

ICD-10-CM AND ICD-10-PCS: TRANSITION OVERVIEW & IMPACT ON PUBLIC HEALTH

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OVERVIEW

- ❑ History & Overview of ICD
- ❑ Overview of ICD-10-CM & ICD-10-PCS
 - ❑ Benefits
 - ❑ What's Different
 - ❑ Structure/Conventions
- ❑ Impact on Public Health
- ❑ General Equivalence Maps (GEMs)

HISTORY OF ICD

ICD REVISIONS

<i>ICD Revision No.</i>	<i>Year of Conference When Adopted</i>	<i>Year in Use in the U.S.</i>	<i>ICD, Clinical Modification</i>	<i>Year in Use in the U.S.</i>
First	1900	1900-1909		
Second	1909	1910-1920		
Third	1920	1921-1929		
Fourth	1929	1930-1938		
Fifth	1938	1939-1948		
Sixth	1948	1949-1957		
Seventh	1955	1958-1967		
Eighth	1965	1968-1978	ICDA-8 H-ICDA-1 H-ICDA-2	1968-1978 1968-1972 1973-1978
Ninth	1975	1979-1998	ICD-9-CM	1979
Tenth	1989	1999-	ICD-10-CM	Oct. 1, 2015

BENEFITS OF THE NEW CODING SYSTEM

- Updated medical terminology and classification of diseases
- Allows easier comparison of mortality and morbidity data
- Provides better data for:
 - Measuring care provided to patients
 - Designing payment systems
 - Processing claims
 - Making clinical decisions
 - Tracking public health
 - Identifying fraud and abuse
 - Conducting research

HIPAA ADMINISTRATIVE SIMPLIFICATION: MODIFICATIONS TO MEDICAL DATA CODE SET STANDARDS

- ▶ October 1, 2015 – Compliance date for implementation of ICD-10-CM and ICD-10-PCS
- ▶ Regular updates to ICD-10-CM code sets to begin October 1, 2016
- ▶ Single implementation date for all users
 - ▶ Date of service for ambulatory and physician reporting
 - ▶ Date of discharge for inpatient and other settings

ICD-10-CM STRUCTURE AND CONVENTIONS

ICD-9-CM VS ICD-10-CM

(DIAGNOSIS CODES)

ICD-9-CM Diagnosis Codes

ICD-10-CM Diagnosis Codes

3 to 5 characters	-----	3 to 7 characters
Alpha “E” and “V” on 1 st character	-----	Alpha for 1 st character
No place holder characters	-----	Include place holder (X)
Terminology	-----	Similar
Index and Tabular Structure	-----	Similar
Coding Guidelines	-----	Somewhat similar
Approximately 14,000 codes	-----	Approximately 69,000 codes
Severity parameters limited	-----	Increased severity parameters
Does not include laterality	-----	Common definition of laterality
Combination codes limited	-----	Combination codes common

FULL CODE TITLES

ICD-9-CM

143 Malignant neoplasm of gum

143.0 Upper gum

143.1 Lower gum

ICD-10-CM

C03 Malignant neoplasm of gum

C03.0 Malignant neoplasm of upper gum

C03.1 Malignant neoplasm of lower gum

ICD-10-CM CODE EXAMPLES

ICD-9-CM

996.1 Mechanical complication of other vascular device, implant, and graft

ICD-10-CM

9 codes differentiating aortic graft, carotid arterial graft, femoral graft from catheters

Examples:

T82.49xA Other complication of vascular dialysis catheter, initial encounter

T82.591A Other mechanical complication of surgically created arteriovenous shunt, initial encounter

T82.593A Other mechanical complication of balloon (counterpulsation) device, initial encounter

T82.595A Other mechanical complication of umbrella device, initial encounter

EXPANDED CODES FOR GREATER SPECIFICITY

- ❑ Addition of laterality (e.g. right vs. left) and specific body areas
 - S00.411 Abrasion of ear, right ear
 - S50.351 Superficial foreign body of right elbow
 - S81.012 Laceration without foreign body, left knee
- ❑ Added code extensions for injuries & external causes of injuries
- ❑ H95.3 Accidental Puncture or Laceration During an Ear Procedure
 - H95.31 Accidental puncture and laceration of the ear and mastoid process following procedure on ear and mastoid process
 - H95.32 Accidental puncture and laceration of ear and mastoid process following other procedure

ICD-10-PROCEDURE CODING SYSTEM (ICD-10-PCS)

ICD-9-CM VS ICD-10-PCS

ICD-9-CM (volume 3)	ICD-10-PCS
3,824 codes	71,924 codes
3-4 characters (min/max)	7 characters (min/max)
All characters = numeric	All characters = alpha or numeric
Decimals after 2 characters	No decimal
Generic body parts	Detailed body parts
Lack detail and laterality	Specifics and laterality
Lack description on method and approach	Detailed method and approach
Connect with diagnosis, example: cataract surgery	Does not connect with diagnosis

ICD-10-PCS CHARACTERISTICS

- ❖ Completeness
 - ❖ Unique code exactly what was performed
- ❖ Unique Definitions
 - ❖ Provided for device, approach, root operation
- ❖ Expandability
 - ❖ Can add new choices to accommodate new procedure
- ❖ Multi-axial code structure
 - ❖ Pull-down menu of choices for each character
- ❖ Standardized terminology
 - ❖ Will not include multiple meanings for the same term
- ❖ Structural integrity
 - ❖ Expand without disrupting ICD-10-PCS structure
- ❖ No diagnosis Information in the procedure code
 - ❖ Example: Cataract extraction will have to be specified what was extracted (lens).
 - ❖ Rely on diagnosis codes: cataract, cleft lip, aneurysms, neoplasms, strictures, as clues.

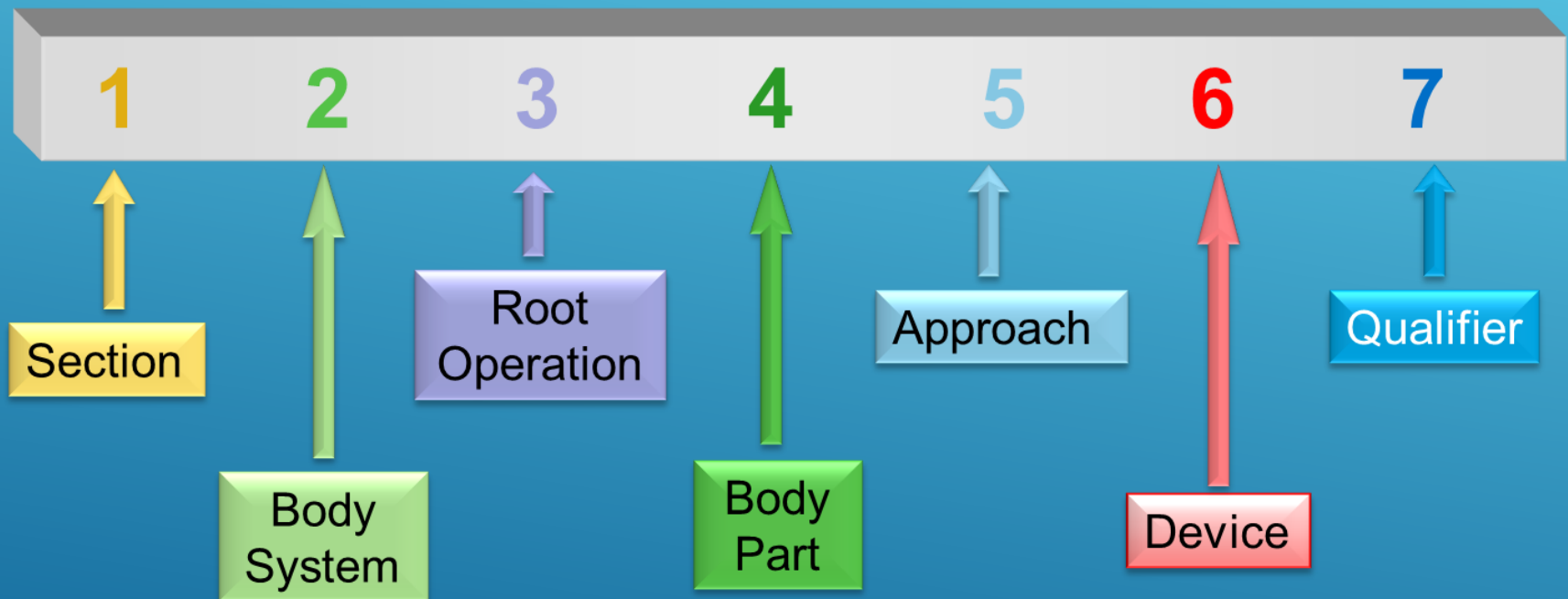
ICD-10-PCS SYSTEM STRUCTURE

16 SECTIONS

- ▶ Medical and Surgical
- ▶ Obstetrics
- ▶ Placement
- ▶ Administration
- ▶ Measurement and Monitoring
- ▶ Extracorporeal Assistance and Performance
- ▶ Extracorporeal Therapies
- ▶ Osteopathic
- ▶ Other Procedures
- ▶ Chiropractic
- ▶ Imaging
- ▶ Nuclear Medicine
- ▶ Radiation Oncology
- ▶ Physical Rehabilitation and Diagnostic Audiology
- ▶ Mental Health
- ▶ Substance Abuse Treatment

ICD-10-PCS

INTERNATIONAL CLASSIFICATION OF DISEASES, 10TH REVISION, PROCEDURE CODING SYSTEM



ICD-10-PCS ROOT OPERATIONS (3RD CHARACTER)

ICD-9-CM Procedure Term	ICD-10-PCS Procedure Term
Amputation	Detachment
Amniocentesis	Drainage
Cystoscopy	Inspection
Closed Reduction	Reposition
Debridement	Excision, Extirpation, Extraction
<u>Total</u> Mastectomy	Resection
<u>Subtotal</u> Mastectomy	Excision
Tracheostomy	Bypass
Cesarean Section	Extraction of Products of Conception
Incision	No ICD-10-PCS term

IMPACT ON PUBLIC HEALTH

PUBLIC HEALTH TRANSITION TO ICD-10-CM AND ICD-10-PCS

- ❑ On July 31, 2014, the U.S. Department of Health and Human Services issued a final rule finalizing October 1, 2015 as the new compliance date to transition to the ICD-10 code sets. The rule also requires HIPAA covered entities to continue to use ICD-9-CM through September 30, 2015.

YOU AREN'T A HIPAA-COVERED ENTITY... BUT ARE YOU AFFECTED?

- ✓ Do you code using ICD-9-CM as part of your organization/program activities?
- ✓ Do you receive ICD-9-CM coded data?
- ✓ Do you receive verbatim diagnosis/procedure information that you code?
- ✓ Do you have a contractor that codes your data?

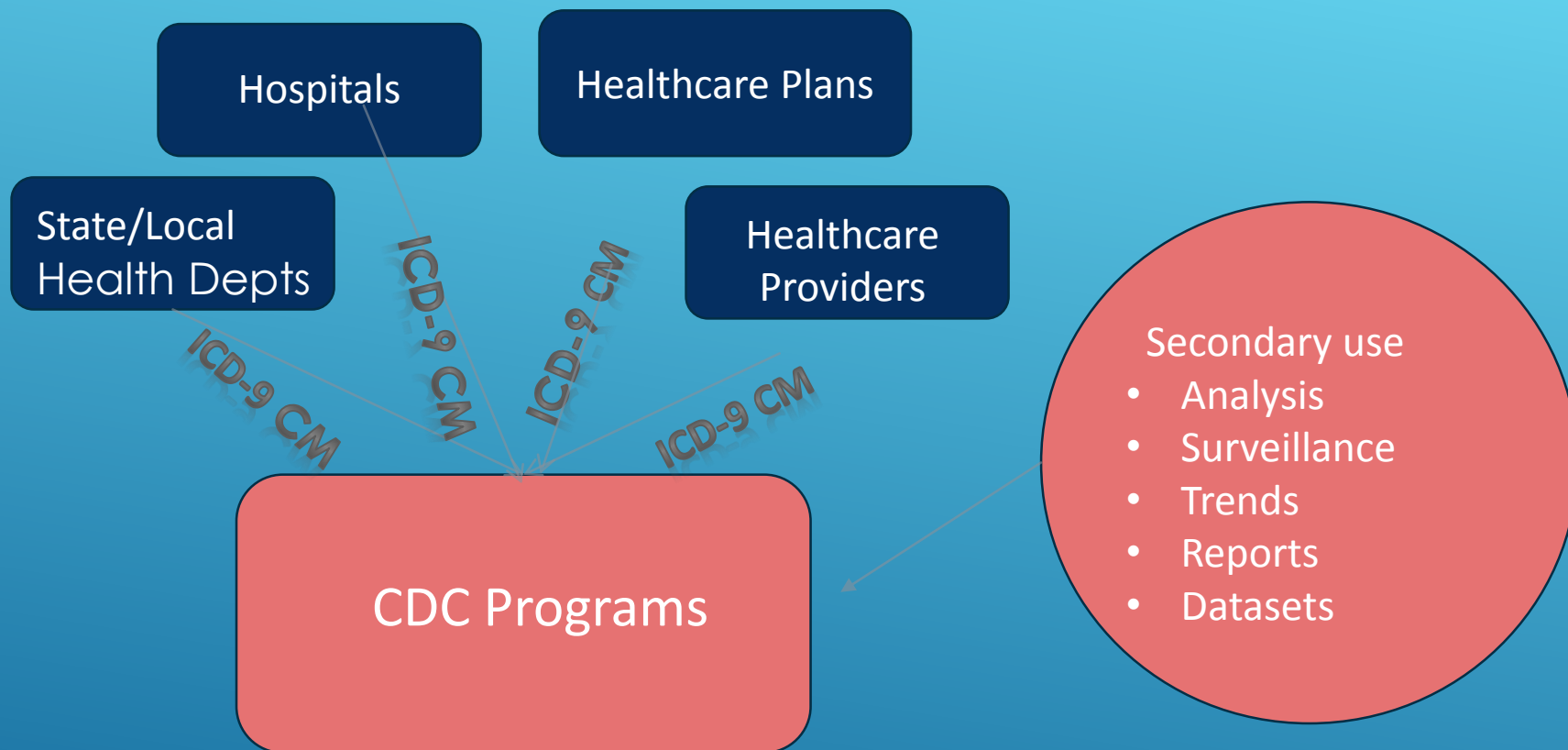
REALITY OF IMPACT FOR PUBLIC HEALTH

- ❑ Transition will change the way public health defines, identifies, analyzes and reports on many health conditions and health care services
- ❑ There will be some level of data discontinuity for analyses over time/across code sets
- ❑ No single best approach to conducting trend analyses; each program/project team will need to determine own approach

WHAT TYPE OF DATA RECEIVED

- ❑ Already coded in ICD
- ❑ Self-reported diagnosis information (coded by medical coder, etc.)
- ❑ Abstracted from narrative
- ❑ Complete clinical narrative (medical record)

SECONDARY USE OF ICD-9-CM CODES AT CDC



DECISIONS, DECISIONS, DECISIONS...

- ❑ Many decisions to be made regarding transition; majority will be unique to individual organizations, programs and/or projects
 - Mapping between code sets (or not) for surveillance, research, statistical analyses, and evaluation of public health and/or health care services
 - Provisioning of public use data sets and education of users
 - Stakeholders that fund supplements to surveys
- ❑ Coordinated (public health) efforts: external cause of injury matrix and injury diagnosis matrix for injury reporting, reportable neoplasms (cancer registries)

DECISION, DECISIONS, DECISIONS (CONT'D)

- ❑ **There are new concepts in ICD-10-CM that have no predecessor in ICD-9-CM (Glasgow Coma Scale, under dosing, blood type, Type A personality)**
 - Can't track conditions that were not available in ICD-9-CM
- ❑ **Some ICD-9-CM codes do not have a translation option in ICD-10-CM (ICD-9-CM code E927.3; V codes largely excluded)**
 - Accept the loss and do nothing
 - Use an alternative translation (V03.6 translates to Z23 Encounter for immunization)
 - Propose to add codes into ICD-10-CM/PCS thru the ICD-10-CM Coordination and Maintenance (C&M) process

MACRO LEVEL POSSIBLE STRATEGIES FOR ALREADY CODED DATA

- ❑ Map all ICD-9-CM codes into ICD-10-CM/PCS
- ❑ Start over and define conditions from beginning in ICD-10-CM/PCS
- ❑ Map a few key conditions/events into ICD-10-CM/PCS; start over with the rest
- ❑ Map all ICD-10-CM/PCS codes back into ICD-9-CM

MACRO LEVEL POSSIBLE STRATEGIES FOR ALREADY CODED DATA (CONT'D)

- ❑ The identification or definition of “cases” has changed
- ❑ You may be identifying more or fewer individuals with condition/s of interest depending on in/exclusion of certain codes/code sets (TIA included in stroke)
- ❑ For some programs, arriving at final ICD-10-CM/PCS codes will require extensive collaboration with external partners

OTHER TRANSITION-RELATED ISSUES

HOW ARE YOU AFFECTED?

- Training
- IT/Data systems
- Analysis and Reporting
 - Legacy data

TRAINING ISSUES

- ICD-10-CM/PCS basics for secondary users
 - Epidemiologists
 - Statisticians
 - IT Personnel
 - End Users
- Contract coding staff
 - Assessing readiness
 - Differences between ICD-9-CM and ICD-10-CM code sets
 - Changes in terminology
 - Structural differences

IT/DATA PROCESSING ISSUES

- ▶ Redesign to accommodate alphanumeric codes 7 character codes, code title lengths
- ▶ Re-writing or writing new programs
- ▶ System logic & edits
- ▶ System storage capacity
 - ▶ Historical file storage
 - ▶ New file storage
 - ▶ Backup file storage
- ▶ New computer edits
 - ▶ Consistency checks
 - ▶ Edits: Age, Sex
- ▶ Testing /validating systems use of new code sets
- ▶ For 2015
 - ▶ 9 months of ICD-9-CM coded data
 - ▶ 3 months of ICD-10-CM coded data

ANALYSIS AND REPORTING ISSUES

- ▶ Trending
- ▶ Loss of information
- ▶ Very detailed information
- ▶ Data aggregation
- ▶ Data collection
- ▶ Redesign of publications and tables

GENERAL EQUIVALENCE MAPS (GEMS)

WHAT ARE GEMS?

- ▶ Used to facilitate linking between the codes in ICD-9-CM and ICD-10 code sets
- ▶ The GEMs can also be used for general reference
- ▶ The GEMs can be used to assist in
 - ▶ Converting ICD-9 based systems or applications to ICD-10 based applications
 - ▶ *For more information on converting ICD-9 based systems and applications to ICD-10, see the MS-DRG conversion project report at:*
http://www.cms.gov/ICD10/17_ICD10_MS_DRG_Conversion_Project.asp
 - ▶ Creating one-to-one backwards mappings (also known as a crosswalk) from incoming ICD-10 based records to ICD-9 based legacy systems
 - ▶ Migrating ICD-9-CM historical data to a ICD-10 based representation for comparable longitudinal analysis
 - ▶ Creating ICD-10 based test records from a repository of ICD-9 based test records

WHAT GEMS AREN'T ?

- ▶ GEMs are not crosswalks
 - ▶ The GEMs are more complex than a simple one-to-one crosswalk, but ultimately more useful. They reflect the relative complexity of the code sets clearly so that it can be managed effectively, rather than masking it in an oversimplified way.
 - ▶ They are reference mappings, to help the user navigate the complexity of translating meaning from one code set to the other.
- ▶ GEMs are not a substitute for learning how to use ICD-10-CM and ICD-10-PCS

ICD-10-CM RESOURCES

Public Health Transition to ICD-10-CM/PCS

http://www.cdc.gov/nchs/icd/icd10cm_pcs.htm

CDC National Center for Health Statistics International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)

<http://www.cdc.gov/nchs/icd/icd10cm.htm>

<http://www.cdc.gov/nchs/icd/icd10cm.htm#10update>

- ICD-10-CM files (PDF and XML formats)
- ICD-10-CM Coding Guidelines
- Codes and descriptions (short and long descriptors)
- Addenda
- General Equivalence Maps with Guide and Technical documents

CMS ICD-10

<https://www.cms.gov/Medicare/Coding/ICD10/index.html>



QUESTIONS

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