ICD 10: Final Steps for Successful Implementation

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Presenters
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Learning Objectives
• Identify timeframe for ICD-10 adoption
• Identify the similarities and differences between ICD-9 and ICD-10
• Apply ICD-10 Coding structure
• Understand process for selection of ICD-10 codes
• Recognize strategies and resources and adapt his/her practice for transition to ICD-10
• Properly document to support the ICD-10 code selected
Poll Question #1
How familiar are you with ICD-10CM?
• Not at all familiar
• Somewhat familiar
• Extremely familiar

ICD-10
• Transition from ICD-9 to ICD-10 diagnosis coding on October 1, 2015
• Will be used in all settings
• Two different code sets
  – ICD-10-CM: International Classification of Diseases, 10th Revision, Clinical Modification
  – ICD-10-PCS: International Classification of Diseases, 10th Revision: Procedure Coding System
• Continue to use CPT/HCPCS codes as you currently do

ICD10 Implementation: Billing
• Effective October 1, 2015
  – All claims must use ICD-10 CM Diagnosis codes
  – Claims containing ICD-9 codes will not be accepted for services provided (Dates of services) after October 1, 2015
  – Institutional providers Part A services (based on discharge date or through date)
  – Outpatient services (based on date of service)
Tips about the date

• Do not bill ICD-9 and ICD-10 codes on the same claim form
• Claims for services provided prior to October 1, 2015, must be billed separately

Outpatient Claim Submission

• Example 1
  • Start episode of care on September 4, 2015
  • Discharge on September 30th, 2015
  • Submit claim October 15th, 2015
  • Use ICD-9

• Example 2
  • Start episode of care on September 25, 2015
  • Discharge on October 30th, 2015
  • Submit claim November 15th, 2015
  • Use ICD-9 for dates of service through September 30th
  • Use ICD-10 for dates of service on or after October, 1st, 2015
  • May need to split claim
Why the Transition?

• ICD-9 Barriers:
  – Outdated: developed in the 1970s based on medicine and technology that is no longer in use
  – Lack of detail for payment for today's treatments
  – No space for new codes

• ICD-10 Benefits
  – Allows for greater detail for laterality, primary encounters, external causes of injury, preventative health, as well as socioeconomic, family relationships, lifestyle related problems
  – More space to accommodate evolving technology
  – Supports exchange of health data with other countries (all other G-7 nations have transitioned to ICD-10 already)

ICD-10-CM “Official Guidelines”

• ICD-10-CM developed and maintained by the World Health Organization (WHO) and the National Center for Health Statistics within the Centers for Disease Control
• As with ICD-9-CM, ICD-10-CM is supplemented by a set of “Official Guidelines” that are designated as part of the ICD-10-CM code set by the HIPAA “medical data code set” regulations (45 CFR § 162.1002(C)(2))
• The Official Guidelines provide detailed guidance on the use of the ICD-10-CM code set

ICD-10 CM External Causes (Chapter 20)

• No national requirement for mandatory ICD-10-CM external cause code reporting
• External Causes is only required for providers subject to state-based external cause code reporting or payer requirement
• (e.g. Fall from stairs and steps due to ice and snow – W00.1)
Poll Question # 2
Changing from ICD-9 to ICD-10 CM codes will allow the following:
• Reporting laterality
• Increased descriptions/detail of the patient conditions
• Information on whether the visit is a primary or subsequent patient encounter
• All of the above

Comparison ICD-9 and ICD-10

ICD-9
• 3-5 Characters
• Diagnoses: 14,025
• Procedures: 3,824
• No laterality
• No combination codes

ICD-10
• 3-7 Characters
• Diagnoses: 69,099
• Procedures: 71,957
• Laterality (Left, right, bilateral)
• Combination codes
• Application of 7th Characters

How Different Is It?
Example of ICD-9 to ICD-10

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM/PCS</th>
</tr>
</thead>
<tbody>
<tr>
<td>820.02: Fracture of midcervical section of femur, closed</td>
<td>S72031A, Displaced midcervical fracture of right femur; initial encounter for closed fracture</td>
</tr>
<tr>
<td>820.02: Fracture of midcervical section of femur, closed</td>
<td>S72031G, Displaced midcervical fracture of right femur, subsequent encounter for closed fracture with delayed healing</td>
</tr>
<tr>
<td>820.02: Fracture of midcervical section of femur, closed</td>
<td>S72032A: Displaced midcervical fracture of left femur, initial encounter for closed fracture</td>
</tr>
<tr>
<td>820.02: Fracture of midcervical section of femur, closed</td>
<td>S72032G: Displaced midcervical fracture of left femur; subsequent encounter for closed fracture with delayed healing</td>
</tr>
</tbody>
</table>
ICD-10 Code Breakdown

- Up to 7 characters

- Tabular list: chronological list of codes divided into chapters based on body system or condition
  - Chapter 19 (injury) and Chapter 13 (musculoskeletal)
- Index alphabetical list of terms and their corresponding codes
- Step 1: Look up term in alphabetic index;
- Step 2: verify code in tabular list

Use of the 7th character

- Certain chapters use a 7th character (e.g. musculoskeletal, obstetrics, injuries, external causes)
- Different meaning depending on the section where it is used
- When 7th character applies, codes missing 7th character are invalid.

Use of the 7th character

- **Initial encounter:** As long as patient is receiving active treatment for condition.
  - (e.g. surgical treatment, emergency department care)
Use of the 7th character

- **Subsequent encounter**: After patient has received active treatment of the condition and is receiving routine care for the condition during the healing or recovery phase.
  - Most physical therapy visits are subsequent encounters
    - (e.g. cast change or removal of external or internal fixation device, medication adjustment, other aftercare and follow-up visits following treatment of the injury or illness)

Use of the 7th Character

- **Sequela**: Complications or conditions that arise as a direct result of a condition (e.g. scar formation after a burn)

Example of 7th character

S.43 (Dislocation and sprain of joints and ligaments of shoulder girdle)
- A Initial encounter
- D Subsequent encounter
- S Sequela
Posterior dislocation of left acromioclavicular joint

- S43.152A (active treatment) • Patient is seen in emergency department
- S43.152 A (active treatment) • Same patient is taken to surgery for treatment
- S43.152D (subsequent treatment) • Same patient is seen in follow-up physician visit to check healing
- S43.152D (subsequent treatment) • Same patient is seen by physical therapist

Placeholder “X”

- X is used to fill in empty characters when a code contains fewer than 6 characters and a 7th character applies.
- X is not case sensitive
- When it applies, it must be used for code to be valid
- Example: S43.1XXD (Subluxation and dislocation of acromioclavicular joint) subsequent encounter

ICD-10: Key Practice Impacts

- **Documentation**: The ICD-10 code set provides greater specificity for patient diagnosis, so it will be critical to assess current documentation and how it will support coding for ICD-10.
  - More specificity may be needed to show medical necessity
    - Updated payer coverage policies
  - Documentation auditing is recommended
Demonstrating Medical Necessity

- ICD 10 supports
  - Need for PT Services
  - Patient Complexity
  - Duration of care
  - Frequency of care
  - Interventions selected

Poll Question # 3

When reporting the ICD-10 CM code you should only report the most relevant code that reflects the reason for the patient’s visit?

- True
- False

ICD-10 Format and Structure
ICD-10 a Look Inside

Step 1: Look up term in alphabetic index (Book)

Step 2: Verify code in tabular list (Book)
Step 2: Verify code in tabular list (Book)

The appropriate NCI여기요 and code to be added to each code form (category 545).

Initial encounter subsequent encounter request

APTA Web Site

APTA link to ICD-10 Official Guidelines

ICD-10 Official Guidelines

As with ICD-9-CM, ICD-10-CM is supplemented by a set of “Official Guidelines” that are designated as part of the ICD-10-CM code set by the HIPAA “medical data code set” regulations (45 CFR § 162.1003). The Official Guidelines provide detailed guidance on the use of the ICD-10-CM code set.

APTA link to Index and Tabs

ICD-10-CM and GEMS

CMS: 2015 ICD-10-CM and GEMS

The Centers for Medicare and Medicaid Services (CMS) has developed a bidirectional crosswalk, referred to as the General Equivalence Mappings (GEMs), between ICD-9-CM and ICD-10-CM/PCS. There are GEMs for over 99 percent of all ICD-10-CM codes and for 100 percent of the ICD-10-PCS codes.

Clinical Examples

- Referral from physician with ACL Sprain

**Step 1: Look up term in alphabetic index**

```
- knee S83.9-
  - collateral ligament S83.40-
  - lateral (fibular) S83.42-
  - medial (tibial) S83.41-
    - cruciate ligament S83.50-
    - anterior S83.51-
    - posterior S83.52-
  - lateral (fibular)/collateral ligament S83.42-
  - medial (tibial)/collateral ligament S83.41-
  - patellar ligament S78.11-
  - specified site NEC S83.8X-
  - superior tibiofibular joint (ligament) S83.8-
  - lateral collateral, knee — see Sprain, knee, collateral
```

**Step 2: Verify code in tabular list**

```
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>S83.9</td>
<td>Knee Sprain</td>
</tr>
<tr>
<td>S83.40</td>
<td>Collateral ligament</td>
</tr>
<tr>
<td>S83.42</td>
<td>Lateral (fibular)</td>
</tr>
<tr>
<td>S83.41</td>
<td>Medial (tibial)</td>
</tr>
<tr>
<td>S83.50</td>
<td>Cruciate ligament</td>
</tr>
<tr>
<td>S83.51</td>
<td>Anterior</td>
</tr>
<tr>
<td>S83.52</td>
<td>Posterior</td>
</tr>
<tr>
<td>S83.42</td>
<td>Lateral (fibular)/collateral ligament</td>
</tr>
<tr>
<td>S83.41</td>
<td>Medial (tibial)/collateral ligament</td>
</tr>
<tr>
<td>S78.11</td>
<td>Patellar ligament</td>
</tr>
<tr>
<td>S83.8X</td>
<td>Specified site NEC</td>
</tr>
<tr>
<td>S83.8</td>
<td>Superior tibiofibular joint (ligament)</td>
</tr>
<tr>
<td>-</td>
<td>Lateral collateral, knee — see Sprain, knee, collateral</td>
</tr>
</tbody>
</table>
```
Step 2: Verify code in tabular list

**Step 2: Verify code in tabular list**

**S83 Dislocation and sprain of joints and ligaments of knee**
- **Includes:** avulsion of joint or ligament of knee
  - laceration of cartilage, joint or ligament of knee
  - sprain of cartilage, joint or ligament of knee
  - traumatic hemarthrosis of joint or ligament of knee
  - traumatic rupture of joint or ligament of knee
  - traumatic subluxation of joint or ligament of knee
  - traumatic tear of joint or ligament of knee

- **Code also:** any associated open wound

- **Excludes1:**
  - dislocation of patella (M22.0 M22.3)
  - injury of patellar ligament (tendon) (S76.1-)
  - internal derangement of knee (M23-)
  - old dislocation of knee (M24.30)
  - pathological dislocation of knee (M24.30)
  - recurrent dislocation of knee (M22.6)

- **Excludes2:**
  - strain of muscle, fascia and tendons of lower leg (S86-)

The appropriate 7th character is to be added to each code from category S83

- **A:** initial encounter
- **D:** subsequent encounter
- **S:** sequelae

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**Step 2: Verify code in tabular list**

**S83.5 Sprain of cruciate ligament of knee**
- **S83.50** Sprain of unspecified cruciate ligament of knee
- **S83.501** Sprain of unspecified cruciate ligament of right knee
- **S83.502** Sprain of unspecified cruciate ligament of left knee
- **S83.509** Sprain of unspecified cruciate ligament of unspecified knee

- **S83.51** Sprain of anterior cruciate ligament of right knee
- **S83.511** Sprain of anterior cruciate ligament of right knee
- **S83.512** Sprain of anterior cruciate ligament of left knee
7th Characters

Excludes: strain of muscle, fascia and tendon of lower leg (S85.x)

The appropriate 7th character is to be added to each code from category S83.

- A - initial encounter
- D - subsequent encounter
- S - sequela

Code for “Sprain of anterior cruciate ligament of right knee, initial encounter”

\[
\begin{array}{c}
S \quad 8 \quad 3 \quad 5 \quad 1 \quad 1 \quad D \\
\text{Category (first character always alpha, second character numeric)} & \text{Category, anatomic site, severity} & \text{Extension (initial encounter, subsequent encounter, sequela)}
\end{array}
\]

ICD-10 in PT practice

ICD 10

- M25.561 Pain in right knee
- R26.2 Difficulty in walking, not elsewhere classified
- S83.511D Sprain of anterior cruciate ligament of right knee, subsequent encounter
Scenario for Patient s/p CVA

- 83 y/o female four week s/p ischemic event of the left middle cerebral artery resulting in right hemiplegic and mild aphasia
- Previous therapy includes inpatient rehabilitation
- Co-morbidity of severe osteoporosis with wrist, hip, and spinal compression fractures within past year
- Chief complaints include assistance needed to walk short distance and weakness or right arm
- Reports fatigue with minimal exertion

Chief Complaint: Difficulty Walking

- Gait abnormality R26.9
  - ataxic R26.0
  - falling R29.8
  - hysterical (ataxic) (staggers) F44.4
  - paralytic R26.1
  - spastic R28.6
  - specified type NEC R28.89
  - staggering R20.0
  - walking difficulty NEC R20.2

Chief Complaint: Difficulty Walking

- Walking list, person on Z75.1
  - for organ transplant Z78.82
  - underlying social agency investigation Z75.2
  - Waldenstrom-Kjellberg syndrome D50.1
  - Waldenstrom
  - hypogammaglobulinemia D89.0

  Walking difficulty R26.2
  - hyperreflexia F44.4
  - sleep F51.3
  -- hysterical F44.4
  Wall: abdominal —— see condition
  Wallenberg's disease or syndrome G44.3
  Walgren's disease I07.9
  Wernicke
ischemic event of the left middle cerebral artery resulting in right hemiplegic

Hemiplegia G81.9-
- alternate facial G83.89
- ascending NEC G81.90
- spinal G85.89
- congenital (cerebral) G80.8
- - spastic G80.2
- embolic (current episode) I65.4-
- flaccid G81.0-
- following
- cerebrovascular disease I69.959
  - - cerebral infarction I69.35-
  - - nontraumatic intracranial hemorrhage NEC I69.25-
  - - specified disease NEC I69.85-
  - - stroke NOS I69.35-
  - - subarachnoid hemorrhage I69.05-

I69.353 Hemiplegia and hemiparesis following cerebral infarction affecting right non-dominant side
Additional Codes

• R53.83 Other Fatigue
• I69.320 Aphasia following cerebral infarction
• Z87.310 Personal history of (healed) osteoporosis fracture

ICD-10 code

• R26.1 Paralytic gait
• I69.353 Hemiplegia and hemiparesis following cerebral infarction affecting right non-dominant side
• I69.320 Aphasia following cerebral infarction
• Z87.310 Personal history of (healed) osteoporosis fracture

Poll Question # 4

Has your organization started to prepare for implementation of ICD-10CM?

• Yes
• No
ICD-10: Practice Impacts

- **Staff Training**: All staff that work with the current ICD-9 system must be trained on the ICD-10
  - Clinicians
  - Front desk staff
  - Coding/billing staff

ICD-10: Key Practice Impacts

- **Vendor Updates**
  - Vendor Readiness
  - Billing systems
  - Claims software
- If practices are using electronic systems for billing, they will need to have their systems updated by vendors.
  - Testing with payers
ICD-10: Key Practice Impacts

- Identification of where diagnosis codes are used today:
  - Paperwork
  - Electronic systems
  - Submitting reimbursement claims
  - Identifying patient eligibility
  - Getting prior authorization from a payer/ABNs
  - Reporting quality data
  - Medical necessity in payer coverage policies

CMS Efforts to Help Providers

- CMS will set up a communication and collaboration center to resolve issues.
- ICD-10 Ombudsman will help receive and triage provider issues.
- If Part B Medicare contractors are unable to process claims, an advance payment may be available.
- More details to come.

CMS ICD-10 Resources

- CMS Website on ICD-10
  [https://www.cms.gov/ICD10/](https://www.cms.gov/ICD10/)
  - CMS and AMA Announce Efforts to Help Providers Get Ready For ICD-10.
- CMS ICD-10-CM Quick Reference Guide
APTA ICD-10 Resources

- http://www.apta.org/ICD10/
  - Key Practice Impacts
  - General information
  - ICD-10 Official Guidelines
  - More to Come

Other ICD-10 Resources

- AHIMA http://www.ahima.org/icd10
- ICD-10 Proposed and Final Rules
- CDC Website on Classification of Diseases
  - http://www.cdc.gov/nchs/icd.htm
- ICD-10-CM Official Guidelines for Coding and Reporting

It’s QUESTION TIME!!