# ICD-9-CM Coding Advice for Healthcare Encounters in Hurricane Aftermath Document created on September 15, 2005.

#### Introduction

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 Health Information Management Association, American Hospital Association, Centers for Medicare & Medicaid Services, and National Center for Health Statistics.

## Use of E Codes

An External Cause code (E code) should be assigned to identify the cause of an injury(ies) incurred as a result of the hurricane. The use of E codes is supplemental to the application of ICD-9-CM diagnosis codes. E codes are never to be recorded as principal diagnoses (first-listed in non-inpatient setting). The appropriate injury code should be sequenced before any E codes.

The use of E codes is limited to injuries, adverse effects, and poisonings. They should not be assigned for encounters to treat hurricane victims' medical conditions when no injury, adverse effect, or poisoning is involved.

E codes should be assigned for **each** encounter for care and treatment of the injury. **Note** that this advice is an exception to the *ICD-9-CM Official Guidelines for Coding and Reporting* and applies only to healthcare encounters resulting from a hurricane. E codes may be assigned in all healthcare settings. For the purpose of capturing complete and accurate ICD-9-CM data in the aftermath of the hurricane, a healthcare setting should be considered any location where medical care is provided by licensed healthcare professionals.

## Sequencing of E Codes

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

For injuries incurred as a direct result of the hurricane, assign the appropriate code(s) for the injuries, followed by code E908.0, Hurricane, and any other applicable E codes. Code E908.0 should be assigned when an injury is incurred as a result of flooding caused by a levee breaking. Code E909.3, Collapse of dam or man-made structure, should not be assigned when the cause is a hurricane. Code E909.3 is limited to collapses of manmade structures due to earth surface movements, and tidal surges caused by storm action are excluded from category E909.

#### Other E 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 or a police officer being injured while attempting to stop looting, assign the appropriate E code(s) to describe the cause of the injury, but do not assign code E908.0. 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 E908.0, as well as any other applicable E codes.

In addition to code E908.0, some other possible applicable E codes include:

- E900.0 Excessive heat due to weather conditions
- E904.0 Abandonment or neglect of infant and helpless persons
- E904.1 Lack of food
- E904.2 Lack of water
- E906.0 Dog bite

## Use of V Codes

V codes may be assigned as appropriate to further explain the reasons for presenting for healthcare services, including transfers between healthcare facilities. The *ICD-9-CM Official Guidelines for Coding and Reporting* identify which codes may be assigned as principal or first-listed diagnosis only, secondary diagnoses only, or principal/first-listed or secondary (depending on the circumstances). Some possible applicable V codes include:

- V20.1, Other healthy infant or child receiving care
- V46.12, Encounter for respirator dependence during power failure
- V60.0 Lack of housing
- V60.1, Inadequate housing
- V60.2, Inadequate material resources
- V62.89, Other psychological or physical stress NEC
- V63.2, Person awaiting admission to adequate facility elsewhere
- V63.8 Other specified reasons for unavailability of medical facilities

The E and V 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 E and V codes.

See the *ICD-9-CM Official Guidelines for Coding and Reporting* for further guidance regarding the use of ICD-9-CM diagnosis codes, including E and V codes. These official guidelines can be accessed at the following link: <a href="http://www.cdc.gov/nchs/data/icd9/icdguide.pdf">http://www.cdc.gov/nchs/data/icd9/icdguide.pdf</a>.

For additional information about ICD-9-CM please use the following link: <a href="http://www.cdc.gov/nchs/icd9.htm">http://www.cdc.gov/nchs/icd9.htm</a>