

ICD-10-CM Coding Advice for Healthcare Encounters in Hurricane Aftermath August 2017

This document is intended to be used as a guide to help coding professionals when coding healthcare encounters of those individuals affected by a hurricane. This coding advice has been approved by the Four Cooperating Parties (American Hospital Association (AHA); American Health Information Management Association (AHIMA); Centers for Medicare and Medicaid Services (CMS); and National Center for Health Statistics (NCHS)). The advice, originally published in 2005, has been updated and includes ICD-10-CM codes.

Further guidance will be provided, as necessary, as events unfold in the aftermath of the hurricane.

Use of External Cause of Morbidity Codes

An external cause of morbidity code should be assigned to identify the cause of the injury(ies) incurred as a result of the hurricane. The use of external cause of morbidity codes is supplemental to the application of ICD-10-CM codes. External cause of morbidity codes are never to be recorded as a principal diagnosis (first-listed in non-inpatient settings). The appropriate injury code should be sequenced before any external cause codes.

The external cause of morbidity codes capture how the injury or health condition happened (cause), the intent (unintentional or accidental; or intentional, such as suicide or assault), the place where the event occurred, the activity of the patient at the time of the event, and the person's status (e.g., civilian, military). They should not be assigned for encounters to treat hurricane victims' medical conditions when no injury, adverse effect or poisoning is involved. External cause of morbidity codes should be assigned for **each** encounter for care and treatment of the injury. External cause of morbidity codes may be assigned in all health care settings. For the purpose of capturing complete and accurate ICD-10-CM data in the aftermath of the hurricane, a healthcare setting should be considered as any location where medical care is provided by licensed healthcare professionals.

Sequencing of External Causes of Morbidity Codes

Codes for cataclysmic events, such as a hurricane, take priority over all other external cause codes except child and adult abuse and terrorism and should be sequenced before other external cause of injury codes. Assign as many external cause of morbidity codes as necessary to fully explain each cause. For example, if an injury occurs as a result of a building collapse during the hurricane, external cause codes for both the hurricane and the building collapse should be assigned, with the external causes code for hurricane being sequenced as the first external cause code.

For injuries incurred as a direct result of the hurricane, assign the appropriate code(s) for the injuries, followed by the code X37.0-, Hurricane (with the appropriate 7th character), and any other applicable external cause of injury codes. Code X37.0- also should be assigned when an injury is incurred as a result of flooding caused by a levee breaking related to the hurricane. Code X38.-, Flood (with the appropriate 7th character), should be assigned when an injury is from flooding resulting directly from the storm. Code X36.0.-, Collapse of dam or man-made structure, should **not** be assigned when the cause of the collapse is due to the hurricane. Use of code X36.0- is limited to collapses of man-made structures due to earth surface movements, not due to storm surges directly from a hurricane.

Other External Causes of Morbidity Code Issues

For injuries that are not a direct result of the hurricane, such as an evacuee that has incurred an injury as a result of a motor vehicle accident, assign the appropriate external cause of morbidity code(s) to describe the cause of the injury, but do not assign code X37.0-, Hurricane. If it is not clear whether the injury was a direct result of the hurricane, assume the injury is due to the hurricane and assign code X37.0-, Hurricane, as well as any other applicable external cause of morbidity codes.

In addition to code X37.0-, Hurricane, other possible applicable external cause of morbidity codes include:

W54.0-, Bitten by dog

X30-, Exposure to excessive natural heat

X31-, Exposure to excessive natural cold

X38-, Flood

Use of Z codes

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 health-care 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. Since patient history information may be very limited, use any available documentation to assign the appropriate external cause of morbidity and Z codes.

See the *ICD-10-CM Official Guidelines for Coding and Reporting* for further guidance regarding the use of ICD-10-CM diagnosis codes, including external cause of morbidity and Z codes. The guidelines can be accessed at the following link:

https://www.cdc.gov/nchs/data/icd/10cmguidelines fy2018 final.pdf