# Banner Health Provider ICD-10 Education

# Diseases of the Nervous System

# Documentation Specificity

- **Laterality** – Right/left

- **Acuity** – severe, acute, chronic

- **Site** - lobe of lung; upper, mid, lower

- **Manifestations** – link to disease process:

  HTN with CKD

- **Episode of Care:**

  Initial

  Subsequent

  Sequela

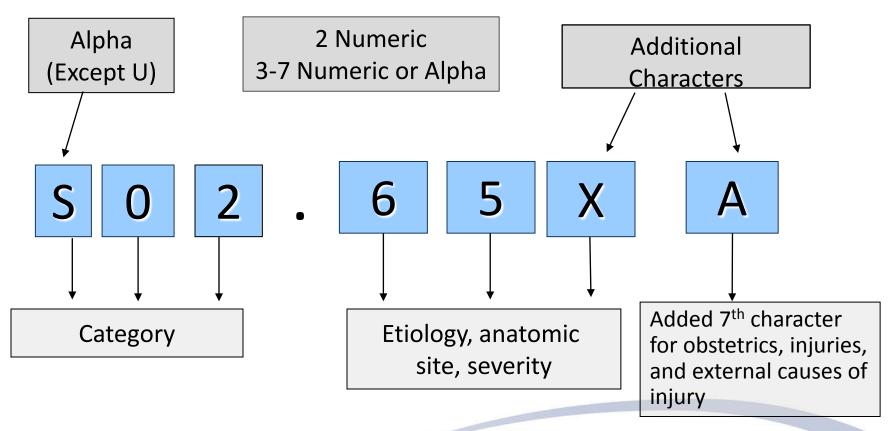# ICD-9-CM & ICD-10-CM COMPARISON

| ICD-9-CM | ICD-10-CM |
|---|---|
| Three to five characters | Three to seven characters |
| First digits is numeric but can be alpha (E or V) | First character is always alpha, (except U is not used) |
| 2-5 are numeric | Character 2 is always numeric: 3-7 can be alpha or numeric |
| Always at least three digits | Always at least three digits |
| Decimal Placed after the first three characters (With E codes, placed after the first four characters | Decimal placed after the first three characters |
| Alpha Characters – not case sensitive | Alpha characters are not case sensitive |

# ICD-10-CM CODE STRUCTURE

| Alpha (Except U) | | 2 Numeric 3-7 Numeric or Alpha | | | Additional Characters | |
|---|---|---|---|---|---|---|
| S | 0 | 2 . 6 | 5 | X | A | |

**Category**

**Etiology, anatomic site, severity**

**Added 7th character for obstetrics, injuries, and external causes of injury**

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# Place holder X

- Where a placeholder exists, the X must be used in order for the code to be considered a valid code.

- Certain ICD-10-CM categories have applicable 7th characters. The applicable 7th character is required for all codes within the category.

- The 7th character must always be the 7th character in the data field.

- Codes that require a 7th character but no 6th, a placeholder X must be used to fill in the empty 6th place character.
  - Fall down Escalator, initial encounter
    - W100XXA

# NEC and NOS

- NEC "Not elsewhere classifiable"
  - Used when no specific code is available to represent the condition

- NOS "Not otherwise specified"
  - Used when there isn't enough documentation to assign a more specific code

# Excludes Notes

The ICD-10-CM has two types of excludes notes:

Excludes1

- "NOT CODED HERE" - indicates that the code excluded should **never** be used at the same time as the code above the Excludes1 note.

- Indicates that two conditions **cannot** occur together, such as a congenital form vs an acquired form of the same condition.

Excludes2

- "NOT INCLUDED HERE" – Indicates that a patient may have both conditions at the same time. Indicates it is **acceptable** to **report both** the codes together, when appropriate.

# Inclusion Notes

Inclusion notes contain terms that are the
condition for which that code number is to be used.

The terms may be:

- Synonyms of the code title, or
- in the case of "other specified" codes, the terms are a list of various conditions assigned to that code.
- The inclusion terms are **not** necessarily exhaustive.

# Seventh Characters A, D and S

- A - **initial** encounter:
  - patient is receiving active treatment for the condition

- D - **subsequent** encounter:
  - the patient has received active treatment for the condition and is receiving routine care for the condition during the healing or recovery phase

- S – **sequela**:
  - complications or conditions that arise as a direct result of a condition

# Code Also, Code First, Use Additional Code

- A "code also" note instructs that:
    - two codes may be required to fully describe a condition
    - this note does not provide sequencing direction.

- The "code first" and "use additional code" notes provide sequencing order of the codes.

# Place of Occurrence and Activity Codes

Regardless of the number of external cause codes assigned on a particular record, there should only be one place of occurrence Code and one activity code assigned to a record.

Y92, Place of occurrence of the external cause,
- Report once, at the initial encounter for treatment with only one code from Y92 category being recorded on the medical record.

Y93, Activity Code
- Report once, at the initial encounter for treatment with only one code from Y93 category being recorded on a medical record.

# Paralytic Conditions

G81.XX

- Hemiplegia and hemiparesis

G82.XX

- Paraplegia and quadriplegia

G83.XX

- Other paralytic syndromes

Used only when listed conditions are reported without further specification or are stated to be old or longstanding, with unspecified cause

# Paralytic Conditions

Affected side should be documented:

- Dominant or non-dominant

If not documented code selection is:

- Dominant side (default) for ambidextrous patients
  or right side is affected
- Non-dominant (default) for left side is affected

# Documentation Specificity of a CVA

If the patient has current cerebrovascular disease and deficits from an old cerebrovascular disease both conditions will be coded

- Document current and/or old CVA
- Document affected side

# Epilepsy and Recurrent Seizures- G40.XXX

Epilepsy terminology updated

- Localization-related idiopathic
- Generalized idiopathic
- Special epileptic syndromes

Provides specificity for

- Seizures of localized onset
- Complex partial seizures
- Intractable
- Status epilepticus

# Migraines

G43.XXX

- Migraine w/o aura
- Migraine w/ aura
- Hemiplegic migraine
- Persistent Migraine
- Intractable
- Not intractable

Note: The following terms are equivalent to intractable:

- Pharmacoresistent (pharmacologically resistant), treatment resistant,
- refractory (medically)
- poorly controlled

# Alzheimer's

- The etiology (Alzheimer's disease) is sequenced first

- The manifestation (i.e., dementia) is sequenced second

- The G30.X category states to use an additional code

# Chapter 18 Coma Scale

- Used with traumatic brain injury or sequelae of CVA
- May be used in any setting
- One from each subcategory (R40.21XX-R40.23XX) needed
- Seventh character indicates when recorded

| 0 | Unspecified time |
|---|---|
| 1 | In field (EMT or ambulance) |
| 2 | At arrival to ER |
| 3 | At hospital admission |
| 4 | 24 hours after admission |

Email questions to BHICD-10@bannerhealth.com