



CODING



Keeping Current with Coding Changes

by Deanna Klure, RHIA, CDIP, CCS

By now we all realize that keeping current with changes from ICD-9 to ICD-10 has been a challenge. Coding Clinic advice that applied in ICD-9 no longer applies to ICD-10. Guidance has changed significantly which changes how we assign codes that have a causal relationship. New Coding Guidelines have been created as we experience “pandemic coding”. This article will focus on a few of these changes and how they are applied to coding today.

Coding Guideline I.A.15 “with” Rule

This rule is applied when a condition is listed under the term “with” following a main term or sub-term and indicates the two conditions should be assumed as related. The focus of “with” conditions significantly changed from ICD-9 to

ICD-10. Coding professional must be cautious and not let an encoder do the work. Coding professionals must stay abreast of the changes to the guidance to understand the linkage. The guideline further states, “unless the documentation clearly states the conditions are unrelated or when another guideline exists that specifically requires a documented linkage between two conditions”.

The guideline continues to state that if the condition is documented as “due to” another condition (not the condition listed under the term “with”) then do not link these two conditions. For example: Patient has congestive heart failure due to amphetamine abuse, and the patient also has hypertension. This should be coded I50.- for the CHF,

then code the amphetamine abuse, followed by I10 for hypertension. In this example, the CHF is linked to another condition so the “with” rule would not apply. ICD-10-CM Official Guideline I.C.9.a.1 states, “...the same heart conditions (I50.-, I51.4-I51.7, I51.89, I51.9) with hypertension are coded separately if the provider has documented they are unrelated to hypertension”.

Post-Procedure Pneumothorax

In ICD-10-CM, the classification now specifically makes a linkage between pneumothorax and postprocedural at the following index entry:

- Main term: pneumothorax
 - o Sub-term: postprocedural J95.811

This means that it is appropriate to assign code J95.811 whenever provider documentation indicates postprocedural or postoperative pneumothorax. Previously, Coding Clinic had stated *to not assume* pneumothorax was a complication from a procedure unless specifically documented as a complication. ICD-10 alphabetical index now links postprocedural pneumothorax code to J95.811 and it should be coded if documented as a post procedure pneumothorax. Patient Safety Indicators (PSI #6) exclude thorax procedures and chest trauma injuries from being reported as a PSI so we don't need to worry about these harming our quality scores/reporting.

Displaced Device by Patient

Coding Clinic 2020 Q2, Page 21-22 advised us although the patient displaced her own catheter, it is not positioned in the correct location and should be coded as a complication. In additional Coding Clinic advice this logic does not only apply to

peripherally inserted central catheter lines, but the advice applies to all devices. So, in ICD-10, if a patient pulls out their Gastrostomy tube you would code this to K94.23 Gastrostomy malfunction. Furthermore, ICD-9-CM is obsolete and previously published Coding Clinic advice would not apply to ICD-10-CM unless the advice has been republished in the Coding Clinic for ICD-10-CM/PCS.

Mental Health Disorders in Outpatient Visits

Mental disorders not treated or evaluated during the current encounter, should not be coded even if documented in the encounter. Simply listing the patient has a mental disorder and current medication is not enough to code the mental health condition.

Secondary Thrombocytosis

Use caution here, secondary thrombocytosis is not the same as secondary thrombocytopenia. Thrombocytosis is an excessive number of platelets in the blood.

Thrombocytopenia is low levels of platelets in the blood. Secondary thrombocytosis is an abnormal lab finding and should not be coded unless the provider indicates its clinical significance.

Keeping current with coding changes is difficult. As a community, let's continue to share our lessons learned, coding knowledge and health information expertise. Together, we are great!

Resources

Coding Clinic Ref: #50038421

Coding Clinic Ref: #50037695.620

Coding Clinic 2020 Q2, Page 21-22

ICD-10-CM Official Guidelines for Coding and Reporting FY 2021

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