Compliance

Still More ICD-10-CM Updates!

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Effective Oct. 1, 2018, the Centers for Medicare & Medicaid Services (CMS) and the Centers for Disease Control and Prevention will add 279 new codes, revise 143 existing codes, and deactivate 51 codes in the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) classification. There are also updates to the 2019 ICD-10-CM Official Guidelines for Coding and Reporting that affect medical record documentation, code selection, and sequencing. Adherence to the guidelines when assigning ICD-10-CM diagnosis codes is required under the Health Insurance Portability and Accountability Act in all healthcare settings.

Guideline Updates

Though there are many changes to the official guidelines, below are key updates that will impact oncology physicians, practices, and hospitals (changes listed in bold text). In addition to these specific guidelines, there are updates on the application and sequencing of external cause of morbidity codes, particularly as they relate to hurricanes and other cataclysmic events. Additional instructions were added for reporting sepsis due to a postprocedural infection, hypertension with heart disease, myocardial infarctions, drug use during pregnancy, use of the Glasgow Coma Scale, body mass index (BMI) codes, and coding for burns, sexual exploitation, and factitious disorders.

• Section 1.A.15: The word “with” or “in” should be interpreted to mean “associated with” or “due to” when it appears in a code title, the Alphabetic Index (either under a main term or subterm), or an instructional note in the Tabular List.
• Section 1.B.14: Code assignment is based on the documentation by patient’s provider (i.e., physician or other qualified healthcare practitioner legally accountable for establishing the patient’s diagnosis). There are a few exceptions, such as for BMI, depth of nonpressure chronic ulcers, pressure ulcer stage, coma scale, and National Institutes of Health Stroke Scale codes, code assignment may be based on medical record documentation from clinicians who are not the patient’s provider (i.e., physician or other qualified healthcare practitioner legally accountable for establishing the patient’s diagnosis), because this information is typically documented by other clinicians involved in the care of the patient (e.g., a dietitian often documents BMI, a nurse often documents the pressure ulcer stages, and an emergency medical technician often documents the coma scale). However, the associated diagnosis (such as overweight, obesity, acute stroke, or pressure ulcer) must be documented by the patient’s provider. If there is conflicting medical record documentation, from either the same clinician or different clinicians, the patient’s attending provider should be queried for clarification.

For social determinants of health, such as information found in categories Z55-Z65, persons with potential health hazards related to socioeconomic and psychosocial circumstances, code assignment may be based on medical record documentation from clinicians involved in the care of the patient who are not the patient’s provider because this information represents social information, rather than medical diagnoses.

BMI, coma scale, National Institutes of Health Stroke Scale codes, and categories Z55-Z65 should only be reported as secondary diagnoses.
• Section 1.C.19.d: Z codes (other reasons for healthcare encounters) may be assigned as appropriate to further explain the reasons for presenting for healthcare services, including transfers between healthcare facilities. The ICD-10-CM Official Guidelines for Coding and Reporting identify which codes maybe assigned as principal or first-listed diagnosis only, secondary diagnosis only, or principal/first-listed or secondary (depending on the circumstances). Possible applicable Z codes include:
  • Z59.0: Homelessness
  • Z59.1: Inadequate housing
  • Z59.5: Extreme poverty
  • Z75.1: Person awaiting admission to adequate facility elsewhere
  • Z75.3: Unavailability and inaccessibility of healthcare facilities
  • Z75.4: Unavailability and inaccessibility of other helping agencies
  • Z76.2: Encounter for health supervision and care of other healthy infant and child
  • Z99.12: Encounter for respirator (ventilator) dependence during power failure.

The external cause of morbidity codes and the Z codes listed above are not an all-inclusive list. Other codes may be
applicable to the encounter based upon the documentation. Assign as many codes as necessary to fully explain each healthcare encounter. Because patient history information may be very limited, use any available documentation to assign the appropriate external cause of morbidity and Z codes.

• Section 1.C.2.m: When a primary malignancy has been previously excised or eradicated from its site, there is no further treatment (of the malignancy) directed to that site, and there is no evidence of any existing primary malignancy. A code from category Z85, personal history of malignant neoplasm, should be used to indicate the former site of the malignancy.

Subcategories Z85.0-Z85.7 should only be assigned for the former site of a primary malignancy, not the site of a secondary malignancy. Codes from subcategory Z85.8 may be assigned for the former site(s) of either a primary or secondary malignancy included in this subcategory.

Neoplasm Code Updates
There are several changes to the Neoplasm Table specific to neoplasms of the eye, providing the ability to report additional location specificity. Note that there are now detailed ICD-10-CM diagnosis codes to report lesions of the upper or lower eyelid. Table 1, page 10, outlines the 2018 and 2019 differences in the significant series of codes.

A new subcategory for C44.13 (sebaceous cell carcinoma of skin of eyelid, including canthus) has been introduced for 2019. The series of codes is inserted between the unspecified, basal, and squamous cell carcinoma of the canthus and the other unspecified carcinoma of the canthus. These codes are:

• C44.13 Sebaceous cell carcinoma of skin of eyelid, including canthus
• C44.131 Sebaceous cell carcinoma of skin of unspecified eyelid, including canthus
• C44.132 Sebaceous cell carcinoma of skin of right eyelid, including canthus
• C44.1321 Sebaceous cell carcinoma of skin of right upper eyelid, including canthus
• C44.1322 Sebaceous cell carcinoma of skin of right lower eyelid, including canthus
• C44.139 Sebaceous cell carcinoma of skin of left eyelid, including canthus
• C44.1391 Sebaceous cell carcinoma of skin of left upper eyelid, including canthus
• C44.1392 Sebaceous cell carcinoma of skin of left lower eyelid, including canthus

Endocrine Code Updates
Within the Endocrine chapter there are also grammatical revisions, as well as deletions and additions to the different subcategories. Subcategory code E72.53 has a revised definition for 2019 from hyperoxaluria to primary hyperoxaluria. Two of the disorders defined as part of code E72.8 (other specified disorders of amino-acid metabolism) were deleted and new codes were assigned to this category:

• E72.81 Disorders of gamma aminobutyric acid (GABA) metabolism
  - 4-Hydroxybutyric aciduria
  - Disorders of GABA metabolism
  - GABA metabolic defect
  - GABA transaminase deficiency
  - GABA-T deficiency
  - Gamma-hydroxybutyric aciduria
  - SSADHD
  - Succinic semialdehyde dehydrogenase deficiency

• E72.89 Other specified disorders of amino acid metabolism
  - Disorders of beta-amino acid metabolism
  - Disorders of gamma-glutamyl cycle

There was no change to code E75.2 (other sphingolipidoses), but one new subcategory was added and another included a revised definition:

• Code E75.26 (sulfatase deficiency), multiple sulfatase deficiency was added.
• Code E75.29 (other sphingolipidosis) was not changed but “sulfatase deficiency” was deleted from the definition.

Familial combined hyperlipidemia was deleted from the definition of code E78.4 (other hyperlipidemia) and the following subcategories were created:

- E78.41 Elevated Lipoprotein(a)
- Elevated Lp(a)
- E78.49 Other hyperlipidemia
- Familial combined hyperlipidemia

The following new code was created for plasminogen deficiency, and instructions for reporting this condition were updated throughout the Tabular List and Alphabetic Index:

- E88.02 Plasminogen deficiency
- Dysplasminogenemia
- Hypoplasminogenemia
- Type 1 plasminogen deficiency
- Type 2 plasminogen deficiency
- Code also, if applicable, ligneous conjunctivitis (H10.51).

Use additional code for associated findings, such as:

- Hydrocephalus (G91.4)
- Ligneous conjunctivitis (H10.51)
- Otitis media (H67)
- Respiratory disorder related to plasminogen deficiency (J99).

Mental and Behavioral Code Updates
The following codes were added to the Mental and Behavioral chapter effective Oct. 1, 2018:

• Code F12.23 (cannabis dependence with withdrawal) was added as a subcategory under F12.2 (cannabis dependence). Cannabis withdrawal was deleted from inclusion under F12.288 (cannabis dependence with other cannabis-induced disorder).
• Code F12.93 (cannabis use, unspecified with withdrawal) was added as a subcategory to code F12.9 (cannabis use, unspecified).

The term “disorder” was added to inclusion term under F19.21 (other psychoactive substance dependence, in remission). The full inclusion statement now reads, “Other (or unknown) substance use disorder, severe, in sustained remission.”

Signs and Symptoms Code Updates
New inclusion terms have been added to the subcategory codes related to R40.2 (coma), identifying eye opening, verbal, and motor score in relation to the specific ICD-10-CM code. Additional changes related to the coma category of codes are related to changing the age ranges covered, beginning at two years (continued on page 12)
### Table 1. Neoplasm Code Updates

<table>
<thead>
<tr>
<th>2018 Code Descriptor</th>
<th>Expanded 2019 Code Descriptor</th>
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</thead>
<tbody>
<tr>
<td><strong>C43.1 Malignant melanoma of eyelid, including canthus</strong></td>
<td></td>
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<tr>
<td>C43.11 Malignant melanoma of right eyelid, including canthus</td>
<td>C43.111 Malignant melanoma of right upper eyelid, including canthus</td>
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<tr>
<td>C43.112 Malignant melanoma of right lower eyelid, including canthus</td>
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<tr>
<td>C43.12 Malignant melanoma of left eyelid, including canthus</td>
<td>C43.121 Malignant melanoma of left upper eyelid, including canthus</td>
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<tr>
<td>C43.122 Malignant melanoma of left lower eyelid, including canthus</td>
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<tr>
<td><strong>C4A.1 Merkel cell carcinoma of eyelid, including canthus</strong></td>
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<tr>
<td>C4A.11 Merkel cell carcinoma of right eyelid, including canthus</td>
<td>C4A.111 Merkel cell carcinoma of right upper eyelid, including canthus</td>
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<td>C4A.122 Merkel cell carcinoma of left lower eyelid, including canthus</td>
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<tr>
<td><strong>C44.1 Other and unspecified malignant neoplasm of skin of eyelid, including canthus</strong></td>
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<tr>
<td>C44.102 Unspecified malignant neoplasm of skin of right eyelid, including canthus</td>
<td>C44.1021 Unspecified malignant neoplasm of skin of right upper eyelid, including canthus</td>
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<td>C44.1022 Unspecified malignant neoplasm of skin of right lower eyelid, including canthus</td>
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<tr>
<td>C44.109 Unspecified malignant neoplasm of skin of left eyelid, including canthus</td>
<td>C44.1091 Unspecified malignant neoplasm of skin of left upper eyelid, including canthus</td>
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<tr>
<td>C44.1092 Unspecified malignant neoplasm of skin of left lower eyelid, including canthus</td>
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<tr>
<td><strong>C44.11 Basal cell carcinoma of skin of eyelid, including canthus</strong></td>
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<tr>
<td>C44.112 Basal cell carcinoma of skin of right eyelid, including canthus</td>
<td>C44.1121 Basal cell carcinoma of skin of right upper eyelid, including canthus</td>
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<tr>
<td>C44.1122 Basal cell carcinoma of skin of right lower eyelid, including canthus</td>
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<tr>
<td>C44.119 Basal cell carcinoma of skin of left eyelid, including canthus</td>
<td>C44.1191 Basal cell carcinoma of skin of left upper eyelid, including canthus</td>
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<tr>
<td>C44.1192 Basal cell carcinoma of skin of left lower eyelid, including canthus</td>
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<tr>
<td><strong>C44.12 Squamous cell carcinoma of skin of eyelid, including canthus</strong></td>
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<tr>
<td>C44.122 Squamous cell carcinoma of skin of right eyelid, including canthus</td>
<td>C44.1221 Squamous cell carcinoma of skin of right upper eyelid, including canthus</td>
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<td>C44.1222 Squamous cell carcinoma of skin of right lower eyelid, including canthus</td>
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<td>C44.129 Squamous cell carcinoma of skin of left eyelid, including canthus</td>
<td>C44.1291 Squamous cell carcinoma of skin of left upper eyelid, including canthus</td>
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<tr>
<td>Neoplasm Code Updates</td>
<td>Table 1 (continued)</td>
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<td>C44.19 Other specified malignant neoplasm of skin of eyelid, including canthus</td>
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<td>C44.192 Other specified malignant neoplasm of skin of right eyelid, including canthus</td>
<td>C44.1921 Other specified malignant neoplasm of skin of right upper eyelid, including canthus</td>
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<tr>
<td>C44.199 Other specified malignant neoplasm of skin of left eyelid, including canthus</td>
<td>C44.1991 Other specified malignant neoplasm of skin of left upper eyelid, including canthus</td>
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<tr>
<td>D03.1 Melanoma in situ of eyelid, including canthus</td>
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<td>D03.11 Melanoma in situ of right eyelid, including canthus</td>
<td>D03.111 Melanoma in situ of right upper eyelid, including canthus</td>
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<td>D03.12 Melanoma in situ of left eyelid, including canthus</td>
<td>D03.121 Melanoma in situ of left upper eyelid, including canthus</td>
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<tr>
<td>D04.1 Carcinoma in situ of skin of eyelid, including canthus</td>
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<tr>
<td>D04.11 Carcinoma in situ of skin of right eyelid, including canthus</td>
<td>D04.111 Carcinoma in situ of skin of right upper eyelid, including canthus</td>
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<td>D04.12 Carcinoma in situ of skin of left eyelid, including canthus</td>
<td>D04.121 Carcinoma in situ of skin of left upper eyelid, including canthus</td>
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<td>D22.1 Melanocytic nevi of eyelid, including canthus</td>
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<td>D22.11 Melanocytic nevi of right eyelid, including canthus</td>
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<td>D23.1 Other benign neoplasm of skin of eyelid, including canthus</td>
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</table>
of age as opposed to starting at zero years.

The subcategory of codes related to R82.99 (other abnormal findings in urine) had several inclusion terms deleted (cells and casts in urine, crystalluria, and melanuria) and was expanded to a new subcategory code allowing for more specification:

- R82.991 Hypocitraturia
- R82.992 Hyperoxaluria
  - Excludes 1: Primary hyperoxaluria (E72.53)
- R82.993 Hyperuricoscuria
- R82.994 Hypercalciuria
  - Idiopathic hypercalciuria
- R82.998 Other abnormal findings in urine
  - Cells and casts in urine
  - Crystalluria
  - Melanuria.

Subcategories R93.81 (abnormal radiologic findings on diagnostic imaging of testis) and R93.89 (abnormal findings on diagnostic imaging of other specified body structures) were expanded and redefined as follows:

- R93.81 Abnormal radiologic findings on diagnostic imaging of testis
  - R93.811 Abnormal radiologic findings on diagnostic imaging of right testicle
  - R93.812 Abnormal radiologic findings on diagnostic imaging of left testicle
  - R93.813 Abnormal radiologic findings on diagnostic imaging of testicles, bilateral
  - R93.819 Abnormal radiologic findings on diagnostic imaging of unspecified testicle
- R93.89 Abnormal findings on diagnostic imaging of other specified body structures
  - Abnormal finding by radioisotope localization of placenta
  - Abnormal radiological finding in skin and subcutaneous tissue
  - Mediastinal shift.

**Z Code Updates**

The subcategory Z83.4 (family history of other endocrine, nutritional, and metabolic diseases) was updated to reflect new codes for more specified detail related to family history:

- Z83.430 Family history of elevated lipoprotein(a)
- Z83.438 Family history of other disorder of lipid protein metabolism and other lipidemia
- Family history of familial combined hyperlipidemia.

In addition to these updates, ICD-10-CM includes changes to codes for Zika virus, malaria, somatoform disorders, puerperal psychosis, factitious disorders, hemifacial spasms, muscular dystrophy, blepharitis, lagophthalmos, ectropions, meibomian gland dysfunction, rosacea conjunctivitis, brow ptosis, plasminogen deficiency, cerebrovascular diseases, appendicitis, colorectal abscesses, gallbladder conditions, myalgia, urethral strictures, poisoning by ecstasy, and numerous codes for forced labor and forced sexual exploitation.

The Official Guidelines for Coding and Reporting, Addenda, code lists, and other files are available online at: cdc.gov/nchs/icd/icd10cm.htm.