PART 3: ICD-10 Coding of Diseases and Conditions (2 Hours)
With Mario Fucinari DC, MCS-P
Certified Insurance Consultant
Certified Medical Compliance Specialist (MCS-P)
Presented by Foot Levelers

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About Dr. Mario Fucinari, DC, CCSP, MCS-P, MCS-I
- Graduate of Palmer College of Chiropractic - 1986
- Currently in Full Time Practice in Decatur, Illinois
- Certified Chiropractic Sports Physician (CCSP) – Logan College of Chiropractic
- Certified Insurance Consultant - Logan College of Chiropractic
- Certified Medical Compliance Specialist Physician – Medical Compliance Training 2007
- Post-graduate Faculty of Palmer College of Chiropractic, NYCC, Life West and Western States Chiropractic College
- National Speaker’s Bureau for NCMIC and Foot Levelers and many state associations
- Past President of Illinois Chiropractic Society (ICS) and
- Chairman, ICS Medicare Committee
- Member Medicare Carrier Advisory Committee
- ICS Chiropractor of the Year 2012
- Member of ACA and ICS

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ICD-10 Chapter 13: Rules for Diseases of the Musculoskeletal System and Connective Tissue (M00 – M99)

Specific Guidelines for Musculoskeletal and Connective Tissue System Diagnosis

1. M refers to "diseases of the musculoskeletal system and connective tissue."
2. After the letter are two numbers, separated by a decimal, which add more specific information. For example, if you see M21, the 21 refers to "other acquired deformities of limbs“ (pg 181) and the numbers to the right indicate where and what side. Example: M21.172
3. Site and laterality: Most codes in this chapter have site and laterality designations. For some conditions where more than one bone, joint or muscle is usually involved, such as osteoarthritis, there is a “multiple sites” code. If there is not a multiple sites code, then use multiple codes to indicate the multiple sites involved.
4. Code by site first, then condition.
5. Site represents the involved:
   a. Bone
   b. Joint
   c. Muscle
6. Multiple site codes. If there is no multiple site code, multiple codes should be used.
7. Arthritis and osteoarthritis have both site and laterality designations in ICD-10
8. The type of arthritis, such as primary, secondary, or post-traumatic may also be designated.
   a. Primary arthritis is defined as "wear and tear" osteoarthritis

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b. Secondary arthritis is usually caused by injury, heredity, obesity, even though the
treatment may be the same.

Example: M17.11 Unilateral primary osteoarthritis, right knee

9. Rheumatoid arthritis (RA) is broken down by:
   a. Site
   b. Laterality
   c. Complication
   d. With or without Rheumatoid Factor

**ICD-10-CM Specificity**

**Laterality**

- ICD-10 codes include right or left designations. The right side is usually designated with
  the character 1, and the left side is designated with the character 2. In cases where a
  bilateral code is designated, the character 3 may be designated. An unspecified side is
  either a character 0 or 9 depending on whether it is a fifth or sixth character.

**Right Side Ends in Number __________**

**Left Side Ends in Number __________**

Example:

M25.561 Pain in the **Right** Knee

M25.562 Pain in the **Left** Knee

**Spine is specified by __________**

**Dorsopathies (M40-M54)**

The following supplementary sub classification to indicate the site of involvement is provided for
optional use with appropriate categories in the block on dorsopathies, except categories M50 and
M51; see also note at the beginning of this chapter.

0  Multiple sites in spine
1  Occipito-atlanto-axial region
2  Cervical region
3  Cervicothoracic region
4  Thoracic region
5  Thoracolumbar region
6  Lumbar region
7  Lumbosacral region
8  Sacral and sacrococcygeal region
9  Site unspecified
ICD-10 Chapter 15: Pregnancy, Childbirth, and the Puerperium (O00-O9A)
Obstetrics are contained in Chapter 15. Conditions in obstetrics have certain rules that must be followed. Regardless if the condition is covered by the insurance carrier, you must correctly diagnose the obstetrical patient.

Specific Guidelines for Obstetric Diagnosis
1. Trimesters defined as:
   • First trimester – less than 14 weeks 0 days
   • Second trimester – 14 weeks 0 days to less than 28 weeks 0 days
   • Third trimester – 28 weeks 0 days until delivery
2. Trimesters are counted from the first day of the last menstrual period.
3. A code from category Z3A, weeks of gestation are for use on the maternal record to indicate the specific week of gestation of the pregnancy. They are to be appended as additional codes to the codes from chapter 15.

Self-Test #2

1. What is the term for the crosswalk from ICD-9 to ICD-10 or vice versa? 
   ____________________________________________

2. The patient presents with lower back and bilateral leg pain, numbness, and tingling in both legs. Straight leg raise test is positive bilaterally for sciatica. You suspect disc involvement at L5. Your diagnosis is therefore listed as_________________________. Code the diagnosis in ICD-10: 
   ____________________________________________

3. Rheumatoid arthritis coding requires site, laterality, complications and _________________

4. If you are diagnosing arthritis in multiple sites and there is no multiple site code, what do you do? 
   ____________________________________________

5. What is the ICD-9 code for sciatica? _______________________________

6. What is the preferred ICD-10 code for a subluxation of the cervical spine? _________________

7. What is the preferred code for a subluxation at T12? ____________________________
ICD-10 Chapter 19: Rules for Injury, Poisoning, and Certain Other Consequences of External Causes (S00 – T88)

Specific Guidelines for Injury Diagnosis
1. Most categories in chapter 19 have a 7th character requirement for each applicable code.
2. Most categories, except for fractures, will require an A – Initial encounter, D – subsequent encounter, or S – sequela as the 7th character.
3. 7th character A:
   - Initial encounter
   - Used when the patient is receiving active treatment for the condition
     - Surgical treatments
     - Emergency department
     - Treatment by a new physician
4. 7th character D:
   - Subsequent encounter
   - After treatment in the active phase of care and the patient is in the healing or recovery phase of care
   - Examples of this care are cast change, medication adjustment, or other aftercare following treatment of the injury or condition (rehabilitation).
5. 7th character S:
   - Sequela
   - For complication or conditions that arise as a direct result of a condition, such as deconditioning of muscle after an injury.
   - When using the Sequela codes, it is necessary to use both the injury code that precipitated the sequela and the code for the sequela itself.
   - The “S” is added to the injury code only, not the sequela code.
   - The 7th character “S” identifies the injury responsible for the sequela.
   - The specific type of sequela is sequenced first on the claim form, followed by the injury code.

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Headaches

- Classic Migraine – Migraine with aura
- Common Migraine – Migraine without aura
- Status Migrainosus – Severe migraine that lasts > 72 Hours
- Chronic Migraine – Migraine that occurs > 15 days per month for at least 3 months
- Persistent Migraine – lasts more than 3 months and daily
- Ophthalmoplegic Migraines – around the eyes

The Migraine Headache Consultation

- Aura?
- Onset?
- Frequency?
- Vomiting?
- Palliatives?

Self-Test #4

1. What are the three seventh character extension codes? ______________
2. What extension character is associated with the healing or recovery phase of care? ______
3. What Ordinality extension is associated with a sequela? ______________
4. In a whiplash injury, the ICD-10 codes allow us to code the________ and the ________ in the cervical spine.

ICD-10 Chapter 20: External Causes of Morbidity (V00-Y99)

ICD-9 E-Codes

- Explain External causes
- They supplement the primary diagnosis
- Explain where rather than why the claim should be paid
- E-Codes are non-pricing, which means they are not used as primary codes, but as secondary to the main ICD-9 codes

E927.0 Overexertion from sudden strenuous movement
E927.1 Overexertion from prolonged static position
E927.2 Excessive physical exertion from prolonged activity
E927.3 Cumulative trauma from repetitive motion
E927.4 Cumulative trauma from repetitive impact

ICD-9 E-Codes = ICD-10 External Cause Codes

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Initial encounters generally require four codes

1. **External cause codes**
   - Classify as a verb
   - Used for length of the treatment of the patient
   - Utilizes 7th character extender
     - Changes with the status of the patient
     - A, D, S
   - Use the full range of external cause codes to fully explain each cause
   - Assign as many codes as necessary, however if only one is used, use the code that most relates to the principal diagnosis
   - An external cause code can never be a principal (first-listed) diagnosis
   - May be a combination external cause code that identifies sequential events that result in an injury. An example would be a fall that results in striking an object. The combination external cause code used should correspond to the sequence of events regardless which caused the most serious injury.

2. **Place of occurrence (Y92)**
   - This is a secondary code for use after other external cause codes to identify the location of the patient at the time of injury or other condition.
   - Used only once, at the initial encounter
   - No 7th character is used
   - Use it only if you know where was the location of the injury
   - Never use an unspecified code here

3. **Activity codes (Y93)**
   - Used only once, at the initial encounter
   - Use it only if you know what is the activity
   - Only one code from this category is to be listed
   - Never use an unspecified code here
   - Used in conjunction with a place of occurrence code (Y92)

4. **External cause status**
   - Used only once at the initial encounter
   - Was the patient working at the time of the injury? Military? Hobby?
   - A work-related activity is any activity for which payment or income is derived.
   - Use Y93.9 if the activity of the patient is not stated or is not applicable

- Regardless of the number of external cause codes assigned, there should be only one place of occurrence code and one activity code assigned to an encounter.
Self-Test #5

1. In ICD-9, what are the supplemental codes that describe how or where an injury occurred? _______________________

2. What kind of policies would you use an e-code? _______________________

3. Place these in the correct order: Place of occurrence, activity, external cause code, external cause status
   a. _______________________
   b. _______________________
   c. _______________________
   d. _______________________

Recommended Sources:

- *ICD-10 Coding of the Top 100 Conditions for the Chiropractic Office* by Dr. Mario Fucinari www.Askmario.com
- *ICD-10 Coding for Chiropractic* from ChiroCode.com

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