

Ingenix University: Implementing ICD-10

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ICD-10-CM. Procedures are coded using the procedure classification appropriate for the encounter setting, such as ICD-10-PCS or CPT.

AXIS OF CLASSIFICATION

The ICD-10-CM is an arrangement of similar entities, diseases, and other conditions on the basis of specific criteria. Diseases can be arranged in a variety of ways: according to etiology, anatomy, or severity. The particular criterion chosen is called the axis of classification.

Anatomy is the primary axis of classification of ICD-10-CM. Thus, there are chapters entitled “Diseases of the Circulatory System” and “Diseases of the Genitourinary System.” ICD-10-CM employs other axes as well, such as etiology, as in the chapter, “Certain Infectious and Parasitic Diseases.”

Different axes are used in classifying different diseases within the same chapters. The choice is based upon the most important aspects of the disease from both a statistical and clinical point of view. For example:

- Pneumonia: etiology or cause of the pneumonia
- Malignant neoplasm: site
- Cardiac arrhythmia: type
- Leukemia: morphology

ARRANGEMENT OF THE TABULAR LIST

The tabular list consists of chapters, subchapters, three character categories, four character subcategories, and five, six, and seven character subdivisions.

Chapters and Subchapters

As mentioned, the chapter order in ICD-10-CM is not always the same as in ICD-9-CM. Disorders of the immune mechanism in ICD-10-CM are found with diseases of the blood and blood-forming organs. In ICD-9-CM these disorders are included with endocrine, nutritional, and metabolic diseases. Chapters for diseases of the genitourinary system; pregnancy, childbirth and the puerperium; certain conditions originating in the perinatal period; and congenital malformations, deformations and chromosomal abnormalities are placed consecutively in ICD-10. This chapter arrangement is the same in ICD-10-CM.

The ICD-10-CM classification is divided into 21 chapters. The chapter title describes the general content of the chapter. The code range describes the extent of the chapter; for example, chapter 7, “Diseases of the Eye and Adnexa” (H00–H59).

Chapters are subdivided into subchapters or “blocks” containing rubrics that identify closely related conditions. Each chapter begins with a summary of its subchapters to provide an overview of the classification structure at that level.

The title describes the content of the subchapter. The code range describes the extent of the subchapter; for example, “Disorders of Vitreous Body and Globe” (H43–H45).



DEFINITIONS

Rubric. A grouping of similar conditions. In ICD-10-CM, rubric denotes either a three-character category or a four-character subcategory.

**KEY POINT**

ICD-10-PCS Draft Coding Guidelines are located in the ICD-10-PCS Training Manual and can be downloaded at the following URL:
<http://new.cms.hhs.gov/ICD9ProviderDiagnosticCodes/Downloads/trainingd.pdf>.

Additional attributes in the procedural coding system include the following:

- The “not elsewhere classified” option was eliminated, except for newly approved radiopharmaceuticals and new devices. The NEC option can be used prior to the addition of the radiopharmaceuticals and devices to the coding system. In every other case, ICD-10-PCS should contain all possible operations, body parts, and approaches.
- Diagnostic information is excluded from the procedure description to enhance data collection. There are no codes for specific diagnoses (e.g., aneurysm, hernia, cleft lip, enterocele).
- There are no eponyms. For example, the Bardenheurer operation is identified as ligation and suturing of an arterial fistula, rather than by the eponym.
- There is no Latin terminology. Everything is reduced to simple anatomical and procedural terms.

ICD-10-PCS Draft Coding Guidelines

ICD-10-PCS Draft Coding Guidelines are located in “Training Guide on ICD-10-PCS” and “Introduction to the ICD-10-PCS Coding System” and can be downloaded at the following URL:

<http://new.cms.hhs.gov/ICD9ProviderDiagnosticCodes/Downloads/>.

The guidelines are organized into sections covering general instruction, medical and procedure coding, and a section for other coding instruction. Coding guidelines for ICD-10-PCS need to be carefully reviewed as part of orientation and training. Coders will need to be as well versed in application of guidelines for the ICD-10-PCS as they are with coding guidelines for ICD-9-CM and CPT. Ingenix is publishing an updated version of the complete text.

ICD-10-PCS coding guidelines follow a similar philosophy as do some ICD-9-CM coding guidelines and conventions in that the purpose of the classification of procedures and services performed is the same. However, due to the drastic difference between the structure, organization, and granularity of systems, a comparison of the two sets of guidelines would be an apple-to-orange comparison.

It will be necessary to continue to keep current with the guidelines as they are updated. New ICD-9-CM procedures will be added to the PCS structure as they are approved by CMS. Coders need to thoroughly review the guidelines to understand all of the rules and instructions for proper coding. There are no codes for diagnoses in ICD-10-PCS; diagnoses are coded using ICD-9-CM or ICD-10-CM, as or appropriate for the encounter or setting.

ICD-10-PCS Organization

The developers of ICD-10-PCS resolved problems inherent in the existing procedural coding systems by rewriting the system’s salient features. Codes in ICD-10-PCS contain seven alphanumeric characters, and although there are thousands of possible codes, PCS distills all medical services into about 30 procedures. There is no numeric listing of codes. Rather, there are 16 sections filled with tables that determine code selection.

**KEY POINT**

Nearly half of the medical specialty sections reflected in the first character of ICD-10-PCS remain undesignated. These sections cover broad medical topics, like surgery, chiropractics, mental health, and radiation oncology. In ICD-10-PCS, there is tremendous room for expansion into other medical arenas, like evaluation and management, home health services, or yet-undiscovered technologies.