



# ICD-10



## Clinical Modification/ Procedure Coding System

# The Next Generation of Coding

**T**he International Classification of Diseases, 10th Edition, Clinical Modification/Procedure Coding System (ICD-10-CM/PCS) would enhance accurate payment for services rendered and facilitate evaluation of medical processes and outcomes. A number of other countries have already moved to ICD-10, including:

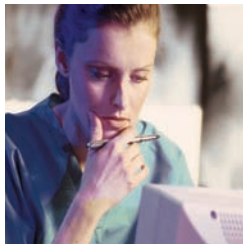
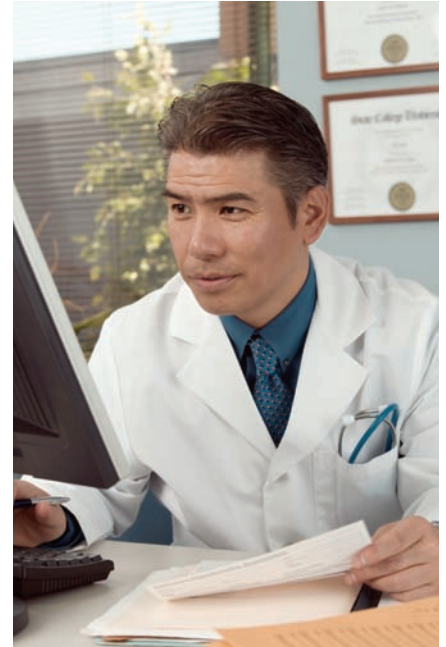
- United Kingdom (1995);
- France (1997);
- Australia (1998);
- Germany (2000); and
- Canada (2001).

The new classification system provides significant improvements through greater detailed information and the ability to expand in order to capture additional advancements in clinical medicine.

ICD-10-CM/PCS consists of two parts:

- **ICD-10-CM** – The diagnosis classification system developed by the Centers for Disease Control and Prevention for use in all U.S. health care treatment settings. Diagnosis coding under this system uses a different number of digits and some other changes, but the format is very much the same as ICD-9-CM; and
- **ICD-10-PCS** – The procedure classification system developed by the Centers for Medicare & Medicaid Services (CMS) for use in the U.S. for inpatient hospital settings ONLY. The new procedure coding system uses 7 alpha or numeric digits while the ICD-9-CM coding system uses 3 or 4 numeric digits.

The current system, International Classification of Diseases, 9th Edition, Clinical Modification (ICD-9-CM), does not provide the necessary detail on either patients' medical conditions or on procedures performed on hospitalized patients. ICD-9-CM is 30 years old, has outdated and obsolete terminology, uses outdated codes that produce inaccurate and limited data, and is inconsistent with current medical practice. It cannot accurately describe the diagnoses and inpatient procedures of care delivered in the 21st century.



## ICD-10-CM/PCS:

- Incorporates much greater specificity and clinical information, which results in:
  - Improved ability to measure health care services;
  - Increased sensitivity when refining grouping and reimbursement methodologies;
  - Enhanced ability to conduct public health surveillance; and
  - Decreased need to include supporting documentation with claims;
- Includes updated medical terminology and classification of diseases;
- Provides codes to allow comparison of mortality and morbidity data; and
- Provides better data for:
  - Measuring care furnished to patients;
  - Designing payment systems;
  - Processing claims;
  - Making clinical decisions;
  - Tracking public health;
  - Identifying fraud and abuse; and
  - Conducting research.

Below are examples that show where ICD-10-CM/PCS codes are more precise and provide better information.

### ICD-9-CM

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

1 code (996.1)

### ICD-10-CM

#### Mechanical complication of other vascular grafts

156 codes, including

- T82.310 – Breakdown (mechanical) of aortic (bifurcation) graft (replacement)
- T82.311 – Breakdown (mechanical) of carotid arterial graft (bypass)
- T82.312 – Breakdown (mechanical) of femoral arterial graft (bypass)
- T82.318 – Breakdown (mechanical) of other vascular grafts
- T82.319 – Breakdown (mechanical) of unspecified vascular grafts
- T82.320 – Displacement of aortic (bifurcation) graft (replacement)
- T82.321 – Displacement of carotid arterial graft (bypass)
- T82.322 – Displacement of femoral arterial graft (bypass)
- T82.328 – Displacement of other vascular grafts

### ICD-9-CM

#### Pressure ulcer codes

9 location codes (707.00 – 707.09)

Show broad location, but not depth (stage)

### ICD-10-CM

#### Pressure ulcer codes

125 codes

Show more specific location as well as depth, including

- L89131 – Pressure ulcer of right lower back, stage I
- L89132 – Pressure ulcer of right lower back, stage II
- L89133 – Pressure ulcer of right lower back, stage III
- L89134 – Pressure ulcer of right lower back, stage IV
- L89139 – Pressure ulcer of right lower back, unspecified stage
- L89141 – Pressure ulcer of left lower back, stage I
- L89142 – Pressure ulcer of left lower back, stage II
- L89143 – Pressure ulcer of left lower back, stage III
- L89144 – Pressure ulcer of left lower back, stage IV
- L89149 – Pressure ulcer of left lower back, unspecified stage
- L89151 – Pressure ulcer of sacral region, stage I
- L89152 – Pressure ulcer of sacral region, stage II

### ICD-9-CM

#### Angioplasty

1 code (39.50)

### ICD-10-PCS

#### Angioplasty codes

1,170 codes

Specifying body part, approach, and device, including

- 047K04Z – Dilation of right femoral artery with drug-eluting intraluminal device, open approach
- 047K0DZ – Dilation of right femoral artery with intraluminal device, open approach
- 047K0ZZ – Dilation of right femoral artery, open approach
- 047K24Z – Dilation of right femoral artery with drug-eluting intraluminal device, open endoscopic approach
- 047K2DZ – Dilation of right femoral artery with intraluminal device, open endoscopic approach



## Structural Differences Between the Two Coding Systems >>>>

### ICD-9-CM Diagnoses Codes:

- 3 – 5 digits;
- First digit is alpha (E or V) or numeric; and
- Digits 2 – 5 are numeric.

Examples:

- 496 – Chronic airway obstruction not elsewhere classified (NEC);
- 511.9 – Unspecified pleural effusion; and
- V02.61 – Hepatitis B carrier.

### ICD-10-CM Diagnoses Codes:

- 3 – 7 digits;
- Digit 1 is alpha;
- Digits 2 and 3 are numeric; and
- Digits 4 – 7 are alpha or numeric (alpha digits are not case sensitive).

Examples:

- A66 – Yaws;
- A69.21 – Meningitis due to Lyme disease; and
- S52.131a – Displaced fracture of neck of right radius, initial encounter for closed fracture.

### ICD-9-CM Procedure Codes:

- 3 – 4 digits; and
- All digits numeric.

Examples:

- 43.5 – Partial gastrectomy with anastomosis to esophagus; and
- 44.42 – Suture of duodenal ulcer site.

### ICD-10-PCS Procedure Codes:

- 7 digits; and
- Each either alpha or numeric (alpha digits are not case sensitive and letters O and I are not used to avoid confusion with numbers 0 and 1).

Examples:

- 0FB03ZX – Excision of liver, percutaneous approach, diagnostic; and
- 0DQ107Z – Repair, esophagus, upper, open with autograft.

## Implementation Planning Recommendations >>>>>>

Organizations and facilities can plan for ICD-10-CM/PCS implementation by developing an organizational plan that includes:

- Situational Analysis
  - Identify stakeholders;
  - Assess impact;
  - Formulate strategies and identify goals;
  - Develop education/training plans for employees at all levels;
  - Develop information systems/technology systems change implementation plan that includes testing and “go live” dates; and
  - Plan for documentation changes;
- Strategic Implementation/Organizing
  - Acquire resources to implement the plan;
  - Evaluate financial impact on organization; and
- Planning for Strategic Control
  - Develop objectives;
  - Plan measurement tools;
  - Plan evaluation strategies; and
  - Plan action steps for implementation.

Many professional and private sector organizations and businesses have resources available that may help with ICD-10-CM/PCS implementation planning.

## Continued Use of Current Procedural Terminology >>>>

ICD-10-CM/PCS would not affect physicians, outpatient facilities, and hospital outpatient departments’ usage of Current Procedural Terminology (CPT) codes on Medicare fee-for-service claims as CPT would continue.

### HELPFUL WEB SITES

General ICD-10 Information  
<http://www.cms.hhs.gov/ICD10>

ICD-10-PCS Coding System, Mappings, and Related Training Manual  
[http://www.cms.hhs.gov/ICD10/02\\_ICD-10PCS.asp](http://www.cms.hhs.gov/ICD10/02_ICD-10PCS.asp)

ICD-10-CM Coding System, Mappings, and Guidelines  
<http://www.cdc.gov/nchs/about/otheract/icd9/abtcd10.htm>  
[http://www.cms.hhs.gov/ICD10/03\\_ICD-10-CM.asp](http://www.cms.hhs.gov/ICD10/03_ICD-10-CM.asp)

Report on Use of Health Information Technology to Enhance and Expand Health Care Anti-Fraud Activities  
<http://www.hhs.gov/healthit/documents/ReportOnTheUse.pdf>

CMS-0013-P—HIPAA Administrative Simplification: Modification to Medical Data Code Set Standards to Adopt ICD-10-CM and ICD-10-PCS  
<http://edocket.access.gpo.gov/2008/pdf/E8-19298.pdf>

Transactions and Code Sets Regulations  
[http://www.cms.hhs.gov/TransactionCodeSetsStandards/02\\_TransactionsandCodeSetsRegulations.asp](http://www.cms.hhs.gov/TransactionCodeSetsStandards/02_TransactionsandCodeSetsRegulations.asp)

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The Medicare Learning Network (MLN) is the brand name for official CMS educational products and information for Medicare fee-for-service providers. For additional information visit the Medicare Learning Network’s web page at <http://www.cms.hhs.gov/MLNGenInfo> on the CMS website.

ICD-9-CM Notice

The International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) is published by the United States Government. A CD-ROM, which may be purchased through the Government Printing Office, is the only official Federal government version of the ICD-9-CM. ICD-9-CM is an official Health Insurance Portability and Accountability Act standard.

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