Welcome, the webinar will begin shortly...

ICD-10-CM Coding for Critical Care

American Thoracic Society
Clinical Practice Committee Webinar
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ATS Coding and Billing Quarterly

• Quarterly newsletter for ATS members

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• Pulmonary
• Critical Care
• Sleep

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Advisor, CPT Editorial Panel

ATS Clinical Practice Committee, Vice-Chair and Advisory Board Member to, ATS Coding and Billing Quarterly newsletter

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October 1, 2015
Armageddon
or
Godsend
ICD-10-CM History

- 1983-1992 - ICD-10 developed by WHO
- 1994 - National Center for Health Statistics developed US Clinical Modification - ICD-10-CM
  - Used for facility reporting of hospital inpatient procedures
- January 1, 1999 - Implemented ICD-10-CM for mortality reporting only
- January 16, 2009 Health Insurance Portability and Accountability Act (HIPAA) Administrative Simplification to Medical Data Code Set Standards - adopts ICD-10-CM
ICD-10-CM History

• October 1, 2011 - Last revision for ICD-9-CM
  – No changes planned for 2015
• October 1, 2013 – Implementation date - delayed
• October 1, 2014 – Implementation date - delayed
• October 1, 2015 – New implementation date
• September 30 2015 - ICD-9-CM will cease to operate at midnight
## ICD-9-CM vs ICD-10-CM

<table>
<thead>
<tr>
<th></th>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
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</thead>
<tbody>
<tr>
<td>Length of codes</td>
<td>3-5 characters in length</td>
<td>3-7 characters in length</td>
</tr>
<tr>
<td>Number of codes</td>
<td>~13,000 codes</td>
<td>~68,000 codes</td>
</tr>
<tr>
<td>Space for new codes</td>
<td>Limited space for new codes</td>
<td>Flexible for adding new codes</td>
</tr>
<tr>
<td>Detail</td>
<td>Lacks detail</td>
<td>Very specific (e.g. Laterality)</td>
</tr>
</tbody>
</table>
21 Chapters Now...
...But Same Great Hierarchical Structure

1. Certain Infectious And Parasitic Diseases (A00-B99)
2. Neoplasms (C00-D49)
3. Diseases Of The Blood And Blood-forming Organs And Certain Disorders Involving The Immune Mechanism (D50-D89)
4. Endocrine, Nutritional And Metabolic Diseases (E00-E89)
5. Mental, Behavioral And Neurodevelopmental Disorders (F01-F99)
6. Diseases Of The Nervous System (G00-G99)
7. Diseases Of The Eye And Adnexa (H00-H59)
8. Diseases Of The Ear And Mastoid Process (H60-H95)
9. Diseases Of The Circulatory System (I00-I99)
10. Diseases Of The Respiratory System (J00-J99)
11. Diseases Of The Digestive System (K00-K95)
12. Diseases Of The Skin And Subcutaneous Tissue (L00-L99)
13. Diseases Of The Musculoskeletal System And Connective Tissue (M00-M99)
14. Diseases Of The Genitourinary System (N00-N99)
15. Pregnancy, Childbirth And The Puerperium (O00-O9A)
16. Certain Conditions Originating In The Perinatal Period (P00-P96)
17. Congenital Malformations, Deformations And Chromosomal Abnormalities (Q00-Q99)
18. Symptoms, Signs And Abnormal Clinical And Laboratory Findings, Not Elsewhere Classified (R00-R99)
19. Injury, Poisoning And Certain Other Consequences Of External Causes (S00-T88)
20. External Causes Of Morbidity (V00-Y99)
21. Factors Influencing Health Status And Contact With Health Services (Z00-Z99)

*Sense organs separated from nervous system disorders
*Disorders of the Immune System Are included with “Diseases of the Blood and Blood-Forming Organs”
*Postoperative complications moved to procedure specific body system chapter
*Injuries grouped by anatomical site rather than injury category
ICD-10-CM Code Structure

XXX.XXXXX

- Up to 7 characters (Decimal after 1st 3)
  - 1st character a letter (except “U”)
  - 2nd character a number
  - 3rd–7th characters alpha or numeric
- Characters 1-3 Category (aka family)
- Characters 4-6 Etiology, anatomic site, severity, other vital details
- Character 7 Extension
  - A - Initial encounter
  - D - Subsequent encounter
  - S - Sequela
  - A code with fewer than six characters and still requires a seventh character extension – fill empty character spaces with a placeholder “X”
New Features

• Combination codes
• Laterality
• Episode of care
• Expanded Codes
• Inclusion of trimester in obstetrics codes
• Detail for ambulatory/managed care encounters
ICD-10-CM Benefits

- Flexible/Expandable
- More specificity
- Measures health care services
- Public health surveillance
- Reflects advances
- Uses current medical terminology
ICD-10-CM General Use

• Based on medical record documentation.
• Report to highest number of characters available
• Signs/symptoms acceptable if diagnosis not established
  – Signs/symptoms not routinely associated with disease should be coded
• Nonspecific codes are still available
• May need multiple codes to describe a single condition
• AHA/AHIMA study - much of detail already in chart
Simple Pneumococcal Pneumonia...

...Or is it so simple
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Sense organs separated from nervous system disorders
Disorders of the Immune System Are included with “Diseases of the Blood and Blood-Forming Organs”
Postoperative complications moved to procedure specific body system chapter
Injuries grouped by anatomical site rather than injury category
Chapter 10
Diseases of the Respiratory System (J00-J99)

- J00-J06  Acute upper respiratory infections
- J09-J18  Influenza and pneumonia
- J20-J22  Other acute lower respiratory infections
- J30-J39  Other diseases of upper respiratory tract
- J40-J47  Chronic lower respiratory diseases
- J60-J70  Lung diseases due to external agents
- J80-J84  Other respiratory diseases principally affecting the interstitium
- J85-J86  Suppurative/necrotic conditions of the lower respiratory tract
- J90-J94  Other diseases of the pleura
- J95     Intraoperative and postprocedural complications and disorders of respiratory system, not elsewhere classified
- J96-J99  Other diseases of the respiratory system
• **Influenza and pneumonia (J09-J18)**
  - **Excludes2:**
    - allergic or eosinophilic pneumonia (J82)
    - aspiration pneumonia NOS (J69.0)
    - meconium pneumonia (P24.01)
    - neonatal aspiration pneumonia (P24.-)
    - pneumonia due to solids and liquids (J69.-) congenital pneumonia (P23.9)
    - lipid pneumonia (J69.1)
    - rheumatic pneumonia (I00)
    - ventilator associated pneumonia (J95.851)

• **J13 Pneumonia due to Streptococcus pneumoniae**
  - Bronchopneumonia due to S. pneumoniae
  - **Code first** associated influenza, if applicable (J09.X1, J10.0-, J11.0-)
  - **Code also** associated abscess, if applicable(J85.1)
  - **Excludes1:**
    - congenital pneumonia due to S. pneumoniae (P23.6)
    - lobar pneumonia, unspecified organism (J18.1)
    - pneumonia due to other streptococci (J15.3-J15.4)
Excludes ICD-9-CM

• Contains one type of Excludes Note with two possible meaning

• Subjective interpretation – No real instructions
  – Possible interpretation 1 - should not use a particular code for a particular condition
    • Look in a different category - the two conditions can’t be coded together
  – Possible Interpretation 2 - a specific condition is not included in the code
    • May need to assign both codes
Excludes ICD-10-CM
Type 1 vs Type 2

- **Excludes1 note is a pure excludes note**
  - Excluded code (condition) should never be used with the code above the Excludes1 note
  - “Not Coded Here”

- **Excludes2 note - condition is not included in the code**
  - Excluded condition not part of the condition the code represents
  - If both conditions present - can use both codes
  - “Not included here”
• Influenza and pneumonia (J09-J18)
  – Excludes2 NOT INCLUDED HERE:
    • allergic or eosinophilic pneumonia (J82)
    • aspiration pneumonia NOS (J69.0)
    • meconium pneumonia (P24.01)
    • neonatal aspiration pneumonia (P24.0)
    • pneumonia due to solids and liquids (J69.-) congenital pneumonia (P23.9)
    • lipid pneumonia (J69.1)
    • rheumatic pneumonia (I00)
    • ventilator associated pneumonia (J95.851)

• J13 Pneumonia due to Streptococcus pneumoniae
  – Bronchopneumonia due to S. pneumoniae
  – Code first associated influenza, if applicable (J09.X1, J10.0-, J11.0-)
  – Code also associated abscess, if applicable (J85.1)
  – Excludes1 NOT CODED HERE:
    – congenital pneumonia due to S. pneumoniae (P23.6)
    – lobar pneumonia, unspecified organism (J18.1)
    – pneumonia due to other streptococci (J15.3-J15.4)
Code Also & Code First

• “Code Also” note - two codes may be required to fully describe a condition
  – No sequencing direction
• “Code First” note - code the underlying condition first
• **Influenza and pneumonia (J09-J18)**
  – **Excludes2:**
    • allergic or eosinophilic pneumonia (J82)
    • aspiration pneumonia NOS (J69.0)
    • meconium pneumonia (P24.01)
    • neonatal aspiration pneumonia (P24.-)
    • pneumonia due to solids and liquids (J69.-) congenital pneumonia (P23.9)
    • lipid pneumonia (J69.1)
    • rheumatic pneumonia (I00)
    • ventilator associated pneumonia (J95.851)

• **J13 Pneumonia due to Streptococcus pneumoniae**
  – Bronchopneumonia due to S. pneumoniae
  – **Code first** **UNDERLYING CONDITION FIRST** associated influenza, if applicable (J09.X1, J10.0-, J11.0-)
  – **Code also** **TWO CODES MAYBE NEEDED** associated abscess, if applicable(J85.1)
  – **Excludes1:**
    • congenital pneumonia due to S. pneumoniae (P23.6)
    • lobar pneumonia, unspecified organism (J18.1)
    • pneumonia due to other streptococci (J15.3-J15.4)
Placeholder Character

• ICD-10 uses placeholder character “X”
  – Used as a placeholder for certain codes
  – Allows for future expansion

• When indicated: “X” must be used in order for the code to be considered a valid code

• Example
  – T37.0x1A - poisoning by sulfamides, accidental (unintentional), initial encounter
NEC vs. NOS

• NEC – “Not elsewhere classifiable”
  – No specific code that describes the condition
• NOS – “Not Otherwise Specified”
  – AKA “Unspecified”
  – Insufficient information in the medical record to assign a more specific code
# ICD-10-CM Cross-Walking

<table>
<thead>
<tr>
<th>Mapping Categories</th>
<th>ICD-10 to ICD-9</th>
<th>ICD-9 to ICD-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Match</td>
<td>1.2%</td>
<td>3.0%</td>
</tr>
<tr>
<td>1-to1 Exact Match</td>
<td>5.0%</td>
<td>24.2%</td>
</tr>
<tr>
<td>1-to-1 Approximate Match with 1 Choice</td>
<td>82.6%</td>
<td>49.1%</td>
</tr>
<tr>
<td>1-to-1 Approximate Match with Multiple Choices</td>
<td>4.3%</td>
<td>18.7%</td>
</tr>
<tr>
<td>1-to-Many Match with 1 Scenario</td>
<td>6.6%</td>
<td>2.1%</td>
</tr>
<tr>
<td>1-to-Many Match with Multiple Scenarios</td>
<td>0.2%</td>
<td>2.9%</td>
</tr>
</tbody>
</table>
ICD-10-CM DOCUMENTATION IMPACTS

- Documentation must support the diagnosis code
- Disease Acuity (acute vs chronic)
- Supporting Lab Values (eg. ABGs)
- Disease or Disorder Site/Laterality
- Underlying and Associated Conditions
- Infectious Agents
- Stage/Grade Disease
- Severity
- Episodes of care (initial vs subsequent)
- Outside Influences
Nicotine, Smoking, Tobacco & Smoke Exposure

- **ICD-9 code 305.1** (tobacco use and dependence) will transition to:
  - **F17.2** Nicotine dependence
  - **099.33** Smoking complicating pregnancy, childbirth, and the puerperium
  - **P04.2** Newborn affected by maternal use of tobacco
  - **P96.81** Exposure to environmental tobacco smoke in the perinatal period
  - **T65.2** Toxic effect of tobacco and nicotine
  - **Z57.31** Occupational exposure to environmental tobacco smoke
  - **Z71.6** Tobacco use counseling, not elsewhere classified
  - **Z72** Tobacco use not otherwise specified (NOS)
  - **Z77.2** Contact with and exposure to environmental tobacco smoke
  - **Z87.8** History of nicotine dependence
Nicotine, Smoking, Tobacco & Smoke Exposure

• **F17 Nicotine Dependence**
  – F17.2 Nicotine dependence
  – F17.21 Nicotine dependence, cigarettes
  – F17.22 Nicotine dependence, chewing tobacco
  – F17.29 Nicotine dependence, other tobacco product

• **Details**
  – F17.2__ Nicotine dependence, unspecified
  – F17.2__ Nicotine dependence, unspecified, uncomplicated
  – F17.2__ Nicotine dependence, unspecified, in remission
  – F17.2__ Nicotine dependence unspecified, with withdrawal
  – F17.2__ Nicotine dependence, unspecified, with other nicotine-induced disorders
  – F17.2__ Nicotine dependence, unspecified, with unspecified nicotine-induced disorders
Critical Care
21 Chapters Now...
...But Same Great Hierarchical Structure...

WAIT, NO CRITICAL CARE CHAPTER

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Sense organs separated from nervous system disorders
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Postoperative complications moved to procedure specific body system chapter
Injuries grouped by anatomical site rather than injury category
Respiratory Failure
ICD-10 Acute Respiratory Documentation

• Acuity
• Presence of hypoxia or hypercapnia,
• Underlying condition(s)
• Complication(s)
• Tobacco status
ICD-9-CM Respiratory Failure Codes

- **518.81** Acute Respiratory Failure
- **518.82** ARDS
- **518.83** Acute & Chronic Respiratory Failure
- **518.84** Chronic Respiratory Failure
ICD-10-CM Respiratory Failure Codes

- **J80** ARDS
- **J96** Respiratory Failure, NEC
  - **J96.0** Acute respiratory failure
    - **J96.00** ARF, unspecified for hypoxia or hypercapnia
    - **J96.01** Acute Respiratory Failure with hypoxia
    - **J96.02** Acute Respiratory Failure with hypercapnia
  - **J96.1** Chronic respiratory failure
    - **J96.10** Chronic Respiratory Failure, unspecified for hypoxia or hypercapnia
    - **J96.11** Chronic Respiratory Failure with hypoxia
    - **J96.12** Chronic Respiratory Failure with hypercapnia
  - **J96.2** Acute & chronic respiratory failure
    - **J96.20** Acute & Chronic Respiratory Failure, unspecified for hypoxia or hypercapnia
    - **J96.21** Acute & Chronic Respiratory Failure with hypoxia
    - **J96.22** Acute & Chronic Respiratory Failure with hypercapnia
- **J96.9** Respiratory failure, unspecified
  - **J96.90** Respiratory Failure, unspecified for hypoxia or hypercapnia
  - **J96.91** Respiratory Failure, unspecified with hypoxia
  - **J96.92** Respiratory Failure, unspecified with hypercapnia
Respiratory Failure Coding

Case 1

A patient with pneumococcal pneumonia and profound hypoxemia is admitted to the ICU

• ICD-9-CM:
  – **518.81** Acute Respiratory Failure
  – **481** Pneumococcal pneumonia

• ICD-10-CM:
  – **J96.01** Acute Respiratory Failure with hypoxia
  – **J13** Pneumococcal pneumonia
Respiratory Failure Coding Case 2

A patient with chronic bronchitis and emphysema on LAMA, LABA, ICS, albuterol and long-term O2 therapy is admitted to the ICU with hypercapnia and hypoxemia on mechanical ventilation.

• ICD-9-CM:
  – 518.81 Acute Respiratory Failure

• ICD-10-CM:
  – J96.21 Acute & Chronic Respiratory Failure with hypoxia
  – J96.22 Acute & Chronic Respiratory Failure with hypercapnia
Intraoperative and postprocedural complications and disorders of respiratory system, NEC (J95)

- **J95.1** Acute pulmonary insufficiency following thoracic surgery
- **J95.2** Acute pulmonary insufficiency following nonthoracic surgery
- **J95.3** Chronic pulmonary insufficiency following surgery
- **J95.4** Chemical pneumonitis due to anesthesia
- **J95.5** Postprocedural subglottic stenosis
- **J95.8** Other intraoperative and postprocedural complications and disorders of respiratory system, not elsewhere classified
  - **J95.81** Postprocedural pneumothorax and air leak
  - **J95.811** Postprocedural pneumothorax
  - **J95.812** Postprocedural air leak
Intraoperative and postprocedural complications and disorders of respiratory system, NEC (J95)

• **J95.82** Postprocedural respiratory failure
  - **J95.821** Acute postprocedural respiratory failure
  - **J95.822** Acute and chronic postprocedural respiratory failure

• **J95.83** Postprocedural hemorrhage and hematoma of a respiratory system organ or structure following a procedure
  - **J95.830** ... a respiratory system procedure
  - **J95.831** ... other procedure

• **J95.88** Other intraoperative complication of respiratory system, NEC

• **J95.89** Other postprocedural complications and disorders of respiratory system, NEC
Respiratory Failure Coding
Case 3

A patient develops respiratory failure following Right Upper Lobectomy for lung cancer and is moved to the ICU on mechanical ventilation.

• ICD-9-CM:
  – 518.51 Acute Respiratory Failure following surgery or trauma

• ICD-10-CM:
  – J95.1 Acute Respiratory Insufficiency following T-surgery
Other ICU Respiratory Codes

- **J95.85** Complication of respirator (ventilator)
  - **J95.850** Mechanical complication of respirator (ventilator)
  - **J95.851** Ventilator associated pneumonia (add code for organism, B95.-, B96.-, B97.-). [ICD-9-CM 997.31.]
  - **J95.859** Other complication of ventilator
Respiratory Failure Coding
Case 4

A patient on mechanical ventilation for a week develops pneumonia with pseudomonas.

• ICD-9-CM:
  – 997.31 Ventilator associated pneumonia
  – 482.1 Pseudomonas pneumonia

• ICD-10-CM:
  – J95.851 Ventilator associated pneumonia
  – B96.5 Pseudomonas as the cause of diseases classified elsewhere
Sepsis
Sepsis Documentation

• Underlying systemic infection if known

• **Severe sepsis** - documentation must state severe or show evidence of acute organ dysfunction
  – Document organ dysfunctions
  – Document relationship between **acute organ dysfunction** and sepsis

• If circulatory failure and sepsis are related - **septic shock**
  – Septic shock includes severe sepsis in its description
Sepsis ICD-10-CM Codes

- **R65.1_** SIRS (995.90)
- **A40-41.9** Sepsis (995.91)
- **R65.20** Severe sepsis (995.92)
- **R65.21** Septic shock (785.2)
Coding of sepsis and severe sepsis

• Sepsis
  – Sepsis (without organ failure) – code systemic infection (A40.0 – A41.9)
  – If infection not specified - **A41.9**, Sepsis, unspecified organism

• Severe Sepsis (Organ Dysfunction)
  – **First** code underlying systemic infection
  – **Second** code **R65.20** Severe sepsis without septic shock
  – Additional code(s) for the associated acute organ dysfunction

• Septic Shock
  – **First** code underlying systemic infection
  – **Second** code **R65.21** Severe sepsis with shock
  – Additional code(s) for associated acute organ dysfunctions

• Cannot be a principal diagnosis
Sepsis (A40 – A41.9)

- **A40** Streptococcal sepsis
  - A40.0 Sepsis due to streptococcus, group A
  - A40.1 Sepsis due to streptococcus, group B
  - A40.3 Sepsis due to S. pneumoniae
  - A40.8 Other streptococcal sepsis
  - A40.9 Streptococcal sepsis, unspecified

- **A41** Other sepsis

- **A41.0** Sepsis due to S. aureus
  - A41.01 Sepsis due to MSSA
  - A41.02 Sepsis due to MRSA
  - A41.1 Sepsis due to other specified staphylococcus

- **A41.2** Sepsis due to unspecified staphylococcus

- **A41.3** Sepsis due to H. influenzae
- **A41.4** Sepsis due to anaerobes
- **A41.5** Sepsis due to other Gram (-)
  - A41.50 Gram (-) sepsis, unspecified
  - A41.51 Sepsis due to E. coli
  - A41.52 Sepsis due to Pseudomonas
  - A41.53 Sepsis due to Serratia
  - A41.59 Other Gram-negative sepsis

- **A41.8** Other specified sepsis
  - A41.81 Sepsis due to Enterococcus
  - A41.89 Other specified sepsis

- **A41.9** Sepsis, unspecified organism
SIRS/Severe Sepsis/Shock (I65)

Symptoms and signs specifically associated with systemic inflammation and infection

- **R65.1** SIRS
  - **R65.10** SIRS of non-infectious origin *without* acute organ dysfunction
  - **R65.11** SIRS of non-infectious origin *with* acute organ dysfunction
- **R65.2** Severe sepsis
  - **R65.20** Severe sepsis *without* septic shock
  - **R65.21** Severe sepsis *with* septic shock
- **T81.12** Post-procedural septic shock
- **General**
  - Code first: underlying condition
  - Use additional code to identify specific acute organ dysfunction
Specific Acute Organ Dysfunction

- N17. Acute kidney failure (584.5-584.9)
- J96.0. Acute respiratory failure (518.81)
- K72.0. Acute Hepatic Failure (570)
- G72.81. Critical illness myopathy (359.81)
- G62.81. Critical illness polyneuropathy (357.82)
- D65. DIC (286.6)
- G93.41. Encephalopathy (metabolic, septic) (348.31)
SIRS/Sepsis
Case 1

A 34-year-old man with tachycardia, tachypnea, fever but no evidence of infection. Etiology unknown

• ICD-9-CM
  – 995.90 SIRS

• ICD-10-CM
  – R65.10 SIRS without organ dysfunction
SIRS/Sepsis
Case 2

- A 34-year-old man with tachycardia, tachypnea, fever from heatstroke. Worsening renal failure

- ICD-9-CM
  - 992.0 Heatstroke
  - 995.90 SIRS
  - 584.5 Acute Kidney Failure

- ICD-10-CM
  - T67.0 Heatstroke
  - R65.11 SIRS with organ dysfunction
  - N17._ Acute kidney failure
SIRS/Sepsis
Case 3

• A 34-year-old man with tachycardia, tachypnea, fever and increased white count, secondary to S. pneumoniae infection. No other organ dysfunction.

• ICD-9-CM
  – 038.2 Streptococcal pneumoniae sepsis
  – 995.91 Sepsis

• ICD-10-CM
  – A40.3 Sepsis due to Streptococcus pneumoniae
SIRS/Sepsis

Case 4

- A 34-year-old man with tachycardia, tachypnea, fever and increased white count, secondary to S. pneumoniae infection. Complicated by acute renal and liver failure. Hemodynamically stable.

- **ICD-9-CM**
  - 038.2 Streptococcal pneumoniae sepsis
  - 995.92 Severe Sepsis
  - 584.5 Acute kidney failure
  - 570 Acute Hepatic Failure

- **ICD-10-CM**
  - A40.3 Sepsis due to Streptococcus pneumoniae
  - R65.20 Severe sepsis without septic shock
  - N17._ Acute kidney failure
  - K72.0 Acute Hepatic Failure
Case 5

- A 34-year-old man with tachycardia, tachypnea, fever and increased white count, secondary to S. pneumoniae infection. Sepsis is complicated by acute renal and liver failure. Requiring norepinephrine for BP support.

- ICD-9-CM
  - 038.2 Streptococcal pneumoniae sepsis
  - 995.92 Severe Sepsis
  - 785.2 Septic Shock
  - 584.5 Acute kidney failure
  - 570 Acute Hepatic Failure

- ICD-10-CM
  - A40.3 Sepsis due to Streptococcus pneumoniae
  - R65.21 Severe sepsis with septic shock
  - N17. Acute kidney failure
  - K72.0 Acute Hepatic Failure
Shock (R57)

- **R57**  Shock, not elsewhere classified
- **R57.0**  Cardiogenic shock
- **R57.1**  Hypovolemic shock
- **R57.8**  Other shock
- **R57.9**  Shock, unspecified

**Excludes1:**
- anaphylactic shock NOS (T78.2)
- anaphylactic reaction or shock due to adverse food reaction (T78.0-)
- anaphylactic shock due to adverse effect - correct drug properly administered (T88.6)
- anaphylactic shock due to serum (T80.5-)
- anesthetic shock (T88.3)
- postprocedural shock (T81.1-)
- septic shock (R65.21)
- traumatic shock (T79.4)
- toxic shock syndrome (A48.3)
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>I95.0</td>
<td>Idiopathic hypotension</td>
</tr>
<tr>
<td>I95.1</td>
<td>Orthostatic hypotension</td>
</tr>
<tr>
<td>I95.2</td>
<td>Hypotension due to drugs</td>
</tr>
<tr>
<td>I95.3</td>
<td>Hypotension of hemodialysis</td>
</tr>
<tr>
<td>I95.8</td>
<td>Other hypotension</td>
</tr>
<tr>
<td>I95.81</td>
<td>Postprocedural hypotension</td>
</tr>
<tr>
<td>I95.89</td>
<td>Other hypotension</td>
</tr>
<tr>
<td>I95.9</td>
<td>Hypotension, unspecified</td>
</tr>
</tbody>
</table>
Shock: Case 1

• A 65-year-old man with coronary artery disease, hypotension, and dyspnea requires hemodynamic monitoring. A PA catheter reveals markedly decreased CO.

• ICD-9-CM
  – \textbf{785.51} Cardiogenic Shock

• ICD-10-CM
  – \textbf{R57.0} Cardiogenic Shock
Shock: Case 2

- A 20-year-old woman requires mechanical ventilation and vasopressor infusion for toxic shock syndrome
- ICD-9-CM
  - 040.82 Toxic Shock Syndrome
- ICD-10-CM
  - A48.3 Toxic Shock Syndrome
Documentation for Heart Failure

• Specify **acuity**
  – Acute, chronic, acute on chronic

• Identify **disease type**
  – Systolic, diastolic, combined systolic and diastolic failure

• List the relationship of **hypertension** to heart failure.

• Identify the **underlying cause**
Heart Failure (I50)

- **I50.1** Left ventricular failure
- **I50.2** Systolic heart failure
  - **I50.20** Unspecified systolic heart failure
  - **I50.21** Acute systolic heart failure
  - **I50.22** Chronic systolic heart failure
  - **I50.23** Acute on chronic systolic heart failure
- **I50.3** Diastolic heart failure
  - **I50.30** Unspecified diastolic heart failure
  - **50.31** Acute diastolic heart failure
  - **I50.32** Chronic diastolic heart failure
  - **I50.33** Acute on chronic diastolic heart failure
- **I50.4** Combined systolic and diastolic heart failure
  - **I50.40** Unspecified combined systolic and diastolic heart failure
  - **I50.41** Acute combined systolic and diastolic heart failure
  - **I50.42** Chronic combined systolic and diastolic heart failure
  - **I50.43** Acute on chronic combined systolic and diastolic heart failure
- **I50.9** Heart failure, unspecified
Other Respiratory Diseases Principally Affecting the Interstitium (J80-J84)

J80  Acute respiratory distress syndrome
J81  Pulmonary edema
     J81.0  Acute pulmonary edema
     J81.1  Chronic pulmonary edema
Respiratory Conditions Due to Inhalation of Chemicals, Gases, Fumes and Vapors (J68)

• General
  – **Code first** (T51-T65) to identify cause
  – Use additional code for associated respiratory conditions

• J68.0 **Bronchitis and pneumonitis** due to chemicals, gases, fumes and vapors
• J68.1 **Pulmonary edema** due to chemicals, gases, fumes and vapors
• J68.2 Upper respiratory inflammation due to chemicals, gases, fumes and vapors, NEC
• J68.3 Other acute and subacute respiratory conditions due to chemicals, gases, fumes and vapors
• J68.4 Chronic respiratory conditions due to chemicals, gases, fumes and vapors
• J68.8 Other respiratory conditions due to chemicals, gases, fumes and vapors
• J68.9 Unspecified respiratory condition due to chemicals, gases, fumes and vapors
Pneumonitis due to solids and liquids (J69)

- **J69.0** Pneumonitis due to inhalation of food and vomit
- **J69.1** Pneumonitis due to inhalation of oils and essences
- **J69.8** Pneumonitis due to inhalation of other solids and liquids
  - Pneumonitis due to aspiration of blood, detergent
  - **Code first** (T51-T65) to identify substance
- **J95.4** Postprocedural pneumonitis
Respiratory Conditions Due to Other External Agents (J70)

- **General**
  - Use additional code (W88-W90, X39.0-) to identify the external cause
  - Use additional code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)
  - **Code first** (T51-T65) to identify the external agent

- **J70.0** Acute pulmonary manifestations due to radiation
- **J70.1** Chronic and other pulmonary manifestations due to radiation
- **J70.2** Acute drug-induced interstitial lung disorders
- **J70.3** Chronic drug-induced interstitial lung disorders
- **J70.4** Drug-induced interstitial lung disorders, unspecified
- **J70.5** Respiratory conditions due to smoke inhalation
- **J70.8** Respiratory conditions due to other specified external agents
- **J70.9** Respiratory conditions due to unspecified external agent
Pulmonary Heart Disease and Diseases of the Pulmonary Circulation (I26-I28)

I26 Pulmonary embolism

- **I26.0** Pulmonary embolism with acute cor pulmonale
  - **I26.01** Septic pulmonary embolism with acute cor pulmonale
  - **I26.02** Saddle embolus of pulmonary artery with acute cor pulmonale
  - **I26.09** Other pulmonary embolism with acute cor pulmonale

- **I26.9** Pulmonary embolism without acute cor pulmonale
  - **I26.90** Septic pulmonary embolism without acute cor pulmonale
  - **I26.92** Saddle embolus of pulmonary artery without acute cor pulmonale
  - **I26.99** Other pulmonary embolism without acute cor pulmonale
Pulmonary Heart Disease and Diseases of the Pulmonary Circulation (I26-I28)

I27 Other pulmonary heart diseases

- I27.0 Primary pulmonary hypertension
- I27.1 Kyphoscoliotic heart disease
- I27.2 Other secondary pulmonary hypertension
- I27.8 Other specified pulmonary heart diseases
- I27.81 Cor pulmonale (chronic)
- I27.82 Chronic pulmonary embolism
- I27.89 Other specified pulmonary heart diseases
- I27.9 Pulmonary heart disease, unspecified
Coma, Altered Mental Status, Delirium

- **R40.0**  Somnolence
- **R40.1**  Stupor
- **R40.2**  Coma
  - One code from subcategories R40.21-R40-23 required
- **R40.20**  Unspecified coma
- **R40.3**  Persistent vegetative state
- **R41.0**  Disorientation, unspecified
  - AKA Confusion NOS, Delirium NOS
- **R41.82**  Altered mental status, unspecified
- **F05**  Delirium due to known physiological condition
Coma (Severity and Timing)

- **R40.21** Coma scale, eyes open
  - **R40.211** ...never
  - **R40.212** ... to pain
  - **R40.213** ... to sound
  - **R40.214** ... spontaneous

- **R40.22** Coma scale, best verbal response
  - **R40.221** ... none
  - **R40.222** ... incomprehensible words
  - **R40.223** ... inappropriate words
  - **R40.224** ... confused conversation

- **R40.23** Coma scale, best motor response
  - **R40.231** ... none
  - **R40.232** ... extension
  - **R40.233** ... abnormal
  - **R40.234** ... flexion withdrawal
  - **R40.235** ... localizes pain
  - **R40.236** ... obeys commands
  - **R40.225** ... oriented

- **R40.24** Glasgow coma scale, total score
  - **R40.241** GCS score 13-15
  - **R40.242** GCS score 9-12
  - **R40.243** GCS score 3-8
  - **R40.244** Other coma, without documented or with partial GCS score,

- **7th character added to subcategory**
  - **R40.21**, **R40.22**, **R40.23**:
    - 0 - unspecified time
    - 1 - in the field [EMT or ambulance]
    - 2 - at arrival to emergency department
    - 3 - at hospital admission
    - 4 - 24 hours or more after hospital admission
Tracheostomy Related Codes J95

- **J95.0** Tracheostomy complications (519.0)
- **J95.00** Unspecified tracheostomy complication (519.00)
- **J95.01** Hemorrhage from tracheostomy stoma (519.0)
- **J95.02** Infection of tracheostomy stoma (519.01)
- **J95.03** Malfunction of tracheostomy stoma (519.02)
  - Mechanical complication of tracheostomy stoma, Obstruction of tracheostomy airway, Tracheal stenosis due to tracheostomy
- **J95.04** Tracheo-esophageal fistula following tracheostomy (519.09)
- **J95.09** Other tracheostomy complication (519.09)
- **Z93.0** Tracheostomy Status
Other ICU Codes

R09.02  Hypoxemia  (799.02)
R06.89  Hypercapnia
R06.09  Dyspnea  (786.09)
J98.11  Atelectasis  518.0
        Other pulm collapse  J98.19
J95.84  TRALI  (518.7)
K92.2   GI Hemorrhage, Unspecified
R93.8   Abnormal findings on diagnostic imaging (793.2)
ICD-10-CM Coding Resources

- **AMA**: www.ama-assn.org/go/ICD-10
- **CMS**: www.cms.gov/ICD10
- **CMS**: www.cms.gov/roadto10
- **National Center for Health Statistics (NCHS)**: www.cdc.gov/nchs/icd.htm
- **American Academy of Professional Coders (AAPC)**: www.aapc.com
- **American Hospital Association (AHA)**: www.aha.org
- **American Health Information Management Association (AHIMA)**: www.ahima.org