ICD-10 and Emergency Care

Steven M. Verno, CEMCS

For at least the past twenty (20) + years, we have learned and used ICD-9-CM when coding for our providers . As someone once said, just when we learned the answers, they changed the questions. Also, for years, there has been rumor that ICD-10 would be replacing ICD-9, and now this will soon be a reality.

According to the Code of Federal Regulations, specifically, 45 CFR Parts 160 and 162, Titled HIPAA Administrative Simplification: Modification to Medical Data Code Set Standards To Adopt ICD–10–CM and ICD–10–PCS; Proposed Rule, dated August 22, 2008:

"*We propose October 1, 2011 as the compliance date for ICD–10–CM and ICD–10–PCS code sets for all covered entities. It is important to note that the compliance date must occur on October 1 in order to coincide with the effective date of annual Medicare inpatient PPS updates.*"

As we know, the emergency room is the light at the end of the tunnel for medical care for patients who are seriously ill, in addition to the uninsured of all ages, and the place of last resort when an HMO patient is unable to obtain an appointment to see their primary care provider. As a result, the diagnosis codes that face the emergency care provider and emergency care coder are many that are usually seen by many individual specialists. The emergency care provider is a combination of a pediatrician, geriatrician, internal medicine specialsist, orthopedist, family practitioner, cardiologist, psychiatrist and in some cases a dentist. I've seen some emergency care provider groups use thousands of diagnoses codes on a yearly basis.

There is an old saying in coding, "If it isn't documented, it doesn't exist or it didn't happen." When ICD-10 becomes effective, it's success is dependent on the provider's documentation. If the documentation shows, "OM", many of us know this means Otitis Media. Under ICD-9-CM, you have the following codes for OM:

382 Suppurative and unspecified otitis media
382.0 Acute suppurative otitis media
Otitis media, acute:
necrotizing NOS
purulent
382.00 Acute suppurative otitis media without spontaneous rupture of ear drum
382.01 Acute suppurative otitis media with spontaneous rupture of ear drum
382.02 Acute suppurative otitis media in diseases classified elsewhere
Excludes: postmeasles otitis (055.2)
Code First: underlying disease, as:
influenza (487.8)
scarlet fever (034.1)

382.1 Chronic tubotympanic suppurative otitis media

> Benign chronic suppurative otitis media (with anterior perforation of ear drum)
>
> Chronic tubotympanic disease (with anterior perforation of ear drum)

382.2 Chronic atticoantral suppurative otitis media

> Chronic atticoantral disease (with posterior or superior marginal perforation of ear drum)
>
> Persistent mucosal disease (with posterior or superior marginal perforation of ear drum)

382.3 Unspecified chronic suppurative otitis media

> Chronic purulent otitis media
>
> *Excludes: tuberculous otitis media (017.4)*

382.4 Unspecified suppurative otitis media

> Purulent otitis media NOS

382.9 Unspecified otitis media

> Otitis media:
>> NOS
>> acute NOS
>> chronic NOS

You have ten (10) possible codes under ICD-9

Under ICD-10, you have the following:

A38.0 Scarlet fever with otitis media

B05.3 Measles complicated by otitis media

H65 Nonsuppurative otitis media

Use additional code for any associated perforated tympanic membrane (H72.-)

Use additional code to identify: exposure to environmental tobacco smoke (Z58.7)

exposure to tobacco smoke in the perinatal period (P96.81) history of tobacco use (Z87.82)

H65.0 Acute serous otitis media

Acute and subacute secretory otitis

H65.00 Acute serous otitis media, unspecified ear

H65.01 Acute serous otitis media, right ear

H65.02 Acute serous otitis media, left ear

H65.03 Acute serous otitis media, bilateral

H65.04 Acute serous otitis media, recurrent, right ear

H65.05 Acute serous otitis media, recurrent, left ear

H65.06 Acute serous otitis media, recurrent, bilateral

H65.07 Acute serous otitis media, recurrent, unspecified ear

H65.1 Other acute nonsuppurative otitis media

Excludes1: otitic barotrauma (T70.0) otitis media (acute) NOS (H66.9)

H65.11 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous)
H65.111 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), right ear
H65.112 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), left ear
H65.113 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), bilateral
H65.114 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), recurrent, right ear
H65.115 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), recurrent, left ear
H65.116 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), recurrent, bilateral
H65.117 Acute and subacute allergic otitis

media (mucoid) (sanguinous) (serous), recurrent, unspecified ear
H65.119 Acute and subacute allergic otitis media (mucoid) (sanguinous) (serous), unspecified ear
H65.19 Other acute nonsuppurative otitis media
Acute and subacute mucoid otitis media Acute and subacute nonsuppurative otitis media NOS Acute and subacute sanguinous otitis media Acute and subacute seromucinous otitis media
H65.191 Other acute nonsuppurative otitis media, right ear
H65.192 Other acute nonsuppurative otitis media, left ear
H65.193 Other acute nonsuppurative otitis media, bilateral
H65.194 Other acute nonsuppurative otitis media, recurrent, right ear
H65.195 Other acute nonsuppurative otitis media, recurrent, left ear
H65.196 Other acute nonsuppurative otitis
media, recurrent, bilateral
H65.197 Other acute nonsuppurative otitis media recurrent, unspecified ear
H65.199 Other acute nonsuppurative otitis media, unspecified ear
H65.2 Chronic serous otitis media
Chronic tubotympanal catarrh
H65.20 Chronic serous otitis media, unspecified ear
H65.21 Chronic serous otitis media, right ear
H65.22 Chronic serous otitis media, left ear
H65.23 Chronic serous otitis media, bilateral
H65.3 Chronic mucoid otitis media
Chronic mucinous otitis media Chronic secretory otitis media Chronic transudative otitis media Glue ear Excludes1: adhesive middle ear disease (H74.1)

H65.30 Chronic mucoid otitis media, unspecified ear

H65.31 Chronic mucoid otitis media, right ear

H65.32 Chronic mucoid otitis media, left ear

H65.33 Chronic mucoid otitis media, bilateral

H65.4 Other chronic nonsuppurative otitis media

H65.41 Chronic allergic otitis media

H65.411 Chronic allergic otitis media, right ear

H65.412 Chronic allergic otitis media, left ear

H65.413 Chronic allergic otitis media, bilateral

H65.419 Chronic allergic otitis media, unspecified ear

H65.49 Other chronic nonsuppurative otitis media

Chronic exudative otitis media Chronic nonsuppurative otitis media NOS Chronic otitis media with effusion (nonpurulent) Chronic seromucinous otitis media

H65.491 Other chronic nonsuppurative otitis media, right ear

H65.492 Other chronic nonsuppurative otitis media, left ear

H65.493 Other chronic nonsuppurative otitis media, bilateral

H65.499 Other chronic nonsuppurative otitis media, unspecified ear

H65.9 Unspecified nonsuppurative otitis media

Allergic otitis media NOS Catarrhal otitis media NOS Exudative otitis media NOS Mucoid otitis media NOS Otitis media with effusion (nonpurulent) NOS Secretory otitis media NOS Seromucinous otitis media NOS Serous otitis media NOS Transudative otitis media NOS

H65.90 Unspecified nonsuppurative otitis media, unspecified ear

H65.91 Unspecified nonsuppurative otitis media, right ear

H65.92 Unspecified nonsuppurative otitis media, left ear

H65.93 Unspecified nonsuppurative otitis media, bilateral

H66 Suppurative and unspecified otitis media

Includes: suppurative and unspecified otitis media with myringitis

Use additional code for any associated perforated tympanic membrane (H72.-)

Use additional code to identify: exposure to environmental tobacco smoke (Z58.7) exposure to tobacco smoke in the perinatal period (P96.81) history of tobacco use (Z87.82) occupational exposure to environmental tobacco smoke (Z57.31) tobacco dependence (F17.-) tobacco use (Z72.0)

H66.0 Acute suppurative otitis media

H66.00 Acute suppurative otitis media without spontaneous rupture of ear drum

H66.001 Acute suppurative otitis media without spontaneous rupture of ear drum, right ear

H66.002 Acute suppurative otitis media without spontaneous rupture of ear drum, left ear

H66.003 Acute suppurative otitis media without spontaneous rupture of ear drum, bilateral

H66.004 Acute suppurative otitis media without spontaneous rupture of ear drum, recurrent, right ear
H66.005 Acute suppurative otitis media without spontaneous rupture of ear drum, recurrent, left ear
H66.006 Acute suppurative otitis media without spontaneous rupture of ear drum, recurrent, bilateral
H66.007 Acute suppurative otitis media without spontaneous rupture of ear drum, recurrent, unspecified ear H66.009 Acute suppurative otitis media without spontaneous rupture of ear drum, unspecified ear
H66.01 Acute suppurative otitis media with spontaneous rupture of ear drum
H66.011 Acute suppurative otitis media with spontaneous rupture of ear drum, right ear
H66.012 Acute suppurative otitis media with spontaneous rupture of ear drum, left ear
H66.013 Acute suppurative otitis media with spontaneous rupture of ear drum, bilateral
H66.014 Acute suppurative otitis media with spontaneous rupture of ear drum, recurrent, right ear
H66.015 Acute suppurative otitis media with spontaneous rupture of ear drum, recurrent, left ear
H66.016 Acute suppurative otitis media with spontaneous rupture of ear drum, recurrent, bilateral
H66.017 Acute suppurative otitis media with spontaneous rupture of ear drum, recurrent, unspecified ear
H66.019 Acute suppurative otitis media with spontaneous rupture of ear drum, unspecified ear
H66.1 Chronic tubotympanic suppurative otitis media Benign chronic suppurative otitis media Chronic tubotympanic disease
H66.10 Chronic tubotympanic suppurative otitis media, unspecified
H66.11 Chronic tubotympanic suppurative otitis media, right ear
H66.12 Chronic tubotympanic suppurative otitis media, left ear
H66.13 Chronic tubotympanic suppurative otitis media, bilateral
H66.2 Chronic atticoantral suppurative otitis media
Chronic atticoantral disease
H66.20 Chronic atticoantral suppurative otitis media, unspecified ear

H66.21 Chronic atticoantral suppurative otitismedia, right ear

H66.22 Chronic atticoantral suppurative otitis media, left ear

H66.23 Chronic atticoantral suppurative otitis media, bilateral

H66.3 Other chronic suppurative otitis media

Chronic suppurative otitis media NOS Excludes1: tuberculous otitis media (A18.6)

H66.3x Other chronic suppurative otitis media

H66.3x1 Other chronic suppurative otitis media, right ear

H66.3x2 Other chronic suppurative otitis media, left ear

H66.3x3 Other chronic suppurative otitis media, bilateral

H66.3x9 Other chronic suppurative otitis media, unspecified ear

H66.4 Suppurative otitis media, unspecified

Purulent otitis media NOS

H66.40 Suppurative otitis media, unspecified, unspecified ear

H66.41 Suppurative otitis media, unspecified, right ear

H66.42 Suppurative otitis media, unspecified, left ear

H66.43 Suppurative otitis media, unspecified, bilateral

H66.9 Otitis media, unspecified

Otitis media NOS Acute otitis media NOS Chronic otitis media NOS

H66.90 Otitis media, unspecified, unspecified ear

H66.91 Otitis media, unspecified. right ear

H66.92 Otitis media, unspecified, left ear

H66.93 Otitis media, unspecified, bilateral

H67 Otitis media in diseases classified elsewhere

Code first underlying disease, such as:

viral disease NEC (B00-B34) Use additional code for any associated perforated tympanic membrane (H72.-) Excludes1: otitis media in:

influenza (J10.89)

measles (B05.3)

 scarlet fever (A38.0)

tuberculosis (A18.6)

H67.1 Otitis media in diseases classified elsewhere, right ear

H67.2 Otitis media in diseases classified elsewhere, left ear

H67.3 Otitis media in diseases classified elsewhere, bilateral

H67.9 Otitis media in diseases classified elsewhere, unspecified ear

That's 10 ICD-9-CM Codes versus 97 ICD-10-CM Codes

As you can see, ICD-10 will require more work on the ED provider to document the exact type of diagnosis found with the patient. A simple OM is no longer acceptable. ICD-10 opens more with the anatomical area affected and allows for coding of chronic modalities.

Lets look at some of the most used codes in the emergency department.

ICD-9-CM
E917.9 (Other striking against with or without subsequent fall)
ICD-10
W18.49 (Other slipping, tripping and stumbling without falling)

ICD-9-CM
2) E927 (Overexertion and strenuous movements)
Icd-10
T73.3 Exhaustion due to excessive exertion
Overexertion
Y93.4 Strenuous physical activities

ICD-9-CM
E920.8 (Other specified cutting and piercing instruments or objects)
ICD-10
injury caused by cutting or piercing instruments (W25-W27)
W25 Contact with sharp glass
W26 Contact with knife, sword or dagger
W26.0 Contact with knife
Excludes1: contact with electric knife (W29.1)
W26.1 Contact with sword or dagger

401.9 (Essential hypertension, UNSPECIFIED)
I10 Essential (primary) hypertension

E885.9 (Fall from other slipping, tripping, or tumbling
W01 Fall on same level from slipping, tripping and stumbling

465.9 (Acute upper respiratory infections of multiple or unspecified sites
J06 Acute upper respiratory infections of multiple and unspecified sites

V58.3Attention to dressings and sutures
Z48.0 Encounter for attention to dressings, sutures and drains
E888 Other and unspecified fall

Note: Under ICD-10, a fall must be documented as to what caused the fall, where the patient fell, if the patient fell into a substance or object, and if the fall caused another injury.

E812.0 Other motor vehicle traffic accident involving collision with motor vehicle
X82.0 Intentional collision of motor vehicle with other motor vehicle
Y32 Crashing of motor vehicle, undetermined intent

780.6 Fever
R50.9 Fever, unspecified
Note, you have more than 288 different fever codes

Now for our favorite:
786.50 Chest Pain, Unspecified
R07.9   Chest pain, unspecified

599.0 Urinary tract infection, site not specified
N39.0 Urinary tract infection, site not specified
Use additional code (B95-B97), to identify infectious agent.

079.99 **Unspecified viral infection**
B34.9   Viral infection, unspecified

V22.2 Pregnant state, incidental
Z33.1 Pregnant state, incidental

Coding for ICD-10 appears to be no different than that of ICD-9, but documentation will be the success or failure of ICD-10. Improper or lack of documentation will only delay claims processing and will decrease practice revenue.

Under ICD-9-CM, you have the following:

Chapter 1: Infectious and Parasitic Diseases (001-139)
Chapter 2: Neoplasms (140-239)
Chapter 3: Endocrine, Nutritional, and Metabolic Diseases and Immunity Disorders (240-279)
Chapter 4: Diseases of Blood and Blood Forming Organs (280-289)
Chapter 5: Mental Disorders (290-319)
Chapter 6: Diseases of Nervous System and Sense Organs (320-389)
Chapter 7: Diseases of Circulatory System (390-459)
Chapter 8: Diseases of Respiratory System (460-519)
Chapter 9: Diseases of Digestive System (520-57
Chapter 10: Diseases of Genitourinary System (580-629)
Chapter 11: Complications of Pregnancy, Childbirth, and the Puerperium (630-677)
Chapter 12: Diseases Skin and Subcutaneous Tissue (680-709)
Chapter 13: Diseases of Musculoskeletal and Connective Tissue (710-739)
Chapter 14: Congenital Anomalies (740-759)
Chapter 15: Newborn (Perinatal) Guidelines (760-779)
Chapter 16: Signs, Symptoms and Ill-Defined Conditions (780-799)
Chapter 17: Injury and Poisoning (800-999)
Chapter 18: Classification of Factors Influencing Health Status and Contact with Health Service (Supplemental V01-V84) and Supplemental Classification of External Causes of Injury and Poisoning (E-codes, E800-E999)

Under ICD-10, you have the following:

- **Chapter 1: Certain infectious and parasitic diseases (A00-B99)**
  Chapter 2: Neoplasms (C00-D48)
- **Chapter 3: Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)**
- **Chapter 4: Endocrine, nutritional and metabolic diseases (E00-E90)**
- **Chapter 5: Mental and behavioral disorders (F01-F99)**
- **Chapter 6: Diseases of the nervous system (G00-G99)**
- **Chapter 7: Diseases of the eye and adnexa (H00-H59)**
- **Chapter 8: Diseases of the ear and mastoid process (H60-H95)**
- **Chapter 9: Diseases of the circulatory system (I00-I99)**
- **Chapter 10: Acute upper respiratory infections (J00-J06)**
- **Chapter 11: Diseases of oral cavity and salivary glands (K00-K14)**
- **Chapter 12: Diseases of the skin and subcutaneous tissue (L00-L99)**
- **Chapter 13: Diseases of the musculoskeletal system and connective tissue (M00-M99)**
- **Chapter 14: Diseases of the genitourinary system (N00-N99)**
- **Chapter 15: Pregnancy, childbirth and the puerperium (O00-O99)**
- **Chapter 16: Certain conditions originating in the perinatal period (P00-P96)**
- **Chapter 17 Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)**
- **Chapter 18: Symptoms and signs involving the circulatory and respiratory systems (R00-R09)**
- **Chapter 19: Injury, poisoning and certain other consequences of external causes (S00-T98)**
- **Chapter 20: External causes of morbidity (V01-Y98)**
- **Factors influencing health status and contact with health services (Z00-Z99)**

The 800 and 900 series accident codes are now S and T Codes
E Codes are now V-Y Codes
V Codes are now Z Codes.

The Table of Drugs and Biologicals that were 900 series codes and E Codes are now T Codes.

The proposed effective date for ICD-10 is October 2, 2011. That gives us thre years to get ready.

So, what do we have to do?

- **Retraining**
  Staff Coders need to be retrained to code using ICD-10 codes.
  Providers need training to be more detailed with health record documentation.
  Bilers will need to have knowledge of ICD-10 o ensure claims go out with the appropriate ICD-10 codes and to fight coding denials.

- **New Manuals**
  ICD-10 Manuals will need to be obtained and used.

- **Updated Software**
  Medical Billing software needs to be updated to include both ICD-9-CM and ICD-10. This is because with an October 1, 2011 proposed effective date, Claims for September 30th will still use ICD-9 Codes.

- **Certified Staff Coders**
  The Certifying Organizations are working to ensure coders are certified in ICD-10,and by upgrading their test

- **Updated Carrier Policies and Procedures**
  Providers who are contracted and have agreed to carrier coding policies should be reviewing these policies and to make sure the contracted carrier is ready to accept the new codes. You should find out if there are going to be any claims payment delays due to the changeover to ICD-10 as this may affect contract payment timeframes.

- **Updated Compliance Plans**
  Practices and Billing Companies should update their compliance plans regarding ICD-10 coding. Extra attention should be directed to performing internal audits of charts and claims

- **Updated Coding Denial Appeals**
  If the billing company is using a cookie cutter appeal, then the appeals should be reviewed an updated to conform to ICD-10 standards.

- **Updated Superbills**
  If the practice is using a superbill that contains ICD-9 codes, these
  should be replaced with the appropriate ICD-10 code(s).

- **Continue to fight fraud, abuse and any up/downcoding issues.**
  As with any changes there is always the fear that using something new is
  better resolved by downcoding a claim to remain under the "radar"
  Finding more codes available could lead to temptation to upcode or to
  submit a false claim to increase practice revenue.

  If we use the time we have been given for preparation, the transition
  from ICD-9 to ICD-10 can be very seamless.

  The key to the successful use and transition to ICD-10 is going to ensure
  our Providers are aware of their responsibility towards better
  documentation of the patient's medical condition(s).

  As a wise ED provider used to say all the time, "Document your charts
  as if you were going to court." I would then add, "and as if your
  paycheck depended on it."

  Use the following formula: PPD = Lawsuits and LOR (Loss of Revenue).