ICD-10: WHAT'S THE BIG DEAL?

Presented to:
Society of Otorhinolaryngology and Head-Neck Nurses
Annual Meeting
September 10, 2012
Washington, DC

Presented by: Kim Pollack, RN, MBA, CPC

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5. Course: ICD-10: What's the Big Deal?
6. Username: ICD10
   Password: ICD10
First Things First: What is ICD?

- ICD is the international standard of diagnostic classification for all general epidemiological purposes, many health management purposes, and for clinical use.
- ICD-9 codes have been in use since 1979 with annual revisions. The World Health Organization (WHO) started using ICD-10 in 1994...except the USA.
  - Volumes I & II = diagnosis codes used by all healthcare providers
  - Volume III = procedural coding system (not used for physician services, just for facility billing)
- Same volumes for ICD-10-CM

Introduction to ICD-10-CM

World Health Organization (WHO)
ICD-10

USA
ICD-10-CM
Cooperating parties – AHA, AHIMA, CMS, NCHS

Volume 1: Tabular list, chronological list by body system or condition
Volume 2: Alphabetic index including neoplasm table
Volume 3: Procedural coding system (PCS)

Countries That Have Adopted ICD-10
Introduction to ICD-10-CM

Who is Affected?
- Any provider or facility covered by HIPAA
- This does not just apply to Medicare claims
- Right now, auto and Work Comp payors are exempt because they are not covered by HIPAA

Implementation Timeline
- CMS originally stated implementation date of October 1, 2013
- June 30, 2012: 5010 electronic file format conversion required
- ICD-10 implementation delay requested by AMA and other groups
- February 2012: CMS proposed 1 year delay (30-day comment period)
- August 24, 2012: CMS extends implementation by 1 year to October 1, 2014
- Outpatient/physician/ASC claims: Must use ICD-10 codes for services performed on date of implementation or later (presumed 10/1/14)
- Inpatient hospitals: Must use ICD-10 codes for claims with discharge dates on or after 10/1/14

Implementation Timeline – Now 10/1/14

The date also indicates that any prior proposed delay – from Oct. 1, 2012 to Oct. 1, 2013 – in the compliance date for use of new codes that clarify diseases and health problems. These codes, known as the International Classification of Diseases, 10th Edition diagnoses and procedures codes, or ICD-10, will include codes for new procedures and diagnoses that improve the quality of information available for quality improvement and payment purposes.
Where Do We Use Diagnosis Codes?

- Claims using diagnosis codes
- Superbills, encounter forms with pre-printed diagnosis codes
- Practice management information system
- Electronic medical record
- Pre-certification of surgery and testing
- Policies that include diagnosis codes
- Clinical trials contracts that include diagnosis codes
- Other areas in your practice where diagnosis codes are required/utilized.

Preparation for ICD-10-CM has Already Started

Conversion to 5010 Standards

- HIPAA 5010 was a new set of standards to regulate electronic transactions such as claims, eligibility, referrals and remittances
- Critical technical requisite for ICD-10 implementation because it accommodates the ICD-10 code structure
- Claims will be rejected if not compliant and will need to be resubmitted in 5010 format
- Deadline for conversion was June 30, 2012

ICD-9 vs ICD-10

<table>
<thead>
<tr>
<th>ICD-9</th>
<th>ICD-10</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-5 characters</td>
<td>3-7 characters</td>
</tr>
<tr>
<td>First character is numeric or alpha (E or V)</td>
<td>First character is alpha (all letters except U are listed)</td>
</tr>
<tr>
<td>Characters 2-5 are numeric</td>
<td>Use of declared after 3rd character</td>
</tr>
<tr>
<td>Use of declared after 3rd character</td>
<td>7th character used in certain chapters, injuries and external cause of injury codes</td>
</tr>
<tr>
<td>Over 14,000 codes</td>
<td>Almost 70,000 codes</td>
</tr>
<tr>
<td>Lacks laterality</td>
<td>Has laterality (i.e., codes identifying right vs. left)</td>
</tr>
<tr>
<td>Example: 470 Deviated nasal septum</td>
<td>Example: J34.2 Deviated nasal septum</td>
</tr>
</tbody>
</table>
Comparing Coding Conventions in ICD-9 to ICD-10

<table>
<thead>
<tr>
<th>Conventions</th>
<th>Used in ICD-9 CM</th>
<th>Used in ICD-10 CM</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Slanted</td>
<td>Yes</td>
<td>Yes</td>
<td>ICD-9 uses slanted brackets [ ]</td>
</tr>
<tr>
<td>Square</td>
<td>No</td>
<td>Yes</td>
<td>ICD-10 uses square brackets [ ]; the presence or absence of the phrase in the bracket does not affect the code</td>
</tr>
<tr>
<td>Code Also</td>
<td>Yes</td>
<td>Yes</td>
<td>&quot;Code Also&quot; is used to show that two codes may be needed to fully code a diagnostic phrase</td>
</tr>
<tr>
<td>Combination</td>
<td>Yes</td>
<td>Yes</td>
<td>There are &quot;combination codes&quot;</td>
</tr>
<tr>
<td>Excludes1</td>
<td>No</td>
<td>Yes</td>
<td>M05.571 Rheumatoid polyneuropathy arthritis of right ankle and foot</td>
</tr>
<tr>
<td>Excludes2</td>
<td>Yes</td>
<td>Yes</td>
<td>Two types of &quot;Excludes&quot; notes:</td>
</tr>
<tr>
<td>Point Dash</td>
<td>No</td>
<td>Yes</td>
<td>1. &quot;Excludes1&quot; indicates that the code excluded should never be used at the same time as the code above the note. The two conditions cannot occur together.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Example: B06 Rubella [German measles] Excludes1 of congenital rubella (P35.0)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>2. &quot;Excludes2&quot; indicates that the condition excluded is not part of the condition represented by the code. It is acceptable to use both codes together if the patient has both conditions.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Example: J04.0, Acute laryngitis Excludes2 of chronic laryngitis (J37.0)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Point Dash (--) means that the code contains a list of options at a level of specificity past the three character category</td>
</tr>
</tbody>
</table>

Example: B01 Varicella [chickenpox]
ICD-10 7th Character

Certain ICD-10 categories have applicable 7th characters

A = Initial encounter
D = Subsequent encounter
S = Sequela (a pathological condition resulting from a prior disease, injury, or attack)

ICD-10 7th Character: Fractures

To code a fracture, you must know:
- Open vs closed
- Displaced vs non-displaced
- Location of fracture on the bone
- Type of fracture
- Episode of care
A = Initial encounter for closed fracture
B = Initial encounter for open fracture
D = Subsequent encounter for fracture with routine healing
G = Subsequent encounter for fracture with delayed healing
K = Subsequent encounter for fracture with nonunion (no union of the fragments of a fracture bone)
P = Subsequent encounter for fracture with malunion (union of the fragments of a fractured bone in a faulty position)
S = Sequela
- Any complications associated with the healing of the fracture (nonunion, malunion)

ICD-10 Placeholder “X”

Some codes have a placeholder of “X” to:
- Allow for future expansion of codes
- Fill out empty character when a code contains fewer than 6 character and a 7th character applies
- When placeholder character applies, it must be used in order for the code to be considered valid
Example: Foreign body in right ear
T16.1XXA Initial encounter
T16.1XXD Subsequent encounter
T16.1XXS Sequela
ICD-10 Laterality

Most codes require designation of right vs. left

- S04.51 - Injury of facial nerve, right side
- S04.52 - Injury of facial nerve, left side

- H60.331 Swimmer's ear, right ear
- H60.332 Swimmer's ear, left ear
- H60.333 Swimmer's ear, bilateral
- H60.339 Swimmer's ear, unspecified ear

**Beware!** Reportedly, payors will not accept “unspecified” diagnosis codes in ICD-10.

ICD-10 Laterality: Cerumen Removal

**ICD-9**

- 380.4 Impacted cerumen

**ICD-10**

- H61.20 Impacted cerumen, unspecified ear
- H61.21 Impacted cerumen, right ear
- H61.22 Impacted cerumen, left ear
- H61.23 Impacted cerumen, bilateral

Organization of ICD-10

- Order of chapters is somewhat like ICD-9.
- Order of topics within the chapters is also like ICD-9.

<table>
<thead>
<tr>
<th>Ch.</th>
<th>Description</th>
<th>Code Category</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Certain Infectious and Parasitic Diseases</td>
<td>A00-B99</td>
</tr>
<tr>
<td>2</td>
<td>Neoplasms</td>
<td>C00-D49</td>
</tr>
<tr>
<td>3</td>
<td>Diseases of the Blood</td>
<td>D00-D99</td>
</tr>
<tr>
<td>4</td>
<td>Endocrine, Nutritional and Metabolic Diseases</td>
<td>E00-E89</td>
</tr>
<tr>
<td>5</td>
<td>Mental and Behavioral Disorders</td>
<td>F01-F99</td>
</tr>
<tr>
<td>6</td>
<td>Diseases of the Nervous System</td>
<td>G00-G99</td>
</tr>
<tr>
<td>7</td>
<td>Disorder of the Eye and Adnexa</td>
<td>H00-H59</td>
</tr>
<tr>
<td>8</td>
<td>Diseases of the Ear and Mastoid Process</td>
<td>H60-H95</td>
</tr>
<tr>
<td>9</td>
<td>Diseases of the Circulatory System</td>
<td>I00-I99</td>
</tr>
<tr>
<td>10</td>
<td>Diseases of the Respiratory System</td>
<td>J00-J99</td>
</tr>
<tr>
<td>11</td>
<td>Diseases of the Digestive System</td>
<td>K00-K94</td>
</tr>
</tbody>
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<tr>
<td>12</td>
<td>Diseases of the Skin and Subcutaneous Tissue</td>
<td>L00-L99</td>
</tr>
<tr>
<td>13</td>
<td>Diseases of the Musculoskeletal System and Connective Tissue</td>
<td>M00-M99</td>
</tr>
<tr>
<td>14</td>
<td>Diseases of the Genitourinary System</td>
<td>N00-N99</td>
</tr>
<tr>
<td>15</td>
<td>Pregnancy, Childbirth and the Puerperium</td>
<td>O00-O99</td>
</tr>
<tr>
<td>16</td>
<td>Diseases of the Musculoskeletal System and Connective Tissue</td>
<td>M00-M99</td>
</tr>
<tr>
<td>17</td>
<td>Diseases of the Genitourinary System</td>
<td>N00-N99</td>
</tr>
<tr>
<td>18</td>
<td>Diseases of the Musculoskeletal System and Connective Tissue</td>
<td>M00-M99</td>
</tr>
<tr>
<td>19</td>
<td>Diseases of the Genitourinary System</td>
<td>N00-N99</td>
</tr>
<tr>
<td>20</td>
<td>Diseases of the Musculoskeletal System and Connective Tissue</td>
<td>M00-M99</td>
</tr>
<tr>
<td>21</td>
<td>Diseases of the Musculoskeletal System and Connective Tissue</td>
<td>M00-M99</td>
</tr>
</tbody>
</table>

Chapter 2: Neoplasm (C00-D49)

- C00-C14 Malignant neoplasms of lip, oral cavity and pharynx
- C30-C39 Malignant neoplasms of respiratory and intrathoracic organs
- C43-C44 Malignant neoplasms of skin
- C773-C75 Malignant neoplasms of thyroid and other endocrine glands
- D10-D36 Benign neoplasms, except benign neuroendocrine tumors
- D37-D48 Neoplasms of uncertain behavior
- D49 Neoplasms of unspecified behavior

Malignant neoplasm of lip, oral cavity and pharynx: instructed to use additional code to identify:
- Alcohol abuse and dependence (F10-)
- History of tobacco use (Z87.891)
- Tobacco dependence (F17-)
- Tobacco use (Z72.0)

Chapter 4: Endocrine, Nutritional and Metabolic Diseases (E00-D89)

- E00-E07 Disorders of thyroid gland
- E04.1 Nontoxic single thyroid nodule
Chapter 8: Diseases of the Ear and Mastoid Process (H60-H95)

- H60-H62 Diseases of external ear
- H65-H75 Diseases of middle ear and mastoid
- H80-H83 Diseases of inner ear
- H90-H94 Other disorders of ear
- H95 Intraoperative and postprocedural complications and disorders of ear and mastoid process, not elsewhere classified

Chapter 10: Diseases of the Respiratory System (J00-J99)

- J00-J06 Acute upper respiratory infections
- J30-J39 Other diseases of upper respiratory tract

  Acute vs. chronic conditions (sinusitis, laryngitis, bronchitis, rhinitis)

  - J32.0 Chronic maxillary sinusitis
  - J32.1 Chronic frontal sinusitis
  - J32.2 Chronic ethmoidal sinusitis
  - J32.3 Chronic sphenoidal sinusitis
  - J32.4 Chronic pansinusitis
  - J32.8 Other chronic sinusitis

  Sinusitis (chronic) involving more than one sinus but not pansinusitis

  - J32.9 Chronic sinusitis, unspecified

Chapter 11: Disease of the Digestive System (K00-K94)

- K00-K14 Diseases of oral cavity and salivary glands
- K20-K31 Diseases of esophagus, stomach and duodenum
Chapter 17: Congenital Malformations, Deformations and Chromosomal Abnormalities (Q00-Q99)

Q10-Q18 Congenital malformations of eye, ear, face and neck
Q30-Q34 Congenital malformations of the respiratory system
Q35-Q37 Cleft lip and cleft palate

Chapter 18: Symptoms, Signs and Abnormal Clinical Laboratory Findings, Nor Elsewhere Classified (R00-R99)

R00-R09 Symptoms and signs involving the circulatory and respiratory systems
R10-R19 Symptoms and signs involving the digestive system and abdomen
R47-R49 Symptoms and signs involving speech and voice

Examples:
R04.0 Epistaxis
R05 Cough
R42 Dizziness and giddiness
(Light-headedness, Vertigo NOS)

Chapter 19: Injury, Poisoning and Certain Other Consequences of External Causes (S00-T88)

S00-S09 Injuries to the head
S10-S19 Injuries to the neck
T15-T19 Effects of foreign body entering through natural orifice
T80-T88 Complications of surgical and medical care, not elsewhere classified
Chapter 20: External Causes of Morbidity (V00-Y99)

Not like the V codes you now know!
- Classifies environmental events and circumstances as the cause of injury, and other adverse effects.
- These codes are intended to be used as secondary diagnosis codes; the primary diagnosis is the injury itself (e.g., nasal bone fracture) in Chapter 19.

Do a Lot of Trauma?

Injuries – mandatory reporting of additional codes from Chapters 19 and 20 when the primary diagnosis is an injury for a total of 5 diagnosis codes on the first claim.
- Injury (medical condition) – pathologic vs. traumatic
- How it happened – external cause
- Place of occurrence (Y92.xxx)
- Activity being performed (Y93.xx)
- Who patient is (Y99.x)

Trauma Example

Example:
Required #1) S02.2xxA Fracture of nasal bones, initial encounter for close fracture
Required #2) How it happened: V00.211A Fall from ice skates
Required #3) Place it happened: Y92.331 Ice skating risk (indoors) (outdoor)
Required #4) Activity performed: Y93.21 Activity, ice skating
Required #5) Who the patient is: Y99.0 Civilian activity done for income or pay
(patient works in an ice skating rink)
Chapter 21: Factors Influencing Health Status and Contact with Health Services (Z00-Z99)

- Similar to the V codes in ICD-9-CM
- Encounter for exam (e.g., hearing screening, allergy testing)
- Genetic susceptibility to disease
- Retained foreign body
- Potential health hazards (e.g., exposure to smoke)
- Other specific health care (e.g., tracheostomy, encounter for cosmetic procedure, implanted devices)
- Do not resuscitate status (Z66)
- Blood type, body mass index
- Family and personal history (e.g., malignancy)

Mapping ICD-9 to ICD-10

Beware of “crosswalks” – many codes do not have a 1:1 relationship

Use official resources

General Equivalence Mappings (GEMS)

- CMS created General Equivalence Mappings (GEM) to ensure consistency in national data is maintained.
- GEMs are a tool to convert data from ICD-9-CM to ICD-10-CM and vice versa.
  - Coders refer to this as forward and backward mapping.
    - You can look up an ICD-9-CM code and “map forward” to an ICD-10-CM code.
    - You can look up an ICD-10-CM code and “map backward” to an ICD-9-CM code.
- GEMs will be updated annually during the transition period from ICD-9-CM to ICD-10-CM.
- CMS will maintain the GEMs for at least three years after October 1, 2013.
- GEMs are not “crosswalks” but a translator or convertor.
<table>
<thead>
<tr>
<th>ICD-9</th>
<th>Description</th>
<th>ICD-10</th>
<th>Documentation/Education Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>381.81</td>
<td>Dysfunction of Eustachian tube</td>
<td>H69.80 Other specified disorders of Eustachian tube, unspecified ear; H69.81 Other specified disorders of Eustachian tube, right ear; H69.82 Other specified disorders of Eustachian tube, left ear; H69.83 Other specified disorders of Eustachian tube, bilateral</td>
<td>ICD-10 identifies an Eustachian tube salpingitis or obstruction. Otherwise all other dysfunctions fall into other and unspecified codes. In ALL cases the laterality of the affected side needs to be identified for the specific code.</td>
</tr>
</tbody>
</table>

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<tr>
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</thead>
<tbody>
<tr>
<td>477.0</td>
<td>Allergic rhinitis, due to pollen;</td>
<td>J30.0 Vasomotor rhinitis; J30.1 Allergic rhinitis due to pollen; J30.2 Other seasonal allergic rhinitis J30.5 Allergic rhinitis due to food; J30.81 Allergic rhinitis due to animal (cat) (dog) hair and dander</td>
<td>Specificity as to cause</td>
</tr>
<tr>
<td>477.9</td>
<td>Allergic rhinitis, cause unspecified</td>
<td>J30.9 Allergic rhinitis, unspecified</td>
<td></td>
</tr>
</tbody>
</table>

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</thead>
<tbody>
<tr>
<td>388.30</td>
<td>Tinnitus, unspecified Subjective stimulus</td>
<td>H93.11 Tinnitus, right ear; H93.12 Tinnitus, left ear; H93.13 Tinnitus, bilateral; H93.19 Tinnitus, unspecified ear</td>
<td>The laterality of the affected side must be documented and coded.</td>
</tr>
</tbody>
</table>
### ICD-9 to ICD-10 Mapping for ENT

<table>
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</thead>
<tbody>
<tr>
<td>381.10</td>
<td>Chronic serous otitis media, simple / unspecified</td>
<td>H65.04 Acute serous otitis, recurrent, right ear; H65.05 Acute serous otitis media, recurrent, left ear; H65.06 Acute serous otitis media, recurrent, bilateral; H65.07 Acute serous otitis media, recurrent, unspecified ear</td>
<td>Recurrent acute otitis media now has ICD-9 codes – we no longer have to use “chronic otitis media”. The laterality of the affected side must be documented and coded.</td>
</tr>
</tbody>
</table>

**ALERT:** Instructional notes exist to use additional code to identify exposure to environmental tobacco smoke (Z77.22); exposure to tobacco smoke in the perinatal period (P96.81); history of tobacco use (Z87.891); occupational exposure to environmental tobacco smoke (Z57.31) or tobacco use (Z72.0).

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</tr>
</thead>
<tbody>
<tr>
<td>478.0</td>
<td>Hypertrophy of nasal turbinates</td>
<td>J34.3 Hypertrophy of nasal turbinates</td>
<td>No further specificity needed. No separate ICD-10 code for concha bullosa</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
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<th>Description</th>
<th>ICD-10</th>
<th>Documentation/Education Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>476.0</td>
<td>Chronic laryngitis</td>
<td>J37.0 Chronic laryngitis</td>
<td>No further specificity needed.</td>
</tr>
</tbody>
</table>
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</tr>
</thead>
<tbody>
<tr>
<td>780.4</td>
<td>Dizziness and giddiness</td>
<td>R42 Dizziness and giddiness</td>
<td>No further specificity needed.</td>
</tr>
</tbody>
</table>

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</tr>
</thead>
<tbody>
<tr>
<td>784.7</td>
<td>Epistaxis</td>
<td>R04.0 Epistaxis</td>
<td>No further specificity needed.</td>
</tr>
</tbody>
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</thead>
<tbody>
<tr>
<td>389.10</td>
<td>Sensorineural hearing loss</td>
<td>H90.3 Sensorineural hearing loss, bilateral H90.41 Sensorineural hearing loss, unilateral, right ear with unrestricted hearing on the contralateral side H90.42 Sensorineural hearing loss, unilateral, left ear, with unrestricted hearing on the contralateral side H90.4 Sensorineural hearing loss, bilateral, restricted hearing on the contralateral side H90.5 Unspecified sensorineural hearing</td>
<td>Laterality needs to be documented. Unilateral hearing loss requires 5th digit</td>
</tr>
</tbody>
</table>

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2012 AOA_What You Need to Know About ICD-10 (KP) 083012v2
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</thead>
<tbody>
<tr>
<td>474.00</td>
<td>Chronic tonsillitis</td>
<td>J35.01 Chronic tonsillitis</td>
<td>No further specificity needed.</td>
</tr>
<tr>
<td>474.01</td>
<td>Chronic adenoiditis</td>
<td>J35.02 Chronic adenoiditis</td>
<td></td>
</tr>
<tr>
<td>474.10</td>
<td>Hypertrophy of tonsils and adenoids</td>
<td>J35.3 Hypertrophy of tonsils with hypertrophy of adenoids</td>
<td></td>
</tr>
<tr>
<td>474.11</td>
<td>Hypertrophy of tonsils alone</td>
<td>J35.1 Hypertrophy of tonsils</td>
<td></td>
</tr>
<tr>
<td>474.12</td>
<td>Hypertrophy of adenoids alone</td>
<td>J35.2 Hypertrophy of adenoids</td>
<td></td>
</tr>
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</thead>
<tbody>
<tr>
<td>470</td>
<td>Deviated nasal septum</td>
<td>J34.2 Deviated nasal septum</td>
<td>No further specificity needed.</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>931</td>
<td>T16.1xxA</td>
<td>Foreign body in right ear, initial encounter</td>
</tr>
<tr>
<td>931</td>
<td>T16.2xxA</td>
<td>Foreign body in left ear, initial encounter</td>
</tr>
<tr>
<td>931</td>
<td>T16.9xxA</td>
<td>Foreign body in ear, unspecified ear, initial encounter</td>
</tr>
</tbody>
</table>

- Location
- Laterality

Placeholder “x” to allow A as 7th digit
### ICD-10-CM Examples

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
</tr>
</thead>
<tbody>
<tr>
<td>802.0 Fracture of nasal bones, closed</td>
<td>S02.2xxA Fracture of nasal bones, initial encounter for closed fracture</td>
</tr>
<tr>
<td></td>
<td>S02.2xD Fracture of nasal bones, subsequent encounter for fracture with routine healing</td>
</tr>
<tr>
<td></td>
<td>S02.2xG Fracture of nasal bones, subsequent encounter for fracture with delayed healing</td>
</tr>
<tr>
<td></td>
<td>S02.2xK Fracture of nasal bones, subsequent encounter for fracture with nonunion</td>
</tr>
<tr>
<td></td>
<td>S02.2xS Fracture of nasal bones, sequela</td>
</tr>
</tbody>
</table>

### Areas of Impact in a Practice

**Manager**
- Policies and procedures
- Working with vendors (EHR, PMIS)
- Coordinating education
- Workflow

**Finance**
- Budgets
- System upgrades
- Education/training

**Information Technology**
- Hardware/software upgrades
- Mapping
- Testing
- Ensuring providers have tools to simplify the code selection process

**Clinical Areas**
- Documentation in medical record
- ABNs
- Ordering tests
- Changes to charge tickets

### Areas of Impact in a Practice

**Physicians**
- Documentation in the medical record
- Increased level of specificity
- Ordering tests
- Code selection in EHR
- Identify the elements required to select specific code

**Coders/Billers**
- May need to better understand anatomy and physiology for choosing codes
- Understand payor policies (eg, LCD, NCD)
- Workers Compensation/Auto carriers are not required to change to ICD-10

**Alert:** There are lots of opportunities for potential negative impacts to the practice. Plan, plan and plan again! Learning something new takes time and effort.
Costs/Budget

1. Information systems: hardware/software, implementation, possible transition to an EHR if you haven’t already
2. Documentation auditing and monitoring
3. Education and training
4. Staffing and overtime costs

What Can You Do Today?

1. Keep communicating to staff and physicians.
2. Determine where you currently use diagnosis codes. Gather together copies of your “cheat sheets” and charge tickets – keep in a file so you know what will need converting down the road.
3. Run an ICD-9 frequency report, from your practice management information system, for each physician to determine your top 25 diagnosis codes.
4. Examine existing documentation - audit physician documentation for your top diagnosis codes. Does the documentation support the ICD-10 code (gap analysis)?
5. Educate physicians to close “gaps” between documentation and ICD-10 codes.
6. Ask your PMIS vendor about their implementation plan.

Resources

- Center for Medicare & Medicaid Services (CMS)
  www.cms.gov/ICD10
- American Health Information Management Association (AHIMA)
  www.ahima.org/icd10/default.aspx
- National Center for Health Statistics
  www.cdc.gov/nchs/icd.htm
- World Health Organization
  www.who.int/classifications/icd
  www.karenzupko.com
  www.shopingenix.com/Product/38825/
CMS Resources

ICD-10 Implementation Guide for Small and Medium Practices

ICD-10 Implementation Guide for Large Practices

Would You Like The Slides?

1. Go to www.karenzupko.com
2. Click on Workshops
3. Click on Course Alumni
4. Look at SOHN-Society of Otorhinolaryngology and Head-Neck Nurses
5. Course: ICD-10: What's the Big Deal?
6. Username: ICD10
   Password: ICD10

Upcoming AAO-HNS/KZA Courses

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Hotel</th>
</tr>
</thead>
<tbody>
<tr>
<td>September 21 - 22, 2012</td>
<td>Baltimore, MD</td>
<td>Wyndham Baltimore Peabody Court</td>
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<tr>
<td>October 25 - 26, 2012</td>
<td>Costa Mesa, CA</td>
<td>Westin South Coast Plaza</td>
</tr>
<tr>
<td>November 16 - 17, 2012</td>
<td>Chicago, IL</td>
<td>Wyndham Chicago</td>
</tr>
<tr>
<td>February 1 - 2, 2013</td>
<td>Dallas, TX</td>
<td>Hotel ZaZa</td>
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<tr>
<td>February 15 - 16, 2013</td>
<td>Orlando, FL</td>
<td>Hilton Orlando Lake Buena Vista</td>
</tr>
<tr>
<td>March 8 - 9, 2013</td>
<td>Las Vegas, NV</td>
<td>Encore at Wynn Las Vegas</td>
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</tbody>
</table>

Visit www.karenzupko.com or call (312) 642-5616 for more details!
Thank You!

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