ICD-10-CM Conventions and Definitions;
2. Enhance clinical knowledge about Diseases and Conditions;
3. Review and learn specific tabular guidance and instructions for ICD-10-CM (Diagnoses/Conditions);
4. Identify key documentation areas for attention and querying;
5. Gain a new understanding of diagnosis coding.



Background

- ICD-10-CM International Classification of Disease, 10th revision, clinical modification (Specific to the United States).
- A diagnosis is a word or phrase used by a physician to identify a disease from which an individual suffers or a condition for which the patient needs, seeks, or receives medical care.

NOTE: This presentation does not cover ALL the FY2023 instructional notes and new codes.

ICD-10-CM CONVENTIONS



The coding conventions are located within the *ICD-10-CM Official Guidelines for Coding and Reporting*.

“See” and “See Also”

- The “see” instruction following a main term in the Alphabetic Index indicates that another term should be referenced. It is necessary to go to the main term referenced with the “see” note to locate the correct code.
- A “see also” instruction following a main term in the Alphabetic Index instructs that there is another main term that may also be referenced that may provide additional Alphabetic Index entries that may be useful. It is not necessary to follow the “see also” note when the original main term provides the necessary code.

“Code Also” Note

- A “code also” note instructs that two codes may be required to fully describe a condition, but this note does not provide sequencing direction. The sequencing depends on the circumstances of the encounter.

Inclusion terms

- List of terms is included under some codes. These terms are the conditions for which that code is to be used. The terms may be synonyms of the code title, or, in the case of “other specified” codes, the terms are a list of the various conditions assigned to that code. The inclusion terms are not necessarily exhaustive. Additional terms found only in the Alphabetic Index may also be assigned to a code

ICD-10-CM Conventions (cont.)



- Etiology/manifestation convention (“code first”, “use additional code” and “in diseases classified elsewhere” notes)
- Certain conditions have both an underlying etiology and multiple body system manifestations due to the underlying etiology. For such conditions, the ICD-10-CM has a coding convention that requires the underlying condition be sequenced first, if applicable, followed by the manifestation. Wherever such a combination exists, there is a “use additional code” note at the etiology code, and a “code first” note at the manifestation code. These instructional notes indicate the proper sequencing order of the codes, etiology followed by manifestation.
- In most cases the manifestation codes will have in the code title, “in diseases classified elsewhere.” Codes with this title are a component of the etiology/ manifestation convention. The code title indicates that it is a manifestation code. “In diseases classified elsewhere” codes are never permitted to be used as first listed or principal diagnosis codes. They must be used in conjunction with an underlying condition code and they must be listed following the underlying condition. See category F02, Dementia in other diseases classified elsewhere, for an example of this convention.
- There are manifestation codes that do not have “in diseases classified elsewhere” in the title. For such codes, there is a “use additional code” note at the etiology code and a “code first” note at the manifestation code, and the rules for sequencing apply.



ICD-10-CM Conventions (cont.)

- An example of the **etiology/manifestation convention** is dementia with Parkinson's disease. In the Alphabetic Index, code G20 is listed first, followed by code F02.80 or F02.81- in brackets. Code G20 represents the underlying etiology, Parkinson's disease, and must be sequenced first, whereas codes F02.80 and F02.81- represent the manifestation of dementia in diseases classified elsewhere, with or without behavioral disturbance.
- **“Code first”** and **“Use additional code”** notes are also used as sequencing rules in the classification for certain codes that are not part of an etiology/manifestation combination.
- See Section I.B.7. Multiple coding for a single condition

ICD-10-CM Conventions (cont.)



Excludes Notes

- The ICD-10-CM has two types of excluded notes. Each type of note has a different definition for use, but they are all similar in that they indicate that codes excluded from each other are independent of each other.
- **Excludes1** A type 1 Excludes note is a pure excludes note. It means “NOT CODED HERE!” An Excludes1 note indicates that the code excluded should never be used at the same time as the code above the Excludes1 note. An Excludes1 is used when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.
 - An exception to the Excludes1 definition is the circumstance when the two conditions are unrelated to each other. If it is not clear whether the two conditions involving an Excludes1 note are related or not, query the provider. For example, code F45.8, Other somatoform disorders, has an Excludes1 note for "sleep related teeth grinding (G47.63)," because "teeth grinding" is an inclusion term under F45.8. Only one of these two codes should be assigned for teeth grinding. However psychogenic dysmenorrhea is also an inclusion term under F45.8, and a patient could have both this condition and sleep related teeth grinding. In this case, the two conditions are clearly unrelated to each other, and so it would be appropriate to report F45.8 and G47.63 together.
- **Excludes2** A type 2 Excludes note represents “Not included here.” An Excludes2 note indicates that the condition excluded is not part of the condition represented by the code, but a patient may have both conditions at the same time. When an Excludes2 note appears under a code, it is acceptable to use both the code and the excluded code together, when appropriate.



ICD-10-CM Alphabetic Index

- The ICD-10-CM is divided into the **Alphabetic Index**, an alphabetical list of terms and their corresponding code, and the Tabular List, a structured list of codes divided into chapters based on body system or condition.
- Always start by locating the term in the Alphabetic Index of Diseases & Injuries, then verify the code in the *Tabular List*.
- The Alphabetic Index consists of the following parts: the Index of Diseases and Injury, the Index of External Causes of Injury, the Table of Neoplasms and the Table of Drugs and Chemicals.



ICD-10-CM Alphabetic Index

- Coding professionals must always use both the Alpha and Tabular to locate and assign an ICD-10-CM code.
- The Alphabetic index DOES NOT ALWAYS provide the full code (final code). The full code selection, including the laterality and any 7th character can only be done within and from the Tabular list.
- ICD-10-CM diagnosis codes are to be used and reported at their highest number of characters available.
- Codes with 3 characters are included in ICD-10-CM as the heading of a category that may be further subdivided by 4, 5, or 6 characters, which provide greater detail

ICD-10-CM INDEX TO DISEASES and INJURIES

A

Aarskog's syndrome Q87.19
Abandonment -see Maltreatment
Abasia (-astasia) (hysterical) F44.4
Abderhalden-Kaufmann-Lignac syndrome (cystinosis) E72.04
Abdomen, abdominal -see also condition
- acute R10.0
- angina K55.1
- muscle deficiency syndrome Q79.4
Abdominalgia -see Pain, abdominal
Abduction contracture, hip or other joint -see Contraction, joint
Aberrant (congenital) -see also Malposition, congenital
- adrenal gland Q89.1
- artery (peripheral) Q27.8
- - basilar NEC Q28.1
- - cerebral Q28.3
- - coronary Q24.5
- - digestive system Q27.8
- - eye Q15.8
- - lower limb Q27.8
- - precerebral Q28.1
- - pulmonary Q25.79
- - renal Q27.2
- - retina Q14.1
- - specified site NEC Q27.8
- - subclavian Q27.8
- - upper limb Q27.8
- - vertebral Q28.1
- breast Q83.8
- endocrine gland NEC Q89.2
- hepatic duct Q44.5
- pancreas Q45.3
- parathyroid gland Q89.2
- pituitary gland Q89.2
- sebaceous glands, mucous membrane, mouth, congenital Q38.6
- spleen Q89.09
- subclavian artery Q27.8
- thymus (gland) Q89.2
- thyroid gland Q89.2
- vein (peripheral) NEC Q27.8
- - cerebral Q28.3
- - digestive system Q27.8
- - lower limb Q27.8
- - precerebral Q28.1
- - specified site NEC Q27.8
- - upper limb Q27.8
Aberration
- distastial -see Disturbance, visual
- mental F99
Abetalipoproteinemia E78.6
Abiotrophy R68.89
Ablatio, ablation
- retinae -see Detachment, retina
Ablepharia, ablepharon Q10.3
Abnormal, abnormality, abnormalities -see also Anomaly





ICD-10-CM Tabular List

ICD-10-CM *Tabular List* is a structured list of diagnosis codes divided into 22 chapters, each containing sections, categories, subcategories and codes based on body system or condition.

NOTE: 7th characters and placeholder X

For codes less than 6 characters that require a 7th character a placeholder X should be assigned for all characters less than 6. The 7th character must always be the 7th character of a code

ICD-10-CM TABULAR LIST of DISEASES and INJURIES

Table of Contents

- 1 Certain infectious and parasitic diseases (A00-B99)
- 2 Neoplasms (C00-D49)
- 3 Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)
- 4 Endocrine, nutritional and metabolic diseases (E00-E89)
- 5 Mental, Behavioral and Neurodevelopmental disorders (F01-F99)
- 6 Diseases of the nervous system (G00-G99)
- 7 Diseases of the eye and adnexa (H00-H59)
- 8 Diseases of the ear and mastoid process (H60-H95)
- 9 Diseases of the circulatory system (I00-I99)
- 10 Diseases of the respiratory system (J00-J99)
- 11 Diseases of the digestive system (K00-K95)
- 12 Diseases of the skin and subcutaneous tissue (L00-L99)
- 13 Diseases of the musculoskeletal system and connective tissue (M00-M99)
- 14 Diseases of the genitourinary system (N00-N99)
- 15 Pregnancy, childbirth and the puerperium (O00-O9A)
- 16 Certain conditions originating in the perinatal period (P00-P96)
- 17 Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)
- 18 Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)
- 19 Injury, poisoning and certain other consequences of external causes (S00-T88)
- 20 External causes of morbidity (V00-Y99)
- 21 Factors influencing health status and contact with health services (Z00-Z99)
- 22 Codes for special purposes (U00-U85)

Instructional Notations

Includes:

The word 'includes' appears immediately under certain categories to further define, or give examples of, the content of the category.

Excludes Notes

The ICD-10-CM has two types of excludes notes. Each note has a different definition for use but they are both similar in that they indicate that codes excluded from each other are independent of each other.

Excludes1

A type 1 Excludes note is a pure excludes. It means 'NOT CODED HERE!' An Excludes1 note indicates that the code excluded should never be used at the same time as the code above the Excludes1 note. An Excludes1 is used when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.

Excludes2

A type 2 excludes note represents 'Not included here'. An excludes2 note indicates that the condition excluded is not part of the condition it is excluded from but a patient may have both conditions at the same time. When an Excludes2 note appears under a code it is acceptable to use both the code and the excluded code together.

Code First/Use Additional Code notes (etiology/manifestation paired codes)

Certain conditions have both an underlying etiology and multiple body system manifestations due to the underlying etiology. For such conditions the ICD-10-CM has a coding convention that requires the underlying condition be sequenced first followed by the manifestation. Wherever such a combination exists there is a 'use additional code' note at the etiology code, and a 'code first' note at the manifestation code. These instructional notes indicate the proper sequencing order of the codes, etiology followed by manifestation.

In most cases the manifestation codes will have in the code title, 'In diseases classified elsewhere.' Codes with this title are a component of the etiology/ manifestation convention. The code title indicates that it is a manifestation code. 'In diseases classified elsewhere' codes are never permitted to be used as first listed or principal diagnosis codes. They must be used in conjunction with an underlying condition code and they must be listed following the underlying condition.

Code Also

A code also note instructs that 2 codes may be required to fully describe a condition but the sequencing of the two codes

ICD-10-CM TABULAR LIST of DISEASES and INJURIES

2023 Addenda

No Change Chapter 1

No Change Certain infectious and parasitic diseases (A00-B99)

No Change Viral and prion infections of the central nervous system (A80-A89)

No Change A81 Atypical virus infections of central nervous system

No Change Use Additional

code to identify:
code, if applicable, to identify:
Revise from dementia with behavioral disturbance (F02.B1)
Revise from dementia with anxiety (F02.B4, F02.A4, F02.B4, F02.C4)
Revise to dementia without behavioral disturbance (F02.B0)
Delete dementia with behavioral disturbance (F02.B1-, F02.A1-, F02.B1-, F02.C1-)
Add dementia with mood disturbance (F02.B3, F02.A3, F02.B3, F02.C3)
Add dementia with psychotic disturbance (F02.B2, F02.A2, F02.B2, F02.C2)
Add dementia without behavioral disturbance (F02.B0, F02.A0, F02.B0, F02.C0)
Add mild neurocognitive disorder due to known physiological condition (F06.7-)

No Change A85 Other viral encephalitis, not elsewhere classified

No Change Excludes1:

Delete benign myalgic encephalomyelitis (G93.3)
Add myalgic encephalomyelitis (G93.32)

No Change Mycoses (B35-B49)

No Change B37 Candidiasis

No Change B37.3 Candidiasis of vulva and vagina

Add B37.31 Acute candidiasis of vulva and vagina
Add Candidiasis of vulva and vagina NOS

Add B37.32 Chronic candidiasis of vulva and vagina
Add Recurrent candidiasis of vulva and vagina



ICD-10-CM CHAPTERS

1. Certain infectious and parasitic diseases (A00-B99)
2. Neoplasms (C00-D49)
3. Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)
4. Endocrine, nutritional and metabolic diseases (E00-E89)
5. Mental, Behavioral and Neurodevelopmental disorders (F01-F99)
6. Diseases of the nervous system (G00-G99)
7. Diseases of the eye and adnexa (H00-H59)
8. Diseases of the ear and mastoid process (H60-H95)
9. Diseases of the circulatory system (I00-I99)
10. Diseases of the respiratory system (J00-J99)
11. Diseases of the digestive system (K00-K95)
12. Diseases of the skin and subcutaneous tissue (L00-L99)



ICD-10-CM CHAPTERS

- 13. Diseases of the musculoskeletal system and connective tissue (M00-M99)
- 14. Diseases of the genitourinary system (N00-N99)
- 15. Pregnancy, childbirth and the puerperium (O00-O9A)
- 16. Certain conditions originating in the perinatal period (P00-P96)
- 17. Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)
- 18. Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)
- 19. Injury, poisoning and certain other consequences of external causes (S00-T88)
- 20. External causes of morbidity (V00-Y99)
- 21. Factors influencing health status and contact with health services (Z00-Z99)
- 22. Codes for special purposes (U00-U85)



CMS Website for ICD-10-CM

↑ Classification of Diseases,
Functioning, and Disability

ICD-10-CM International
Classification of Diseases, Tenth
Revision, Clinical Modification
(ICD-10-CM)

Comprehensive Listing ICD-10-CM
Files

Special Announcements

ICD-10 - CM Browser Tool

ICD-9

ICD-10 (Mortality)

ICD-9-CM

ICD-10-CM/PCS Transition

Coordination and Maintenance
Committee Main

ICF

Classification of Death and Injury

Comprehensive Listing ICD-10-CM Files

[Print](#)

2023 release of ICD-10-CM

The FY2023 ICD-10-CM codes are to be used from October 1, 2022 through September 30, 2023.

Note: This replaces the FY 2022 – April 1, release. These files listed below represent the ICD-10-CM FY2023 October 1, release. The October 1, FY2023 ICD-10-CM is available in both PDF (Adobe) and XML file formats. Most files are provided in compressed zip format for ease in downloading. These files have been created by the National Center for Health Statistics (NCHS), under authorization by the World Health Organization. Any questions regarding typographical or other errors noted on this release may be reported to nchsicd10cm@cdc.gov.

- [ICD-10-CM Preface](#)
- [ICD-10-CM FY2023 Guidelines](#)
- [ICD-10-CM FY2023 Full PDF](#)
- [ICD-10-CM FY2023 XML](#)
- [ICD-10-CM FY 2023 Addenda PDF](#)
- [ICD-10-CM FY 2023 List of codes and Descriptions](#)
- [ICD-10-CM FY2023 Order Files](#)
- [ICD-10-CM FY2023 Conversion Table](#)
- [ICD-10-CM FY2023 Present on Admission \(POA\) Exempt Codes](#)
- [ICD-10-CM FY2023 Drug errata](#)

Chapter 1



Certain infectious and parasitic diseases (A00-B99)

- Includes: diseases generally recognized as communicable or transmissible
Use additional code to identify resistance to antimicrobial drugs (Z16.-)
- Excludes1: certain localized infections - see body system-related chapters
- Excludes2: carrier or suspected carrier of infectious disease (Z22.-)
infectious and parasitic diseases complicating pregnancy, childbirth and the puerperium (O98.-) infectious and parasitic diseases specific to the perinatal period (P35-P39) influenza and other acute respiratory infections (J00-J22)



Chapter 1

This chapter contains the following blocks:

- A00-A09 Intestinal infectious diseases
- A15-A19 Tuberculosis
- A20-A28 Certain zoonotic bacterial diseases
- A30-A49 Other bacterial diseases
- A50-A64 Infections with a predominantly sexual mode of transmission
- A65-A69 Other spirochetal diseases
- A70-A74 Other diseases caused by chlamydia
- A75-A79 Rickettsioses
- A80-A89 Viral and prion infections of the central nervous system
- A90-A99 Arthropod-borne viral fevers and viral hemorrhagic fevers



Chapter 1 (cont.)

This chapter contains the following blocks (cont.):

- B00-B09 Viral infections characterized by skin and mucous membrane lesions
- B10 Other human herpesviruses
- B15-B19 Viral hepatitis
- B20 Human immunodeficiency virus [HIV] disease
- B25-B34 Other viral diseases
- B35-B49 Mycoses
- B50-B64 Protozoal diseases
- B65-B83 Helminthiases
- B85-B89 Pediculosis, acariasis and other infestations
- B90-B94 Sequelae of infectious and parasitic diseases
- B95-B97 Bacterial and viral infectious agents
- B99 Other infectious diseases

Chapter 1 Certain Infectious and Parasitic Diseases (A00-B99)



- B37.3 Candidiasis of vulva and vagina
- **NEW B37.31** Acute candidiasis of vulva and vagina

Add Candidiasis of vulva and vagina NOS

- **NEW B37.32** Chronic candidiasis of vulva and vagina

Add Recurrent candidiasis of vulva and vagina

NOTE: Inclusion terms.

Clinical: Candidiasis is an infection caused by yeast (a type of fungus) called Candida.

Candida normally lives on skin and inside the body such as in the mouth, throat, gut, and vagina, without causing any problems.

Candida can cause an infection if conditions change inside the vagina to encourage its growth. Things like hormones, medicines, or changes in the immune system can make infection more likely.

The common term for candidiasis in the vagina is a vaginal yeast infection. Other names for this infection are vaginal candidiasis, vulvovaginal candidiasis, or candidal vaginitis.

NOTE: Vulvovaginal Candidiasis (VVC) and Recurrent Vulvovaginal Candidiasis (RVVC).



Chapter 3

Chapter 3: Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50- D89)

Excludes2: autoimmune disease (systemic) NOS (M35.9) certain conditions originating in the perinatal period (P00-P96) complications of pregnancy, childbirth and the puerperium (O00-O9A) congenital malformations, deformations and chromosomal abnormalities (Q00-Q99) endocrine, nutritional and metabolic diseases (E00-E88) human immunodeficiency virus [HIV] disease (B20) injury, poisoning and certain other consequences of external causes (S00-T88) neoplasms (C00-D49) symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R94)

Chapter 3



This chapter contains the following blocks:

- D50-D53 Nutritional anemias
- D55-D59 Hemolytic anemias
- D60-D64 Aplastic and other anemias and other bone marrow failure syndromes
- D65-D69 Coagulation defects, purpura and other hemorrhagic conditions
- D70-D77 Other disorders of blood and blood-forming organs
- D78 Intraoperative and postprocedural complications of the spleen
- D80-D89 Certain disorders involving the immune mechanism

Chapter 3



- **NEW D59.30** Hemolytic-uremic syndrome, unspecified
 - Add Hemolytic-uremic syndrome NOS
- **NEW D59.31** Infection-associated hemolytic-uremic syndrome
 - Add Shiga toxin-producing E. coli [STEC] related hemolytic uremic syndrome
 - Add Typical hemolytic uremic syndrome
 - Add Use Additional code to identify associated infection, such as:
 - Add E. coli infection (B96.2-)
 - Add Human immunodeficiency virus [HIV] disease (B20)
 - Add Pneumococcal meningitis (G00.1)
 - Add Pneumococcal pneumonia (J13)
 - Add Sepsis due to Streptococcus pneumoniae (A40.3)
 - Add Shigella dysenteriae (A03.9)
 - Add Streptococcus pneumonia as the cause of diseases classified elsewhere (B95.3)

FY2023 New Guideline – includes sequencing instruction.

Chapter 3



- **Clinical:** A rare condition results from the damage of small blood vessels in kidneys. This causes diarrhea, abdominal pain, vomiting and fever.
- **Causes:** Infection with E. coli, certain medication and pregnancy (rarely) are the probable causes of the condition. 2 types: Typical (due to Shiga toxin-producing E.coli or STEC and Atypical (multiple causes).
- **Symptoms:** Vomiting, diarrhea, abdominal pain, fever, pallor, seizures and headaches are the most commonly noted symptoms.
- **Diagnosis:** Diagnosis is aimed at establishing whether there is damage of blood components or if the kidneys are affected.

NOTE: Documentation could state “HUS” as a diagnosis.



Chapter 3 (cont.)

NEW D59.32 Hereditary hemolytic-uremic syndrome

- Add Atypical hemolytic uremic syndrome with an identified genetic cause

Add Code also, if applicable:

- Add defects in the complement system (D84.1)
- Add methylmalonic acidemia (E71.120)

NOTE: the “Code First” instruction;
NOTE: the “Code Also” instruction;
NOTE: “Use additional Code” instruction



Chapter 3 (cont.)

NEW D59.39 Other hemolytic-uremic syndrome Add Atypical (nongenetic) hemolytic uremic syndrome

- Add Secondary hemolytic-uremic syndrome

Add Code first, if applicable, any associated:

- Add COVID-19 (U07.1)
- Add complications of kidney transplant (T86.1-)
- Add complications of heart transplant (T86.2-)
- Add complications of liver transplant (T86.4-)

Add Code also, if applicable, any associated condition, such as:

- Add hypertensive emergency (I16.1)
- Add malignant neoplasm (C00-C96)
- Add systemic lupus erythematosus (M32.-)

Add Use Additional code, if applicable, for adverse effect to identify drug (T36-T50 with fifth or sixth character 5)

Chapter 3 (cont.)



NEW D75.821 Non-immune heparin-induced thrombocytopenia

- Add Non-immune HIT Add Type 1 heparin-induced thrombocytopenia

NEW D75.822 Immune-mediated heparin-induced thrombocytopenia

- Add Immune-mediated HIT
- Add Type 2 heparin-induced thrombocytopenia

NEW D75.828 Other heparin-induced thrombocytopenia syndrome

- Add Autoimmune heparin-induced thrombocytopenia syndrome
- Add Delayed-onset heparin-induced thrombocytopenia
- Add Persisting heparin-induced thrombocytopenia

NOTE: Inclusion terms.

NEW D75.829 Heparin-induced thrombocytopenia, unspecified

NEW D75.84 Other platelet-activating anti-PF4 disorders

- Add Spontaneous heparin-induced thrombocytopenia syndrome (without heparin exposure)
- Add Thrombosis with thrombocytopenia syndrome
- Add Vaccine-induced thrombotic thrombocytopenia
- **Add Use Additional code**, if applicable, for adverse effect of other viral vaccine (T50.B95-)

DOCUMENTATION SPECIFICITY.



Chapter 3 (cont.)

- D81.8 Other combined immunodeficiencies
- **NEW D81.82** Activated Phosphoinositide 3-kinase Delta Syndrome [APDS]
 - Add p110d-activating mutation causing senescent T cells, lymphadenopathy, and immunodeficiency [PASLI] disease

Add Code also, if applicable, any associated manifestations, such as:

- Add bronchiectasis (J47.-)
- Add herpes virus infections (B00.-)
- Add other acute respiratory tract infections (J00-J06; J20-J22)
- Add other infections (A00-B99)
- Add pneumonia (J12-J18)

NOTE: Inclusion terms.

NOTE: abbreviations APDS and PASLI, watch for this in the documentation.

Chapter 4



Chapter 4: Endocrine, Nutritional and Metabolic Diseases (E00-E89)

Note: All neoplasms, whether functionally active or not, are classified in Chapter 2. Appropriate codes in this chapter (i.e. E05.8, E07.0, E16-E31, E34.-) may be used as additional codes to indicate either functional activity by neoplasms and ectopic endocrine tissue or hyperfunction and hypofunction of endocrine glands associated with neoplasms and other conditions classified elsewhere.

Excludes1: transitory endocrine and metabolic disorders specific to newborn (P70-P74)

Chapter 4



This chapter contains the following blocks:

- E00-E07 Disorders of thyroid gland
- E08-E13 Diabetes mellitus
- E15-E16 Other disorders of glucose regulation and pancreatic internal secretion
- E20-E35 Disorders of other endocrine glands
- E36 Intraoperative complications of endocrine system
- E40-E46 Malnutrition E50-E64 Other nutritional deficiencies
- E65-E68 Overweight, obesity and other hyperalimentation
- E70-E88 Metabolic disorders E89 Postprocedural endocrine and metabolic complications and disorders, not elsewhere classified



Chapter 4 (cont.)

NEW E87.20 Acidosis, unspecified

- Add Lactic acidosis NOS
- Add Metabolic acidosis NOS
- **Add Code also** if applicable, respiratory failure with hypercapnia (J96. with 5th character 2)

NEW E87.21 Acute metabolic acidosis

- Add Acute lactic acidosis

NEW E87.22 Chronic metabolic acidosis

- Add Chronic lactic acidosis
- **Add Code first** underlying etiology, if applicable

NEW E87.29 Other acidosis

- Add Respiratory acidosis NOS
- **Add Excludes2:** acute respiratory acidosis (J96.02)
- Add chronic respiratory acidosis (J96.12)

DOCUMENTATION SPECIFICITY. Query MAY BE NEEDED!

Chapter 4 (cont.)



Clinical: Symptoms vary based on the underlying cause but few of the common symptoms are as follows: Rapid breathing, Confusion, Tiredness, Shock, Fruity smell of the patient's breath (diabetic keto-acidosis), Fast heartbeat, Headache, Weakness, Nausea

Causes: A variety of factors are responsible for the condition and the type of acidosis depends on the causative factor:

- Prolonged lack of oxygen from shock, heart failure or severe anemia (lactic acidosis)
- Exercising intensely (lactic acidosis)
- Medication/ toxins like salicylates, methanol, ethylene glycol (lactic acidosis)
- Diabetes (Keto-acidosis)
- Starvation (Keto-acidosis)
- Alcohol excess (Keto-acidosis/lactic acidosis)
- Severe diarrhea (Excessive loss of gastro-intestinal bicarbonate)
- Excessive loss of renal bicarbonate associated with acetazolamide therapy or kidney disease
- Severe dehydration (Lactic acidosis / keto-acidosis)

Chapter 5 Mental Behavioral & Neurodevelopmental Disorders (F01-F99)



- **NEW F01.511** Vascular dementia, unspecified severity, with agitation
- **NEW F01.518** Vascular dementia, unspecified severity, with other behavioral disturbance
- **NEW F01.52** Vascular dementia, unspecified severity, with psychotic disturbance
- **NEW F01.53** Vascular dementia, unspecified severity, with mood disturbance
- **NEW F01.54** Vascular dementia, unspecified severity, with anxiety
- **NEW F01.A** Vascular dementia, mild
 - **Add Excludes1:** Mild neurocognitive disorder due to known physiological condition with or without behavioral disturbance (F06.7-)
- **NEW F01.A0** Vascular dementia, mild, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety

DOCUMENTATION SPECIFICITY. Query MAY BE NEEDED!

Chapter 5 Mental Behavioral & Neurodevelopmental Disorders (F01-F99)



- **NEW F01.A1** Vascular dementia, mild, with behavioral disturbance
- **NEW F01.A11** Vascular dementia, mild, with agitation
- **NEW F01.A18** Vascular dementia, mild, with other behavioral disturbance
- **NEW F01.A2** Vascular dementia, mild, with psychotic disturbance
- **NEW F01.A3** Vascular dementia, mild, with mood disturbance

Additional series of new codes....

- **NEW F01.B** Vascular dementia, moderate
- **NEW F01.C** Vascular dementia, severe

Review all the inclusion terms for each code.

Chapter 5 (cont.) – Tabular Details



NEW F01.511 Vascular dementia, unspecified severity, with agitation

- Add Major neurocognitive disorder due to vascular disease, unspecified severity, with **aberrant motor behavior such as restlessness, rocking, pacing, or exit-seeking**
- Add Major neurocognitive disorder due to vascular disease, unspecified severity, with verbal or physical behaviors such as profanity, shouting, threatening, anger, aggression, combativeness, or violence
- Add Vascular dementia, unspecified severity, with aberrant motor behavior such as restlessness, rocking, pacing, or exit-seeking
- Add Vascular dementia, unspecified severity, with verbal or physical behaviors such as profanity, shouting, threatening, anger, aggression, combativeness, or violence

NEW F01.518 Vascular dementia, unspecified severity, with other behavioral disturbance

- Add Major neurocognitive disorder due to vascular disease, unspecified severity, with behavioral disturbances such as sleep disturbance, social disinhibition, or sexual disinhibition
- Add Vascular dementia, unspecified severity, with behavioral disturbances such as sleep disturbance, social disinhibition, or sexual disinhibition
- Add Use Additional code, if applicable, to identify wandering in vascular dementia (Z91.83)



Clinical: Vascular Dementia

Vascular Dementia is a condition caused by the lack of blood that carries oxygen and nutrient to a part of the brain. It causes problems with reasoning, planning, judgment, and memory.

The symptoms include:

- Short-term memory loss
- Getting lost in known surroundings
- Reduced concentration and planning
- Trouble with finance management
- Cannot follow instructions
- Inability to control bladder or bowel
- Delusions and hallucinations

If untreated for a prolonged period, it may lead to:

- Behavioral problems, Depression, Gait abnormality, Falls, Aspiration pneumonia, Decubitus ulcers, Syndrome of delayed post hypoxic leukoencephalopathy

Chapter 5 (cont.)



- F06 Other mental disorders due to known physiological condition
- **NEW F06.7** Mild neurocognitive disorder due to known physiological condition
 - Add Mild neurocognitive impairment due to a known physiological condition
 - **Add Code first** the underlying physiological condition, such as:
 - Add Alzheimer's disease (G30.-)
 - Add frontotemporal neurocognitive disorder (G31.09)
 - Add human immunodeficiency virus [HIV] disease (B20)
 - Add Huntington's disease (G10)
 - Add Neurocognitive disorder with Lewy bodies (G31.83)
 - Add Parkinson's disease (G20)
 - Add systemic lupus erythematosus (M32.-) Add traumatic brain injury (S06.-)
 - Add vitamin B deficiency (E53-)
 - **Add Excludes1:** age related cognitive decline (R41.81)
 - Add altered mental status (R41.82) Add cerebral degeneration (G31.9)
 - Add change in mental status (R41.82)
 - Add cognitive deficits following (sequelae of) cerebral hemorrhage or infarction (I69.01- I69.11-, I69.21-I69.31-, I69.81- I69.91-)
 - Add dementia (F01.-, F02.-, F03)
 - Add mild cognitive impairment due to unknown or unspecified etiology (G31.84)
 - Add neurologic neglect syndrome (R41.4)
 - Add personality change, nonpsychotic (F68.8)

NOTE: Inclusion terms.



Chapter 5 (cont.)

- **NEW F06.70** Mild neurocognitive disorder due to known physiological condition without behavioral disturbance
 - Add Mild neurocognitive disorder due to known physiological condition, NOS
- **NEW F06.71** Mild neurocognitive disorder due to known physiological condition with behavioral disturbance

Review carefully the inclusion terms and instructional notes.

Chapter 9 Diseases of the Circulatory System (I00-I99)



- I25 Chronic ischemic heart disease
- I25.1 Atherosclerotic heart disease of native coronary artery
- I25.11 Atherosclerotic heart disease of native coronary artery with angina pectoris
- **NEW I25.112** Atherosclerosis heart disease of native coronary artery with refractory angina pectoris
- I25.7 Atherosclerosis of coronary artery bypass graft(s) and coronary artery of transplanted heart with angina pectoris
- I25.70 Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris
- **NEW I25.702** Atherosclerosis of coronary artery bypass graft(s), unspecified, with refractory angina pectoris
- I25.71 Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris
- **NEW I25.712** Atherosclerosis of autologous vein coronary artery bypass graft(s) with refractory angina pectoris
- I25.72 Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris
- **NEW I25.722** Atherosclerosis of autologous artery coronary artery bypass graft(s) with refractory angina pectoris

DOCUMENTATION SPECIFICITY. Query MAY BE NEEDED!



Chapter 9 (cont.)

- I25.73 Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris
- **NEW I25.732** Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with refractory angina pectoris
- I25.75 Atherosclerosis of native coronary artery of transplanted heart with angina pectoris
- **NEW I25.752** Atherosclerosis of native coronary artery of transplanted heart with refractory angina pectoris
- I25.76 Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris
- **NEW I25.762** Atherosclerosis of bypass graft of coronary artery of transplanted heart with refractory angina pectoris
- I25.79 Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris
- **NEW I25.792** Atherosclerosis of other coronary artery bypass graft(s) with refractory angina pectoris



Chapter 9 (cont.)

- **NEW I31.31** Malignant pericardial effusion in diseases classified elsewhere
 - **Add Code first** underlying neoplasm (C00-D49)
- **NEW I31.39** Other pericardial effusion (noninflammatory)
 - Add Chylopericardium
- I34.8 Other nonrheumatic mitral valve disorders
- **NEW I34.81** Nonrheumatic mitral (valve) annulus calcification
 - Add Nonrheumatic mitral (valve) annular calcification
 - Add Mitral (valve) annulus calcification NOS
 - **Add Code also**, if applicable:
 - Add nonrheumatic mitral (valve) insufficiency (I34.0)
 - Add nonrheumatic mitral (valve) stenosis (I34.2)
- **NEW I34.89** Other nonrheumatic mitral valve disorders

NOTE: Tabular Inclusion terms.



Chapter 9 (cont.)

- I47.2 Ventricular tachycardia
- **NEW I47.20** Ventricular tachycardia, unspecified
- **NEW I47.21** Torsades de pointes
 - **Add Code also**, if applicable, long QT syndrome (I45.81)
 - **Add Use Additional code** for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)
- **NEW I47.29** Other ventricular tachycardia

DOCUMENTATION SPECIFICITY. Query MAY BE NEEDED!



Chapter 9 (cont.)

- I71.4 Abdominal aortic aneurysm, without rupture
- **NEW I71.40** Abdominal aortic aneurysm, without rupture, unspecified
- **NEW I71.41** Pararenal abdominal aortic aneurysm, without rupture
- **NEW I71.42** Juxtarenal abdominal aortic aneurysm, without rupture
- **NEW I71.43** Infrarenal abdominal aortic aneurysm, without rupture
- I71.5 Thoracoabdominal aortic aneurysm, ruptured
- **NEW I71.50** Thoracoabdominal aortic aneurysm, ruptured, unspecified
- **NEW I71.51** Supraceliac aneurysm of the abdominal aorta, ruptured
- **NEW I71.52** Paravisceral aneurysm of the abdominal aorta, ruptured

Do you need a query?



Chapter 9 (cont.)

- I71.6 Thoracoabdominal aortic aneurysm, without rupture
- **NEW I71.60** Thoracoabdominal aortic aneurysm, without rupture, unspecified
- **NEW I71.61** Supraceliac aneurysm of the abdominal aorta, without rupture
- **NEW I71.62** Paravisceral aneurysm of the abdominal aorta, without rupture

ANATOMIC SPECIFICITY.

Chapter 10 Diseases of the Respiratory System (J00-J99)



- J95.8 Other intraoperative and postprocedural complications and disorders of respiratory system, not elsewhere classified
- **NEW J95.87** Transfusion-associated dyspnea (TAD)
 - **Add Excludes1:** transfusion associated circulatory overload (TACO) (E87.71)
 - Add transfusion-related acute lung injury (TRALI) (J95.84)
- J96.0 Acute respiratory failure
- J96.02 Acute respiratory failure with hypercapnia
 - Add Acute respiratory acidosis
- J96.1 Chronic respiratory failure
- J96.12 Chronic respiratory failure with hypercapnia
 - Add Chronic respiratory acidosis

NOTE: Tabular Inclusion terms.

Chapter 11 Diseases of the Digestive System (K00-K95)



- K76.8 Other specified diseases of liver

- **NEW K76.82 Hepatic encephalopathy**

- Add Hepatic encephalopathy, NOS
- Add Hepatic encephalopathy without coma
- Add Hepatocerebral intoxication
- Add Portal-systemic encephalopathy

Add Code also underlying liver disease, such as:

- Add acute and subacute hepatic failure without coma (K72.00)
- Add alcoholic hepatic failure without coma (K70.40)
- Add chronic hepatic failure without coma (K72.10)
- Add hepatic failure with toxic liver disease without coma (K71.10)
- Add hepatic failure without coma (K72.90)
- Add icterus of newborn (P55-P59)
- Add postprocedural hepatic failure (K91.82)
- Add viral hepatitis without hepatic coma (B15.9, B16.1, B16.9, B17.10, B19.10, B19.20, B19.9)
- **Add Excludes1:** acute and subacute hepatic failure with coma (K72.01)
- Add alcoholic hepatic failure with coma (K70.41)
- Add chronic hepatic failure with coma (K72.11)
- Add hepatic failure with coma (K72.91)

INCLUDE “HEPATIC ENCEPHALOPATHY” IN A NEW QUERY?

Chapter 13 Diseases of the Musculoskeletal System and Connective Tissue (M00-M99)



- M51 Thoracic, thoracolumbar, and lumbosacral intervertebral disc disorders
- **NEW M51.A** Other lumbar and lumbosacral annulus fibrosus disc defects
- **NEW M51.A0** Intervertebral annulus fibrosus defect, lumbar region, unspecified size
 - **Add Code first**, if applicable, lumbar disc herniation (M51.06, M51.16, M51.26)
- **NEW M51.A1** Intervertebral annulus fibrosus defect, small, lumbar region
 - **Add Code first**, if applicable, lumbar disc herniation (M51.06, M51.16, M51.26)
- **NEW M51.A2** Intervertebral annulus fibrosus defect, large, lumbar region
 - **Add Code first**, if applicable, lumbar disc herniation (M51.06, M51.16, M51.26)
- **NEW M51.A3** Intervertebral annulus fibrosus defect, lumbosacral region, unspecified size
 - **Add Code first**, if applicable, lumbosacral disc herniation (M51.17, M51.27)
- **NEW M51.A4** Intervertebral annulus fibrosus defect, small, lumbosacral region
 - **Add Code first**, if applicable, lumbosacral disc herniation (M51.17, M51.27)
- **NEW M51.A5** Intervertebral annulus fibrosus defect, large, lumbosacral region
 - **Add Code first**, if applicable, lumbosacral disc herniation (M51.17, M51.27)

See the “**Code First**” instruction for the new codes.



Chapter 13 (cont.)

- **NEW M96.A** Fracture of ribs, sternum and thorax associated with compression of the chest and cardiopulmonary resuscitation
- **NEW M96.A1** Fracture of sternum associated with chest compression and cardiopulmonary resuscitation
 - Add Fracture of xiphoid process associated with chest compression and cardiopulmonary resuscitation
- **NEW M96.A2** Fracture of one rib associated with chest compression and cardiopulmonary resuscitation
- **NEW M96.A3** Multiple fractures of ribs associated with chest compression and cardiopulmonary resuscitation
- **NEW M96.A4** Flail chest associated with chest compression and cardiopulmonary resuscitation
- **NEW M96.A9** Other fracture associated with chest compression and cardiopulmonary resuscitation

Clinical: Can occur in elderly patients with Osteoporosis.

Read over AHA Coding Clinic First Quarter 2021, page 5-6.

Chapter 14 Diseases of the Genitourinary System (N00-N99)



- N14.1 Nephropathy induced by other drugs, medicaments and biological substances
- **NEW N14.11** Contrast-induced nephropathy
 - Add Contrast medium, radiography nephropathy
 - **Add Excludes2:** acute kidney failure (N17.-)
- **NEW N14.19** Nephropathy induced by other drugs, medicaments and biological substances
- N76.8 Other specified inflammation of vagina and vulva
- **NEW N76.82** Fournier disease of vagina and vulva
 - Add Fournier gangrene of vagina and vulva
 - **Add Code also,** if applicable, diabetes mellitus (E08-E13 with .9)
 - **Add Excludes1:** gangrene in diabetes mellitus (E08-E13 with .52)

Chapter 14 (cont.)



- N85 Other noninflammatory disorders of uterus, except cervix
- **NEW N85.A Isthmocele**
 - Add Isthmocele (non-pregnant state)
 - **Add Code also** any associated conditions such as:
 - Add abnormal uterine and vaginal bleeding, unspecified (N93.9)
 - Add female infertility of uterine origin (N97.2)
 - Add pelvic and perineal pain (R10.2)
 - **Add Excludes1:** maternal care for cesarean scar defect (isthmocele) (O34.22)

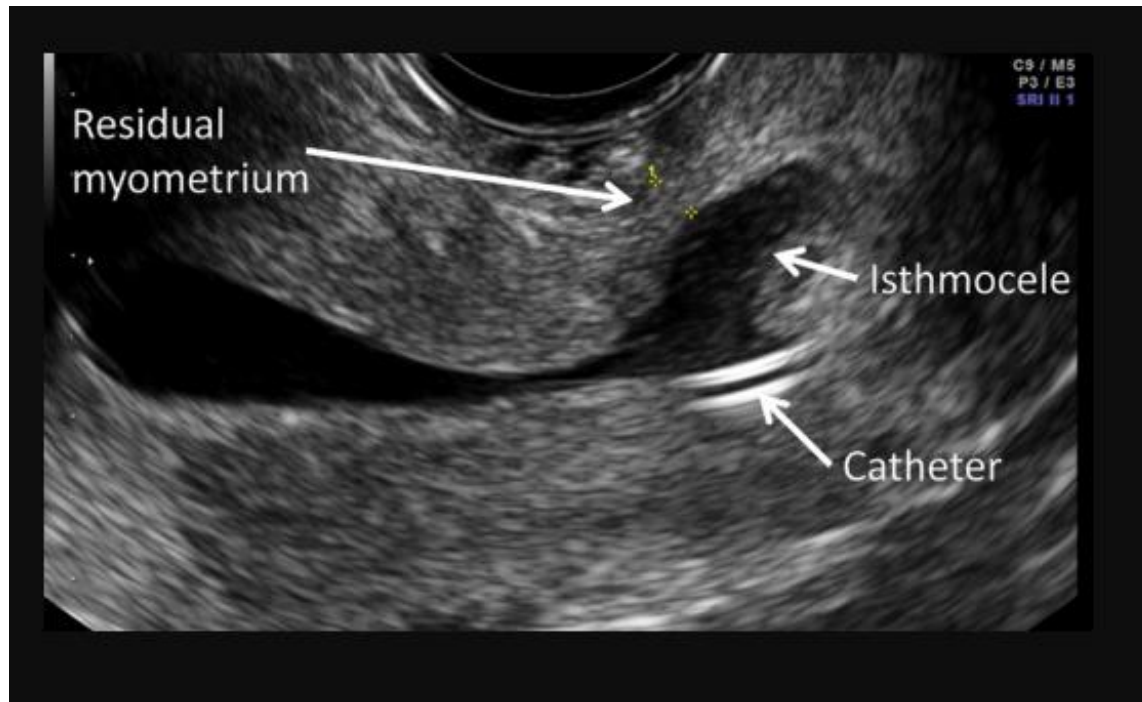
Clinical: A uterine isthmocele is a niche or defect on the internal wall of the uterine cavity at the site of a C-section scar. This condition can cause abnormal bleeding and secondary infertility.

When menstrual blood gets trapped inside a uterine isthmocele, it leads to significant inflammation of the uterine lining. This inflammation can cause infertility by killing sperm as they travel through the uterus to the egg and by creating an inhospitable environment for embryo implantation.

Source: <https://veritafertility.com/conditions/uterine-isthmocele/>



Clinical: Image of Isthmocele



Chapter 16 Certain Conditions Originating in the Perinatal Period (P00-P96)



- P28.3 Primary sleep apnea of newborn
 - Delete Central sleep apnea of newborn
 - Delete Obstructive sleep apnea of newborn
 - Add Excludes2: other apnea of newborn (P28.4-)
- **NEW P28.30** Primary sleep apnea of newborn, unspecified
 - Add Transient oxygen desaturation spells of newborn during sleep
- **NEW P28.31** Primary central sleep apnea of newborn
- **NEW P28.32** Primary obstructive sleep apnea of newborn
- **NEW P28.33** Primary mixed sleep apnea of newborn
- **NEW P28.39** Other primary sleep apnea of newborn

Chapter 16 Certain Conditions Originating in the Perinatal Period (P00-P96)



Clinical: Sleep apnea is a sleep disorder that causes interruptions in breathing during sleep.

Sleep apnea is most common in adults, but also affects children, infants, and newborns. **Apnea during infancy is most common in babies with low birth weight and in those born prematurely.**

Babies may experience episodes of apnea while awake and during sleep.

Almost all infants born at less than 28 weeks of pregnancy experience apnea. Apnea occurs in 50% of infants born between 33 to 35 weeks of gestation and is rare in full-term infants.

Certain risk factors can increase the likelihood that a baby will develop sleep apnea. Importantly, not all babies that have a risk factor or a combination of risk factors will develop sleep apnea.

SOURCE: <https://www.sleepfoundation.org/sleep-apnea/infant-sleep-apnea>



Chapter 16 (cont.)

- **NEW P28.40** Unspecified apnea of newborn
 - Add Apnea of newborn, NOS
 - Add Transient oxygen desaturation spells of newborn
- **New P28.41** Central neonatal apnea of newborn
- **NEW P28.42** Obstructive apnea of newborn
- **NEW P28.43** Mixed neonatal apnea of newborn
- **NEW P28.49** Other apnea of newborn
 - Add Apnea of prematurity

Chapter 21: Factors Influencing Health Status and Contact with Health Services (Z00-Z99)



- Z03.8 Encounter for observation for other suspected diseases and conditions ruled out
- **NEW Z03.83** Encounter for observation for suspected conditions related to home physiologic monitoring device ruled out
 - Add Encounter for observation for apnea alarm without findings
 - Add Encounter for observation for bradycardia alarm without findings
 - Add Encounter for observation for malfunction of home cardiorespiratory monitor
 - Add Encounter for observation for non-specific findings home physiologic monitoring device
 - Add Encounter for observation for pulse oximeter alarm without findings
 - Add Excludes1: apnea NOS (R06.81)
 - Add neonatal bradycardia (P29.12)
 - Add newborn apnea (P28.4-)
 - Add primary sleep apnea of newborn (P28.3-)
 - Add sleep apnea (G47.3-)

Chapter 21 (cont.) SDOH



- Z59.8 Other problems related to housing and economic circumstances
- **NEW Z59.82** Transportation insecurity
 - Add Excessive transportation time
 - Add Inaccessible transportation
 - Add Inadequate transportation
 - Add Lack of transportation
 - Add Unaffordable transportation
 - Add Unreliable transportation
 - Add Unsafe transportation
- **NEW Z59.86** Financial insecurity
 - Add Bankruptcy
 - Add Burdensome debt
 - Add Economic strain
 - Add Financial strain
 - Add Money problems
 - Add Running out of money
 - Add Unable to make ends meet
 - Add Excludes2: extreme poverty (Z59.5)
 - Add low income (Z59.6)
 - Add material hardship, not elsewhere classified (Z59.87)



Chapter 21 (cont.)

- **NEW Z59.87** Material hardship
 - Add Material deprivation
 - Add Unable to obtain adequate childcare
 - Add Unable to obtain adequate clothing
 - Add Unable to obtain adequate utilities
 - Add Unable to obtain basic needs
 - Add Excludes2: extreme poverty (Z59.5)
 - Add financial insecurity, not elsewhere classified (Z59.86)
 - Add low income (Z59.6)



Chapter 21 (cont.)

- Z71.8 Other specified counseling
- **NEW Z71.87** Encounter for pediatric-to-adult transition counseling
 - Add Code also chronic condition, if applicable, such as:
 - Add autism spectrum disorder (F84.0)
 - Add congenital malformations of the circulatory system (Q20-Q28)
 - Add cystic fibrosis (E84-) Add sickle-cell disorder (D57-)
- **NEW Z71.88** Encounter for counseling for socioeconomic factors
- Z72 Problems related to lifestyle
- Z72.8 Other problems related to lifestyle
- Z72.82 Problems related to sleep
- **NEW Z72.823** Risk of suffocation (smothering) under another while sleeping
 - Add Child-caregiver co-sleeping
 - Add Infant bed-sharing

Official Guidelines for Coding & Reporting



These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD-10-CM itself. The instructions and conventions of the classification take precedence over guidelines. These guidelines are based on the coding and sequencing instructions in the Tabular List and Alphabetic Index of ICD-10-CM, but provide additional instruction.

Adherence to these guidelines when assigning ICD-10-CM diagnosis codes is required under the Health Insurance Portability and Accountability Act (HIPAA). The diagnosis codes (Tabular List and Alphabetic Index) have been adopted under HIPAA for all healthcare settings.

ICD-10-CM Official Guidelines for Coding and Reporting FY 2023 (October 1, 2022 - September 30, 2023)

Narrative changes appear in bold text
Items underlined have been moved within the guidelines since the FY 2022 version
Italics are used to indicate revisions to heading changes

The Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS), two departments within the U.S. Federal Government's Department of Health and Human Services (DHHS) provide the following guidelines for coding and reporting using the International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM). These guidelines should be used as a companion document to the official version of the ICD-10-CM as published on the NCHS website. The ICD-10-CM is a morbidity classification published by the United States for classifying diagnoses and reason for visits in all health care settings. The ICD-10-CM is based on the ICD-10, the statistical classification of disease published by the World Health Organization (WHO).

These guidelines have been approved by the four organizations that make up the Cooperating Parties for the ICD-10-CM: the American Hospital Association (AHA), the American Health Information Management Association (AHIMA), CMS, and NCHS.

These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD-10-CM itself. The instructions and conventions of the classification take precedence over guidelines. These guidelines are based on the coding and sequencing instructions in the Tabular List and Alphabetic Index of ICD-10-CM, but provide additional instruction. Adherence to these guidelines when assigning ICD-10-CM diagnosis codes is required under the Health Insurance Portability and Accountability Act (HIPAA). The diagnosis codes (Tabular List and Alphabetic Index) have been adopted under HIPAA for all healthcare settings. A joint effort between the healthcare provider and the coder is essential to achieve complete and accurate documentation, code assignment, and reporting of diagnoses and procedures. These guidelines have been developed to assist both the healthcare provider and the coder in identifying those diagnoses that are to be reported. The importance of consistent, complete documentation in the medical record cannot be overemphasized. Without such documentation accurate coding cannot be achieved. The entire record should be reviewed to determine the specific reason for the encounter and the conditions treated.

The term encounter is used for all settings, including hospital admissions. In the context of these guidelines, the term provider is used throughout the guidelines to mean physician or any qualified health care practitioner who is legally accountable for establishing the patient's diagnosis. Only this set of guidelines, approved by the Cooperating Parties, is official.

The guidelines are organized into sections. Section I includes the structure and conventions of the classification and general guidelines that apply to the entire classification, and chapter-specific guidelines that correspond to the chapters as they are arranged in the classification. Section II includes guidelines for selection of principal diagnosis for non-outpatient settings. Section III includes guidelines for reporting additional diagnoses in non-outpatient settings. Section IV is for outpatient coding and reporting. It is necessary to review all sections of the guidelines to fully understand all of the rules and instructions needed to code properly.

See the end of the presentation for slides regarding guideline changes.



Key Next Steps

- Review all new code inclusion terms and instructions notes.
- Make a list of those codes with specificity in the description and classification.
- Develop or revise query forms.
- Coding and CDI education to providers.
- Review the guidelines for changes
- Audit within 45-60 dates after 10/1/2022.

Summary



- ICD-10-CM Conventions, and Instructional notes
- Alphabetic Index
- Tabular List
- Inclusion terms
- Chapter by Chapter:
 - Vascular Dementia
 - Sleep apnea of newborn
 - SDOH
- Documentation specificity



Questions?

If you have any questions, please contact MRA at:

connect@mrahis.com



Thank you!

Thank you for attending today's
educational webinar.



References/Resources

- [Comprehensive Listing ICD-10-CM Files](#)
- [\(cdc.gov\)Comprehensive Listing ICD-10-CM Files \(cdc.gov\)](#)