ICD-10 Diagnosis Coding for Obstetric Care Complications

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ACOG Committee on Health Economics and Coding
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Disclaimer

- ICD-10 codes included in this presentation are not valid prior to the implementation date
- ICD-10 codes included in this presentation may be revised prior to implementation
- ICD-9 codes should continue to be used until transition date to ICD-10

Learning Objectives

- Upon completion of the presentation, the participants will be able to:
  - Define the ICD-10 guidelines for reporting obstetrical complications
  - Recognize when the 7th digit code extensions are required
  - Explain how to report multiple obstetrical conditions and complications
  - Identify specific codes for reporting common obstetrical complications
Why The Change

• ICD-9-CM: Out of date- Out of space!
  – ICD-9: 30 years old
• ICD-10: International standard for a number of years
  – U.S. only country in WHO not using ICD-10
• ICD-10: Important to Health Information Technology (HIT)
  – Change needed to fully implement HIT
  – Integral to electronic health records

Why The Change

• Updates current terminology and specificity
  • Improved clinical specificity means improved patient safety
• Facilitates Value-Based Purchasing
• Improves public health tracking
  • Specifies reasons for patient non-compliance
• Allows international disease surveillance
ICD-10 – Current Status

• Opposition resulted in delay in implementation
• Originally scheduled for October 1, 2011… then for October 1, 2013…
  • HHS announced a delay due to number of deadlines/demands facing physician practices
• Current implementation date: October 1, 2014

Key Differences:
ICD-9-CM to ICD-10-CM

• ICD-10-CM: Alphanumeric codes with up to 7 characters
  – ICD-9-CM: 3-5 characters in length (mostly numeric)
• ICD-10-CM: Full code titles vs. references to common 4th-5th digits
  – Addition of 6th characters for some
  – Addition of code extensions (7th digit)
  – Addition of dummy placeholder “X”
Structure and Format of ICD-10-CM

• First character is always alphabetic letter
  – Chapter 14 Diseases of the GU system (N00-N99)
  – Chapter 15 Pregnancy, Childbirth and Puerperium (O00-O9A)
• Second character is always a number
• Characters 3-7 alpha or numeric
  – O9A.311: Physical abuse complicating pregnancy, first trimester

Structure and Format of ICD-10-CM

• Code Format: XXX.XXX X
  – XXX = Category
  – XXX = Etiology, anatomic site, severity
  – X = Extension
• Placeholder Character X
  – Used with certain codes for potential future expansion
  – Placeholder x must be used to fill empty characters for codes that require 7th character but are not 6 characters long
ICD-10-CM
Key Chapters for Obstetrical Care

• **Chapter 21**: Factors Influencing Health Status and Contact with Health Services
  – Supervision of normal pregnancy (Z34)
  – Encounter for antenatal screening of mother (Z36)
  – Weeks of gestation (Z3A)
  – Outcome of Delivery (Z37)
  – Maternal postpartum care and examination (Z39)

ICD-10-CM
Key Chapters for Obstetrical Care

• **Chapter 15**: Pregnancy, Childbirth, and the Puerperium (Code Series - O00-O9A)
  – Used for conditions related to or aggravated by the pregnancy, childbirth, or by the puerperium
  – Used only on maternal record
  – Excludes 1: Supervision of normal pregnancy Z34.-
    • Can *never* be reported with Chapter 15 code
Selection of Principal or First-Listed Diagnosis

- Prenatal visits for high risk patients
  - O09 Supervision of high risk pregnancy
  - Chapter 15 diagnosis secondary as appropriate
- Episode without delivery
  - Principal complication(s) requiring encounter
  - No sequencing priority
- Episode with delivery
  - Main circumstance or complication of the delivery

Selection of Principal or First-Listed Diagnosis

- Episode with cesarean delivery
  - Condition established after study responsible for admission is principal diagnosis
  - If admitted with condition that resulted in cesarean, that condition is principal diagnosis
  - If reason for admission was unrelated to condition resulting in cesarean, the reason for the admission is principal diagnosis
Chapter 15 “Blocks”

- **O00-O08** Pregnancy with abortive outcome
- **O09-O09** Supervision of high risk pregnancy
- **O10-O16** Edema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium
- **O20-O29** Other maternal disorders predominantly related to pregnancy

Chapter 15 “Blocks”

- **O30-O48** Maternal care related to the fetus and amniotic cavity and possible delivery problems
- **O60-O77** Complications of labor and delivery
- **O80-O82** Encounter for delivery
- **O85-O92** Complications predominantly related to the puerperium
- **O94-O9A** Other obstetric conditions, not elsewhere classified
Chapter 15: Trimesters

- Final character indicating trimester present for majority of codes
  - If no trimester designation, then occurs only in specific trimester or concept not applicable
  - Some codes have characters for only certain trimesters if condition exists in more than one but not all trimesters
  - Unspecified trimester present but should be rarely used; not present in record and info can’t be obtained

Chapter 15: Trimesters

- Trimester counted from first day of LMP
- Trimester based on the trimester documented (trimester or number of weeks) for current encounter
  - Applies to pre-existing conditions and those that develop during or are due to pregnancy
- Delivery during current admission coded using “in childbirth” option if present
Chapter 15: Trimesters

• 1\textsuperscript{st} trimester: less than 14 weeks 0 days
• 2\textsuperscript{nd} trimester: 14 weeks 0 days to less than 28 weeks 0 days
• 3\textsuperscript{rd} trimester: 28 weeks 0 days until delivery
• Additional code from category Z3A (weeks of gestation) should be reported to identify specific week of pregnancy
  – Z3A.12= 12 weeks gestation
  – Z3A.28= 28 weeks gestation

Chapter 15: Trimesters

• Inpatient admissions over more than one trimester
  – Trimester for antepartum complication based on when complication developed- not discharge
  – Trimester for conditions developing prior to current admission/encounter or pre-existing condition is trimester at the time of admission
Chapter 15: 7th Character

• Certain codes require 7th character to identify multiple gestation affected by condition
  – 0: Not applicable (single gestations) or unspecified
  – 1-5: Fetus number
  – 9: Other fetus
• Must also report code from O30 category (multiple gestations) which include placenta status (Monoamniotic/monochorionic, etc.)

Chapter 15: 7th Character

• 7th character 0 assigned:
  – Single gestation
  – Documentation insufficient to determine and unable to obtain clarification
  – Not clinically possible to determine which fetus is affected
• If condition affects more than one fetus, then code must be assigned for each fetus affected
Chapter 15: Categories requiring 7th Character

• O31: Complications specific to multiple gestations
  – O31.11x2: Continuing pregnancy after spontaneous abortion, first trimester, fetus 2

• O32: Maternal care for malpresentation of fetus
  – O32.1xx0 Breech presentation, single fetus

Chapter 15: Categories requiring 7th Character

• O33.3-O33.7: Maternal care for disproportion
  • O33.5xx1 Disproportion due to unusually large fetus, fetus 1
  – O35: Maternal care for known or suspected fetal abnormality and damage
    • O35.1xx2 Maternal care for (suspected) chromosomal abnormality in fetus
  – O36: Maternal care for other fetal problems
    • O36.5123 Maternal care for known or suspected placental insufficiency, 2nd trimester, fetus 3
Chapter 15: Categories requiring 7th Character

• **O40: Polyhydramnios**
  – O40.3xx0 Polyhydramnios, 3rd trimester, single fetus

• **O41: Other disorders of amniotic fluid and membranes**
  – O41.02x1 Oligohydramnios, 2nd trimester, fetus 1
  – O41.02x2 Oligohydramnios, 2nd trimester, fetus 2

Chapter 15: Categories requiring 7th Character

• **O60.1: Preterm labor with preterm delivery**
  – O60.13x1 Preterm labor second trimester with preterm delivery third trimester, fetus 1
  – O60.13x2 Preterm labor second trimester with preterm delivery third trimester, fetus 2

• **O60.2: Term delivery with preterm labor**
  – O60.23x0 Term delivery with preterm labor, third trimester, single fetus
Chapter 15: Categories requiring 7th Character

- **O64: Obstructed labor due to malposition and malpresentation of fetus**
  - O64.2xx1 Obstructed labor due to face presentation, fetus 1
- **O69: Labor and delivery complicated by umbilical cord complication**
  - O69.0xx0 Labor and delivery complicated by prolapse of cord, single fetus

Chapter 15: Pre-existing Conditions vs. Conditions Due to Pregnancy

- Certain categories distinguish between conditions that *existed prior* to pregnancy and those that are *direct results* of pregnancy
- Important to determine for proper code assignment
- Categories that do not distinguish between pre-existing and pregnancy-related conditions can be used for either
Chapter 15: Pre-existing Conditions vs. Conditions Due to Pregnancy

• If a postpartum complication develops during the delivery encounter and a specific code for the postpartum complication exists, it can be reported with codes for the complications of pregnancy
  – O70.2 Third degree perineal laceration during delivery
  – O21.1 Hyperemesis with metabolic disturbance

Chapter 15: Pre-existing Conditions vs. Conditions Due to Pregnancy

• Pre-existing hypertension complicating pregnancy, childbirth, and puerperium (O10)
  – Includes codes for hypertensive heart and hypertensive chronic kidney disease
  – Must add additional code to specify type of heart or kidney disease

• O10.111: Pre-existing hypertensive heart disease complicating pregnancy, first trimester PLUS I11.9: Hypertensive heart disease without heart failure
Chapter 15: Pre-existing Conditions vs. Conditions Due to Pregnancy

• **O13-O16: Gestational hypertension**
  – O13: Gestational HTN without significant proteinuria
  – O14: Pre-eclampsia
  – O15: Eclampsia
  – O16: Unspecified maternal HTN
  – Require trimester designation

• **O13.2 Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester**

Chapter 15: Pre-existing Conditions vs. Conditions Due to Pregnancy

• **O12 Gestational edema and proteinuria without HTN**
  – O12.0 Gestational edema
  – O12.1 Gestational proteinuria
  – O12.2 Gestational edema and proteinuria

• **O12.03 Gestational edema, third trimester**
Chapter 15: Diabetes in Pregnancy

- Condition distinguished between pre-existing and gestational diabetes
- Pre-existing diabetes reported with code from category O24
  - O24.0 Pre-existing Type 1
  - O24.1 Pre-existing Type 2
  - O24.3 Unspecified

Chapter 15: Diabetes in Pregnancy: Pre-Existing

- A 5th character in each subcategory specifies:
  - In pregnancy
  - In childbirth
  - In the puerperium
- A 6th character specifies trimester
Chapter 15: Diabetes in Pregnancy: Pre-Existing

- Code from O24 reported first, followed by the appropriate diabetes code (E08-E13)
  - E10.9 Type 1 diabetes mellitus without complications
  - E10.21 Type 1 diabetes mellitus with diabetic nephropathy
- Code Z79.4 Long term (current) use of insulin should also be assigned as appropriate

Chapter 15: Diabetes in Pregnancy: Gestational

- Gestational Diabetes are coded in sub-category O24.4
- No other code from O24 category should be reported with a code from O24.4 sub-category
- Code Z79.4 Long term insulin use should NOT be reported with O24.4
- Abnormal glucose tolerance in pregnancy is reported using a code from O99.81 series (in pregnancy, childbirth, puerperium)
Chapter 15: Diabetes in Pregnancy - Gestational

• A 5th character in O24.4 sub-category specifies:
  – In pregnancy
  – In childbirth
  – In the puerperium
• A 6th character specifies
  • Diet controlled vs. insulin controlled
  • Patients treated with both are coded only as insulin controlled

Chapter 15: Diabetes in Pregnancy

• O24.414 Gestational diabetes mellitus in pregnancy, insulin controlled
• O24.111 Pre-existing diabetes mellitus, type 2, in pregnancy, first trimester
• O24.02 Pre-existing diabetes mellitus, type 1, in childbirth
  – Plus Z79.4 (insulin use) as appropriate
Chapter 15: Fetal Conditions Affecting Management of Mother (O35-O36)

• Only reported when condition responsible for modifying management of mother
  – Additional diagnostic tests
  – Additional observation
  – Other special care

• Fact that fetal condition exists does not justify assigning code to mother’s record

• Reported:
  – O36.8130 Decreased fetal movement, 3rd trimester, single fetus (resulting in NST)

• Not reported:
  – O35.2xx2 Maternal care for (suspected) hereditary disease in fetus 2 (no change in management of mother)
Chapter 15: Delivery Codes

• O80 Full term uncomplicated delivery
  – Full term
  – Single healthy infant
  – No complications during antepartum, delivery, or postpartum during delivery episode
  – May be used if complication during pregnancy that is not present at time of admission for delivery
  – Cannot be used with any Chapter 15 code

Chapter 15: Complications of Labor and Delivery O60-O77

• O60 Preterm labor
  • Preterm labor with preterm delivery
  • Term delivery with preterm labor
• O64-O66 Obstructed labor
  • Malposition and malpresentation of fetus
  • Maternal pelvic abnormality
  • Other obstructed labor
Chapter 15: Complications of Labor and Delivery O60-O77

- O67 Labor and delivery complicated by intrapartum hemorrhage, not elsewhere classified
  - Intrapartum hemorrhage with coagulation defect
  - Other Intrapartum hemorrhage
  - Unspecified Intrapartum hemorrhage

Chapter 15: Complications of Labor and Delivery O60-O77

- O69 Labor and delivery complicated by umbilical cord complications
  - Prolapse of cord
  - Cord around neck with compression
    - Distinct code for without compression
  - Other cord entanglement with compression
    - Distinct code for without compression
  - Short cord
  - Additional codes for other cord complications
Chapter 15: Complications of Labor and Delivery O60-O77

• O70 Perineal laceration during delivery
  – Distinguished by degree
• O72 Postpartum hemorrhage
  – Third-stage hemorrhage
  – Other immediate postpartum hemorrhage
  – Delayed and secondary postpartum hemorrhage
  – Postpartum coagulation defects

Chapter 15: Complications of Labor and Delivery O60-O77

• O73 Retained placenta without hemorrhage
• O76 Abnormality in fetal heart rate and rhythm complicating labor and delivery (single code)
• O77 Other fetal stress complicating labor and delivery
  – Meconium
  – Drug administration
  – Other evidence of fetal stress
Chapter 15: Postpartum And Peripartum Conditions

- *Postpartum* period begins immediately after delivery and continues for 6 weeks
- Postpartum complication is a complication occurring within the 6 week period
- *Peripartum* period is defined as last month of pregnancy to 5 months postpartum
- Chapter 15 codes can be used after peripartum or postpartum period if documentation supports condition as pregnancy related

Chapter 15: Sequela of Complications

- Single code O94 Sequelae of complication of pregnancy, childbirth, and the puerperium
- Used when an initial complication develops a sequela (secondary consequence of complication) requiring care or treatment
- May be used anytime after initial postpartum period
- O94 sequenced *after* the code describing the condition
Getting Ready

• Identify each process or system that uses ICD-9
  • Clinical documentation
  • Encounter forms
  • Practice management systems
  • EMR
  • Quality reporting
  • Public health reporting
  • Payer contracts

Getting Ready

For practice items;
• e.g. encounter forms, clinical documentation, etc
  – Determine how and when you will update to ICD-10

For Vendor items:
• e.g. EMR, Practice Management Systems, Contracts
  – Determine how and when you will verify ICD-10 compliance
Getting Ready

• Identify most commonly reported ICD-9 codes
• Cross-walk to ICD-10 and identify:
  – Necessary clinical documentation changes
  – Necessary process changes (ex. ID of trimester)
  – Staff to assist with form changes, etc.

ICD-10 Resources

• CMS
  – http://www.cms.gov/ICD10
• NCHS (CDC)
• AHIMA
  – http://www.ahima.org/icd10/
• AAPC
  – http://www.aapc.com/icd-10/
Questions

Contact Information

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ACOG Resources

• Use ACOG’s coding reference materials to:
  – Enhance coding knowledge in Ob/Gyn
  – Appeal denied claims
  – Develop internal coding policies
  – Dispute insurance company policies
• Ob/Gyn CPT Coding Manual with CD Rom
• ICD-9-CM “Abridged” Diagnostic Coding in Ob/Gyn
• Frequently Asked Questions in Ob/Gyn Coding
• OB/GYN Quick Reference Guide
Order from: http://www.acog.org/bookstore/Coding_Resources_C56.cfm

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If you have questions…
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