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Certified Registered Nurse Anesthetist ICD-10-CM Coding Tip Sheet

Overview of Key Chapter Updates for CRNA's and Top 25 Codes

Chapter 2 Neoplasms (C00-D49)

- Classification improvements
- Code expansions
- Significant expansions or revisions related to:
 - Identifying laterality for some of the neoplasm sites
 - Malignant neoplasm of male breast codes

Chapter 6 Diseases of the Nervous System (G00-G99)

- ICD-10-Cm devotes Chapter 6 to diseased of the nervous system. The sense organs (eye/adnexa and ear/mastoid processes) have their own chapters in ICD-10-CM.
- Classification improvements (significant changes to sleep disorders).
- Code expansions (for example, Alzheimer's and headaches).
- Updates to medical terminology (epilepsy, seizures).
- Codes for transient ischemic attack are now included in the nervous system chapter.
- Codes for migraine have been expanded to fifth and sixth characters to indicate if the migraine is intractable and to provide additional specificity within the code description.

Chapter 7 Diseases of the Eye and Adnexa (H00-H59)

- Diseases of the eye and adnexa are a new chapter in ICD-10-CM
- Terminology improvements (bringing terms up to date)
- · Revisions to identify laterality:
 - Many of the codes have laterality designation and, in some instances, bilateral designation for diseases of the eye
 - A code for unspecified site is also provided

<u>Chapter 9 Diseases of the Circulatory System (100-199)</u>

- A new category has been added for coding a subsequent acute myocardial infarction, which is an MI that occurs within 28 days of a previous acute MI
- The time frame for assigning the acute MI code is 28 days in ICD-10-CM
- Terminology used to describe several cardiovascular conditions has been revised to reflect more current medical practice
- A major change is the classification of hypertension, which in ICD-9-CM was classified by type:
 - Benign, malignant or unspecified
 - That classification is not required in ICD-10-CM because there is only one code for hypertension in ICD-10; the code is I10- essential (primary) hypertension

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

- A number of new subcategories have been added to this chapter.
- Codes for Crohn's disease have been expanded to specify site, if a complication is present, and what that complication is.

- Some terminology changes and revisions to the classification of specific digestive conditions have occurred in ICD-10-CM as well:
 - The term "hemorrhage" is used when referring to ulcers.
 - The term "bleeding" is used when classifying gastritis, duodenitis, diverticulosis and diverticulitis.

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

- Most of the codes within this chapter have site and laterality designations.
- ICD-10-CM identifies three different causes for pathological fractures: "neoplastic disease," "osteoporosis" and other specified disease.
- ICD-10-CM introduces the seventh character that describes type of encounter, or the state
 of a fracture's healing and any sequela. Some codes in this chapter will have the seventh
 character applied.

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

- Procedural complications affecting the genitourinary system are included in Chapter 14.
- In some of the categories, specificity is based on the gender of the patient.
- Laterality is used to identify conditions under N60 category, "benign mammary dysplasia."

Chapter 15 Pregnancy, Childbirth and the Puerperium (O00-O9A)

- The final character in most codes in this chapter indicates trimester of pregnancy rather than the current episode of care as with ICD-9-CM. Trimesters are defined as:
 - First trimester less than 14 weeks 0 days
 - Second trimester 14 weeks 0 days to less than 28 weeks 0 days
 - Third trimester 28 weeks 0 days until delivery
- Supervision of care for high-risk pregnancy is now classified to this chapter.

<u>Chapter 18 Symptoms, Signs and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified (R00-R99)</u>

- Many categories in this chapter could be designated as:
 - "Not otherwise specified"
 - "Unknown etiology"
 - "Transient"
- There are codes to identify a patient's coma scale (used in emergency settings)
- There are a number of combination codes that identify both the definitive diagnosis and common symptoms of that diagnosis

<u>Chapter 19 Injury, Poisoning and Certain Other Consequences of External Causes (S00-T88)</u>

- Injuries are grouped by body part rather than category of injury as they were in ICD-9-CM.
- Site and laterality is specified in this chapter.
- ICD-10-CM introduces a seventh character requirement for some codes that describes type
 of encounter. Most categories in this chapter use the seventh character requirement. Most
 categories in this chapter have three seventh character values of:
 - A Initial encounter
 - D Subsequent encounter
 - S- Seguela
 - For traumatic fractures, there are additional seventh character requirements depending upon the type of fracture and complication. Some of these character descriptions are based on the Gustilo open-fracture classification.
- Codes for underdosing are new in ICD-10-CM. Underdosing refers to taking less of a
 medication than is prescribed by a provider or less than the manufacturer's instructions.
 Codes for underdosing should not be assigned as principal or first-listed codes.

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

- These codes are used in any healthcare setting. Z codes may be used as either first listed (principal diagnosis code in the inpatient setting), or secondary code, depending on the circumstances of the encounter. Certain Z codes may only be used as first-listed or principal diagnosis in certain conditions-refer to Official Coding Guidelines for details.
- Aftercare code note:
 - In ICD-10-CM Aftercare Z codes are not used for aftercare of fractures.
 - For aftercare of a fracture, assign the acute fracture code with the 7th character extension of D for subsequent encounter.

(Source: 2014 Draft ICD-10-CM Official Guidelines for Coding and Reporting)

Examples of Coding Laterality

- C50.111 Malignant neoplasm of central portion of right female breast
- C50.112 Malignant neoplasm of central portion of left female breast
- C50.119 Malignant neoplasm of central portion of unspecified female breast
- C50.121 Malignant neoplasm of central portion of right male breast
- C50.122 Malignant neoplasm of central portion of left male breast
- C50.129 Malignant neoplasm of central portion of unspecified male breast

The top 25 CRNA ICD-9 to ICD-10 code mappings are found in the chart below.

Top 1-25	ICD-9	Description ICD-9	ICD-10	Description ICD-10
1 20	100 3	Special screening for malignant	100 10	Encounter for screening for malignant
1	V76.51	neoplasms of colon	Z12.11	neoplasm of colon
		•		·
2	366.9	Unspecified cataract	H26.9	Unspecified cataract
3	211.3	Benign neoplasm of colon	D12.0	Benign neoplasm of cecum
			D12.1	Benign neoplasm of appendix
			D12.2	Benign neoplasm of ascending colon
			D12.3	Benign neoplasm of transverse colon
			D12.4	Benign neoplasm of descending colon
			D12.4	Colon
			D12.5	Benign neoplasm of sigmoid colon
			D12.6	Benign neoplasm of colon, unspecified
			K63.5	Polyp of colon
4	366.16	Senile nuclear sclerosis	H25.10	Age-related nuclear cataract, unspecified eye
			H25.11	Age-related nuclear cataract, right eye
			H25.12	Age-related nuclear cataract, left eye
			H25.13	Age-related nuclear cataract, bilateral
5	V12.72	Personal history of colonic polyps	Z86.010	Personal history of colonic polyps
				Diverticulosis of large intestine
		Diverticulosis of colon (without		without perforation or abscess
6	562.10	mention of hemorrhage)	K57.30	without bleeding

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1-25	ICD-9	Description ICD-9	ICD-10	Description ICD-10
				Diverticulosis of both small and large
			VE7 50	intestine without perforation or
			K57.50	abscess without bleeding
				Diverticulosis of intestine, part
			V57.00	unspecified, without perforation or
-		Ostoporthropia unanopified whether	K57.90	abscess without bleeding
7	715.96	Osteoarthrosis, unspecified whether generalized or localized, lower leg	M17.9	Ostoparthritis of know unspecified
	7 15.90		10117.9	Osteoarthritis of knee, unspecified
		Unspecified gastritis and gastroduodenitis, without mention of		Gastritis, unspecified, without
8	535.50	hemorrhage	K29.70	bleeding
	333.30	nemornage	1129.70	Gastroduodenitis, unspecified,
			K29.90	without bleeding
			1125.50	Carpal tunnel syndrome, unspecified
9		Carpal tunnel syndrome	G56.00	upper limb
		Salpar tariffor dyfidroffio	300.00	Carpal tunnel syndrome, right upper
			G56.01	limb
			200.01	Carpal tunnel syndrome, left upper
			G56.02	limb
			330.02	Bucket-handle tear of medial
		Tear of medial cartilage or meniscus		meniscus, current injury, right knee,
10	836.0	of knee, current	S83.211A	initial encounter
				Bucket-handle tear of medial
				meniscus, current injury, left knee,
			S83.212A	initial encounter
				Bucket-handle tear of medial
				meniscus, current injury, unspecified
			S83.219A	knee, initial encounter
				Peripheral tear of medial meniscus,
				current injury, right knee, initial
			S83.221A	encounter
				Peripheral tear of medial meniscus,
				current injury, left knee, initial
			S83.222A	encounter
				Peripheral tear of medial meniscus,
			000 000	current injury, unspecified knee, initial
			S83.229A	encounter
				Complex tear of medial meniscus,
			000 004 4	current injury, right knee, initial
			S83.231A	encounter
				Complex tear of medial meniscus,
			C02 2224	current injury, left knee, initial
			S83.232A	encounter Compley toor of modial maniague
				Complex tear of medial meniscus,
			S83.239A	current injury, unspecified knee, initial encounter
			303.238A	Other tear of medial meniscus,
				current injury, right knee, initial
			S83.241A	encounter
			300.Z+1A	Other tear of medial meniscus, current
			S83.242A	injury, left knee, initial encounter
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Top 1-25	ICD-9	Description ICD-9	ICD-10	Description ICD-10
			S83.249A	Other tear of medial meniscus, current injury, unspecified knee, initial encounter
11	592.0	Calculus of kidney	N20.0	Calculus of kidney
			N20.2	Calculus of kidney with calculus of ureter
12	530.81	Esophageal reflux	K21.9	Calculus of lower urinary tract unspecified
13	427.31	Atrial fibrillation	148.0	Paroxysmal atrial fibrillation
			148.2	Chronic atrial fibrillation
			I48.91	Unspecified atrial fibrillation
14	592.1	Calculus of ureter	N20.1	Calculus of ureter
			N20.2	Calculus of kidney with calculus of ureter
15	550.90	Inguinal hernia without mention of obstruction or gangrene, unilateral or unspecified (not specified as recurrent)	K40.90	Unilateral inguinal hernia, without obstruction or gangrene, not specified as recurrent
16	553.3	Diaphragmatic hernia without mention of obstruction or gangrene	K44.9	Diaphragmatic hernia without obstruction or gangrene
17	787.20	Dysphagia, unspecified	R13.0	Aphagia
			R13.10	Dysphagia, unspecified
18	724.02	Spinal stenosis, lumbar region, without neurogenic claudication	M48.06	Spinal stenosis, lumbar region
			M48.07	Spinal stenosis, lumbosacral region
			M99.23	Subluxation stenosis of neural canal of lumbar region
			M99.33	Osseous stenosis of neural canal of lumbar region
			M99.43	Connective tissue stenosis of neural canal of lumbar region
			M99.53	Intervertebral disc stenosis of neural canal of lumbar region
			M99.63	Osseous & subluxation stenosis of intervertebral foramina of lumbar region
			M99.73	Connective tissue and disc stenosis of intervertebral foramina of lumbar region
19	840.4	Rotator cuff(capsule)sprain	S43.421A	Sprain of right rotator cuff capsule, initial encounter
			S43.422A	Sprain of left rotator cuff capsule, initial encounter

Top 1-25	ICD-9	Description ICD-9	ICD-10	Description ICD-10
			S43.429A	Sprain of unspecified rotator cuff capsule, initial encounter
20	174.9	Malignant neoplasm of breast(female), unspecified	C50.911	Malignant neoplasm of unspecified site of right female breast
			C50.912	Malignant neoplasm of unspecified site of left female breast
			C50.919	Malignant neoplasm of unspecified site of unspecified female breast
21	650	Normal delivery	O80	Encounter for full-term uncomplicated delivery
22	715.95	Osteoarthrosis unspecified, whether generalized or localized, pelvic region and thigh	M16.9	Osteoarthritis of hip, unspecified
23	574.20	Calculus of gallbladder without mention of cholecystitis, without mention of obstruction	K80.20	Calculus of gallbladder without cholecystitis without obstruction
			K80.80	Other cholelithiasis without obstruction
24	626.2	Excessive or frequent menstruation	N92.0	Excessive and frequent menstruation with regular cycle
25	724.4	Thoracic or lumbosacral neuritis or radiculitis, unspecified	M51.14	Intervertebral disc disorders with radiculopathy, thoracic region
			M51.15	Intervertebral disc disorders with radiculopathy, thoracolumbar region
			M51.16	Intervertebral disc disorders with radiculopathy, lumbar region
			M51.17	Intervertebral disc disorders with radiculopathy, lumbosacral region
			M54.14	Radiculopathy, thoracic region
			M54.15	Radiculopathy, thoracolumbar region
			M54.16	Radiculopathy, lumbar region
		blighted in average indicate the individual ICD 0 and at	M54.17	Radiculopathy, lumbosacral region

The codes highlighted in orange indicate the individual ICD-9 code that is being mapped to one or many ICD-10 codes

(Source of ICD-9-CM to ICD-10-CM mappings: CMS.org General Equivalence Mappings (GEMs), 2015)

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