

Insights to Coding and Data Quality

AHA Coding Clinic guidance: Code number in lieu of a diagnosis

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There has been much discussion within the HIM/coding industry for the past year regarding advice published in the American Hospital Association (AHA) *Coding Clinic* surrounding the use of a code number in lieu of a handwritten diagnosis. The advice comes from the first quarter 2012 publication and reads as follows:

Question

Since our facility has converted to an electronic health record, providers have the capability to list the ICD-9-CM diagnosis code instead of a descriptive diagnostic statement. Is there an official policy or guideline requiring providers to record a written diagnosis in lieu of an ICD-9-CM code number?

Answer

Yes, there are regulatory and accreditation directives that require providers to supply documentation in order to support code assignment. Providers need to have the ability to specifically document the patient’s diagnosis, condition and/or problem. Therefore, it is not appropriate for providers to list the code number or select a code number from a list of codes in place of a written diagnostic statement. ICD-9-CM is a statistical classification, per se, it is not a diagnosis. Some ICD-9-CM codes include multiple different clinical diagnoses and it can be of clinical importance to convey these diagnoses specifically in the record. Also some diagnoses require more than one ICD-9-CM code to fully convey. It is the provider’s responsibility to provide clear and legible documentation of a diagnosis, which is then translated to a code for external reporting purposes.

The debate among HIM/coding professionals is whether or not the above advice applies to the inpatient versus outpatient setting or both. The quandary lies with the fact that many facilities receive physician orders or requisitions from physician offices for outpatient ancillary tests with only ICD-9-CM diagnosis codes provided; which are then used for code assignment. This has been considered standard practice throughout the industry since the Center for Medicare and Medicaid Services (CMS) and the Office of Inspector General (OIG) have been silent with respect to whether or not signs or symptoms must be documented on the order or requisition.

Our organization decided to seek clarification from the AHA and decided to write to Central Office in order to determine whether or not their original guidance was geared toward inpatient electronic health record (EHR) documentation and computerized physician order entry for inpatient services versus physician orders and requisitions for ancillary services in the outpatient setting.

In a letter response back to our organization, they clarified that the advice published regarding the use of ICD-9-CM diagnosis codes instead of a descriptive diagnostic statement was referring specifically to “*appropriate health record documentation.*” They went on to state “*Whether diagnosis codes are acceptable in lieu of a narrative diagnosis on provider orders for outpatient diagnostic services such as laboratory or radiology examinations is outside the purview of Coding Clinic.*” This type of clarification led us to the conclusion that the advice was primarily

geared toward inpatient EHR documentation and not necessarily outpatient ancillary services as we previously suspected.

Now it is widely understood that when writing to the AHA Central Office for clarification, the response or advice provided in the letter can be applied only to the organization that sought clarification and that the rest of the nation is not necessarily held to the advice given in the individual letter. However it is my hope that the information in this newsletter article will be beneficial to other facilities and organizations, and I would encourage others to seek clarification from the AHA so that you too will have official guidance from the *Coding Clinic* in the form of a letter on this particular matter.

References

AHA *Coding Clinic for ICD-9-CM*, First Quarter 2012, Page 6, American Hospital Association Central Office

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