

Review of 2022 Coding Updates: ICD-10 CM & CPT

Shawn Maria Bromley & Jessica Bryan

Northeast PHO

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Agenda

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SDOH Reduces Health Disparities

- SDOH are conditions in the places where people live, learn, work, and play that affect a wide range of health risks and outcomes. The connection between people's access to and understanding of health services and their own health.
- Health outcomes are driven by an array of factors, including genetics, health behaviors, social and environmental factors, and health care.
- Studies suggest that health behaviors, such as smoking, diet, and exercise, and social and economic factors are the primary drivers of health outcomes, and social and economic factors can shape an individual's health behaviors.
- Efforts to improve health in the US have traditionally looked to the health care system as the key driver of health and health outcomes. There is increased recognition that improving health and achieving health equity will require multiple approaches that address social, economic, and environmental factors that influence health.
- With more focus on SDOH, public health organizations and their community partners can take action to improve the conditions in people's environments.

The 5 SDOH Domains

➤ There are five overall domains within the SDOH:

❑ **Economic stability**

- This domain focuses on improving objectives that impact an individual's ability to obtain or maintain a steady income. It includes things related to employment programs, reliable child-care, and early interventions on factors that may limit someone's ability.

❑ **Health care access and quality**

- Objectives within this domain area are focused on improving levels of education throughout the population. It has been well documented over the years that individuals with higher education levels tend to live longer and experience improved health and wellness when compared to those that are less educated.

❑ **Social and community context**

- Objectives within this domain area are focused on improving individuals' health by working towards increasing the number of individuals with access to a primary care provider; decreasing the number of individuals without appropriate health insurance coverage; and improving access to services and medications where affordability may be a factor.

5 SDOH Overall Domains (continued)

❑ Education access and quality

- The domain is focused on measuring and working to improving safety for individuals in all areas where they may live, socialize, congregate, and work. Health risks are unfortunately plentiful in areas where there are high levels of crime, poor sanitation, unsafe air quality, and increased incidents of domestic violence.

❑ Neighborhood and built environment

- An individual's health can often be impacted by the nature of their relationships with others. Those that have strong ties to family, friends, and community are more likely to take better care of themselves. A strong social network can also assist with mitigating some of the negative impacts associated with other SDOH domains.

SDOH Coding Examples

- A patient requiring dialysis treatments has no transportation and no access to public transportation. Therefore, her circumstance require discussions with home health for home treatments and/or researching community service options for help with transportation for those in need.
 - ❑ **Z59.7** Insufficient social insurance and welfare support
- A patient requiring a specific drug that is very expensive, was recently laid off and has no income or prescription benefits. The decision might be made to try a different drug to ease the cost burden for the patient.
 - ❑ **Z56.0** Unemployment, unspecified
 - ❑ **Z59.7** Insufficient social insurance and welfare support
- A patient with a complicated medical history that includes multiple medications reports having trouble reading the prescription labels and remembering the medication schedule. He lives alone and currently has no support for these types of situations. This might require initiation of home health or some type of elderly assistance service.
 - ❑ **Z55.0** Illiteracy and low-level literacy
 - ❑ **Z60.2** Problems related to living alone

NEPHO Top 10 SDOH Codes

- Z56.0: Unemployment unspecified: **Example:** Patient was laid off from job
- Z56.6: Physical and mental strain related to work: **Example:** Patient works 3 jobs to manage home
- Z56.89: Other problems related to employment: **Example:** Patient is on disability due to recent injury
- Z63.0: Problems in relationship with spouse or partner: **Example:** Patient is separated from spouse
- Z63.3: Absence of family member: **Example:** Patient has recently gone through a divorce
- Z63.4: Disappearance and/or death of family member: **Example:** Husband/Wife passed away a year ago
- Z62.810: Personal history of physical and sexual abuse in childhood: **Example:** Patient experienced sexual abuse from 6-12 years by family member
- Z62.898: Other specified problems related to upbringing: **Example:** Patient does not speak to biological father
- Z63.7: Stressful events affecting family household: **Example:** Patient is having issues with teenage children
- Z72.3: Lack of physical exercise: **Example:** Patient does not exercise

ICD-10 CM Highlights

- The fiscal year 2022 ICD-10-CM diagnosis code updates were officially released by the Centers for Medicare and Medicaid Services (CMS) on June 24, 2021
- Effective for discharges and encounters on or after October 1, 2021
- **153 new codes**
- **30 deleted codes**
- **22 revised codes**
- Chapter 19 has 45 new codes added for 2022
- Several changes were made in Chapter 18; six new specific codes for coughs (**R05**) were added, including acute, subacute, chronic, cough syncope, other specified and unspecified.

COVID 19 Updates

- ▶ Signs and symptoms without definitive diagnosis of COVID-19 has been revised to reflect new cough ICD-10-CM specificity.
- ▶ Personal history of COVID-19 is stressed to be “without residual symptom(s) or condition(s)”. If the patient is following up and still has any symptom or condition related to a previous COVID-19 infection, U09.9 is the go-to code.
- ▶ Multisystem Inflammatory Syndrome (MIS) is expanded upon, detailing the sequencing and relationship with current COVID-19, post COVID-19 condition, and exposure to COVID-19 without known infection.
- ▶ If there are sequela or persistent symptoms or conditions following a previous (and not considered current) COVID-19 infection, U09.9 is the correct code. In anticipation of coding patients who have a previous infection and have been re-infected with another case of COVID-19, there is instruction that U09.9 may be used in conjunction with U07.1.
- ▶ Z71.85 Encounter for immunization safety counseling.

Guidelines: The guidelines edit says that it is for “counseling of a patient or caregiver regarding the safety of a vaccine,” but “it is not for the provision of general information regarding risks and potential side effects during routine encounters for the administration of vaccines.” Clearly this is to cover detailed discussions about COVID-19 vaccination or to attempt to overcome any other vaccine hesitancy. The American Academy of Pediatrics requested this new code, and it is intended to be used with Z23, Encounter for immunization or Z28., Immunization not carried out and under-immunization status.

Chapter 1 Through Chapter 4

- ▶ **Chapter 2:** Neoplasms (C00-D49) The first big change involves adding code C84.7A for Anaplastic large cell lymphoma. It is not breast cancer. May affect women who have the textured (rough) type of implants. Two codes were also added to describe primary and secondary malignant neoplasm of **bilateral** ovaries.
- ▶ **Chapter 3:** Diseases of blood and blood forming organs and immune mechanism (D50-D89) Expanded new codes for D55.21, Anemia due to pyruvate kinase deficiency and anemia due other disorders of glycolytic enzymes.

Chapter	New	Revised	Invalidated
Chapter 1: Certain infectious and parasitic diseases (A00-B99)	1	0	0
Chapter 2: Neoplasms (C00-D49)	3	0	0
Chapter 3: Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism (D50-D89)	5	0	1
Chapter 4: Endocrine, nutritional and metabolic diseases (E00-E89)	1	0	0

Chapter 5 Through Chapter 8

- ▶ **Chapter 5:** Mental, Behavioral and Neurodevelopmental Disorders (F01-F99) New code F32.A for Depression. Unspecified or Depression NOS. Previously F32.9, depressive disorder, single episode, unspecified when the depression was not further specified in the record. There are two new codes F78.A2 for SYNGAP related intellectual disability and F78.A9 Other genetic related intellectual disability.
- ▶ **Chapter 6:** Nervous System (G00-G99) There is a new code G04.82, Acute flaccid myelitis. Acute Flaccid Myelitis (AFM) is an uncommon but serious neurologic condition. It affects the nervous system, specifically the area of the spinal cord called gray matter, which causes the muscles and reflexes in the body to become weak. 90% is in children.

Chapter	New	Revised	Invalidated
Chapter 5: Mental, Behavioral and Neurodevelopmental disorders (F01-F99)	3	0	1
Chapter 6: Diseases of the nervous system (G00-G99)	10	1	1
Chapter 7: Diseases of the eye and adnexa (H00-H59)	0	0	0
Chapter 8: Diseases of the ear and mastoid process (H60-H95)	0	0	0

Chapter 9 Through Chapter 12

- ▶ **Chapter 9:** Circulatory System (I00-I99) There is a new code I5A for Non-ischemic myocardial injury (non-traumatic) There is a CODE FIRST the underlying cause, if known and applicable, such as: with many conditions listed.
- ▶ **Chapter 11:** Digestive System (K00-K95) The K22.8 was expanded to K22.81, Esophageal polyp; K22.82, Esophagogastric junction polyp, and K22.89, Other specified disease of esophagus, which includes hemorrhage of esophagus. Additional new codes, K31.A0-K31.A29 for Gastric intestinal metaplasia unspecified, without dysplasia and with dysplasia.
- ▶ **Chapter 12:** Skin and Subcutaneous Tissue (L00-L99) New codes L24.A0-A9 were added for Irritant contact dermatitis due to fracture, contact with body fluid, saliva, fecal, urinary or dual incontinence or other body fluids.

Chapter	New	Revised	Invalidated
Chapter 9: Diseases of the circulatory system (I00-I99)	1	0	0
Chapter 10: Diseases of the respiratory system (J00-J99)	1	0	0
Chapter 11: Diseases of the digestive system (K00-K95)	13	0	1
Chapter 12: Diseases of the skin and subcutaneous tissue (L00-L99)	8	0	0

Chapter 13 Through Chapter 16

- ▶ **Chapter 13:** Musculoskeletal System (M00-M99) The low back pain code has been expanded to M54.50, low back pain unspecified, M54.51, Vertebrogenic low back pain, and M54.59, Other low back pain. Nerve pain within the spine has long been linked to discs that have degenerated—your doctor may refer to this as “discogenic pain.” But a new term has emerged: “vertebrogenic pain.” If your doctor discovers that your endplates are the origin of your chronic low back pain, this is the term they may use to diagnose it.
- ▶ **Chapter 16:** Perinatal Period (P00-P96) New specific code P00.82, Newborn affected by (positive) maternal group B streptococcus (GBS) colonization! It includes contact with positive maternal group B streptococcus. Code P09 has been expanded to P09.1-9 Abnormal findings on neonatal screening for specific diagnoses such as inborn errors of metabolism, congenital endocrine disease, hematological disorders or heart disease, cystic fibrosis, or hearing loss.

Chapter	New	Revised	Invalidated
Chapter 13: Diseases of the musculoskeletal system and connective tissue (M00-M99)	25	6	3
Chapter 14: Diseases of the genitourinary system (N00-N99)	0	0	0
Chapter 15: Pregnancy, childbirth and the puerperium (O00-O9A)	0	0	0
Chapter 16: Certain conditions originating in the perinatal period (P00-P96)	9	0	1

Chapter 17 Through Chapter 18

► **Chapter 18:** Symptoms, signs, abnormal findings (R00-R99) Cough symptom codes have been expanded to the below:

- ❑ R05.1, Acute cough
- ❑ R05.2, Subacute cough
- ❑ R05.3, Chronic cough
- ❑ R05.4, Cough syncope (with code first syncope and collapse (R55)
- ❑ R05.8, Other specified cough
- ❑ R05.9, Cough, unspecified

Cough syncope is a well-known entity which results in loss of consciousness during episodes of cough. It commonly occurs in patients with severe chronic obstructive lung disease (COPD) and asthma.

Chapter	New	Revised	Invalidated
Chapter 17: Congenital malformations, deformations and chromosomal abnormalities (Q00-Q99)	0	0	0
Chapter 18: Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)	14	0	3

Chapter 19

- ▶ **Chapter 19:** Injury, Poisoning, Consequences of External Cause (S00-T88) There are 20 subchapters used to report type of injury, poisoning or complications of trauma or surgical and medical care.

S00-S09 Injuries to the head
S10-S19 Injuries to the neck
S20-S29 Injuries to the thorax
S30-S39 Injuries to the abdomen, lower back, lumbar spine, pelvis and external genitals
S40-S49 Injuries to the shoulder and upper arm
S50-S59 Injuries to the elbow and forearm
S60-S69 Injuries to the wrist and hand

S70-S79 Injuries to the hip and thigh
S80-S89 Injuries to the knee and lower leg
S90-S99 Injuries to the ankle and foot
T07 Unspecified multiple injuries
T14 Injury of unspecified body region
T15-T19 Effects of foreign body entering through natural orifice
T20-T32 Burns and corrosions
T33-T34 Frostbite

T36-T50 Poisoning by, adverse effect of, and under-dosing of drugs, medicaments and biological substances
T51-T65 Toxic effects of substances chiefly nonmedical as to source
T66-T78 Other and unspecified effects of external causes
T79 Certain early complications of trauma
T80-T88 Complications of surgical and medical care, not elsewhere classified

Chapter	New	Revised	Invalidated
Chapter 19: Injury, poisoning and certain other consequences of external causes (S00-T88)	45	12	18

Chapter 20 Through Chapter 22

- **Chapter 21:** Factors Influencing Health Status (Z00-Z99) Codes were added for problems related to education and literacy, Inadequate drinking-water, different reasons for homelessness whether shelter or unsheltered, housed with risk of homelessness or homelessness in past 12 months, lack of adequate food, food insecurity and other specified lack of adequate food. The code list is lengthy and contained in code range Z55, Z58, Z59.
- **Chapter 22:** Codes for Special Purposes (U00-U49) U09.9 Post COVID-19 condition, unspecified
Note: This code enables establishment of a link with COVID-19.
This code is not to be used in cases that are still presenting with active COVID-19.
 - ❑ **Code first** the specific condition related to COVID-19 if known, such as: chronic respiratory failure (J96.1-) loss of smell (R43.8) loss of taste (R43.8) multisystem inflammatory syndrome (M35.81) pulmonary embolism (I26.-) pulmonary fibrosis (J84.10)

Chapter	New	Revised	Invalidated
Chapter 20: External causes of morbidity (V00-Y99)	3	0	0
Chapter 21: Factors influencing health status and contact with health services (Z00-Z99)	11	3	1
Chapter 22: Codes for special purposes (U00-U85)	0	0	0

Top HCC Categories

- ▶ A patient's risk score is captured accurately by coding their disease and conditions to the highest specificity. HCCs are diseases and conditions that are organized into body systems or similar disease processes. The top HCC categories include:
 - ❑ Major depressive and bipolar disorders
 - ❑ Asthma and pulmonary disease
 - ❑ Diabetes
 - ❑ Specified heart arrhythmias
 - ❑ Congestive Heart Failure
 - ❑ Breast and prostate cancer
 - ❑ Rheumatoid arthritis
 - ❑ Cancer: Colorectal, breast, kidney (examples)

Risk Adjustment Documentation

- ▶ NEPHO has some very specific coding and documentation practices in place to help support provider HCC performance. The following examples provide guidance to practices that are working to improve risk adjustment coding capture:
 - ❑ **Document and code all chronic conditions discussed and documented during a patient encounter:** Chronic and/or permanent diagnoses should be documented as often as they are assessed or treated.
 - ❑ **Clarify whether a diagnosis is current or “history of”:** Anything that is listed as “repaired” or “resolved” should not be coded as current. Providers should be made aware of Z codes that are appropriate for these scenarios.
 - **Example:** Neoplasms that are current code to ICD-10 codes in Chapter 2: Neoplasms.
 - **Example:** Neoplasms that are no longer present should be coded to Chapter 18: Factors Influencing Health Status and Contact with Health Services
 - ❑ **Update the patient’s problem list regularly:** Make sure all problems listed as active are appropriate and haven’t been brought forward (copied and pasted) in error.

Coding Capture Example 1

- Patient has his annual exam visit. He has Type 2 diabetes that is being controlled through diet and salt intake. His A1c is at goal. He is taking Lisinopril for his hypertension and has hyperlipidemia. He has stopped smoking and is eating a low fat diet that has helped reduce his lipid levels. He is currently seeing oncology for his thyroid cancer that was identified this past year. Overall he is following his treatment plan. I have encouraged weight loss due to his obesity and BMI is >40. I will plan to see him in 3 months for his follow-up and hope to see weight reduction.
- Coding by provider:
 - ❑ Diabetes Type 2: E11.9
 - ❑ Hypertension: I10
 - ❑ Thyroid Cancer: C73
- Accurate Coding Capture:
 - ❑ Thyroid Cancer: C73
 - ❑ Diabetes Type 2 with complications: E11.69
 - ❑ Hypertension: I10
 - ❑ Hyperlipidemia: E78.5
 - ❑ Morbid Obesity E66.01
 - ❑ BMI>40: Z68.41

Coding Capture Example 2

- Coding Annual Visits as Z00.00 only, not addressing Chronic Conditions
- Chronic Conditions:
 - ❑ Diabetes Type 2: current A1c: 8.9
 - ❑ Takes an oral diabetes Rx
 - ❑ Overdue diabetes eye exam and patient has cataracts
 - ❑ CKD 2
 - ❑ COPD
 - ❖ Provider coded Z00.00 only and did not address chronic conditions
- Accurate Coding Capture:
 - ❑ Diabetes with CKD 2: E11.22, N18.2
 - ❑ Diabetes long term oral Rx: Z79.84
 - ❑ Diabetes with cataract: E11.36, H26.9
 - ❑ CKD 2: N18.2
 - ❑ COPD: J44.9

Coding Capture Example 3

- Providers are still missing Morbid Obesity Coding Capture Accurately. BMI>35 will risk adjust. The E code and Z code must be captured together for the coding to risk adjust. An estimated \$2800 will go into a patient budget to support Obesity annual care: Nutrition, Weight Counseling, and Medication.
- Provider Example: Patient weight is 307lbs their BMI>45
 - ❑ Coding Capture: Morbid Obesity E66.01
 - ❑ Accurate Coding Capture should be: Morbid Obesity Z66.01, BMI>45 Z68.4
- Provider Example: Patient weight is 187lbs their BMI>36
 - ❑ Coding Capture: Obesity E66.9
 - ❑ Accurate Coding Capture should be: E66.9, BMI>36 Z68.36
- When Obesity/Morbid Obesity is not captured to the highest specificity we are leaving \$\$\$ on the table to help support management of care to the patient: Nutrition, Weight Counseling, and Medication. This support will help improve patient health outcomes and offers support to improve their overall weight condition.

Coding Capture Example 4

- Patient is being seen for substance abuse disorder. Alcohol occ beer on the weekend maybe 1 or 2 but rarely drinks. Does use Cannabis and did use oxycodone 30/20/10mg in the past. There was a relapse due to pain from a construction accident in 2012. Has done AA in the past. Has been on suboxone during remission.
- **Diagnosis Capture:** Primary: F19.90 Other psychoactive substances use unspecified uncomplicated. **Missing Opioid dependence and Cannabis use, Occupational exposure to risk**
 - ❑ **Missed Coding Opportunity:** F11.20 Opioid Dependence in remission. Cannabis use uncomplicated F12.90, Occupational exposure to other risk factors Z57.8
 - ❑ **Comments:** The patient works in construction that has daily risks that put him at risk for relapse.

2022 CPT Update Overview

- There are 405 changes in the 2022 CPT code set, including 249 new codes, 63 deletions and 93 revisions. The changes were effective on January 1st, 2022.
- There are 43 percent of editorial changes in the 2022 CPT code set that are tied to new technology services described in Category III CPT codes and the expansion of the proprietary laboratory analyses code set.
- There are a series of 15 vaccine-specific codes to efficiently report and track immunizations and administrative services.
- The American Medical Association (AMA) created five CPT codes to report therapeutic remote monitoring. Those codes are: 98975, 98976, 98977, 98980 and 98981.
- Additionally created were codes for principal care management. This will allow providers to report care management services for patients with chronic conditions in an effort to improve monitoring these complex health problems. The codes are: 99424, 99425, 99426 and 99427.

2022 E/M Updates

- 99202 – 99215 (Outpatient) no longer require History, Exam, medical-decision-making (MDM) (3 components). Updated language include, a **medically appropriate history and examination are required, but the code selection is determined by the level of the medical decision-making or total time spent on the day of the encounter date.** The number of minutes required for each code has increased as well.
- Providers may select the code based on the highest component documented (time or MDM). If the time documentation is supporting a higher level than the MDM, then time can be used for code selection instead of MDM.
- CPT codes 99354-99357 for face-to-face and CPT codes 99358-99359 for non-face-to-face prolonged services are no longer reported with the outpatient E&M services.
- Outpatient E&M services have one new CPT code for face-to-face and non-face-to-face prolonged services to be used only when the code selection is based on time. The new code is 99417.

Principal Care Management (PCM)

- There are 2 new CPT codes that may be used to report Principal Care Management services with add-on codes. The service can be reported once per calendar month.
 - ❑ 99424 (first 30 minutes) Performed by physician or other qualified health care provider.
 - ❖ They have one complex chronic condition lasting at least three months.
 - ❖ The condition is severe enough that the patient is at risk for hospitalization or was recently hospitalized due to the condition.
 - ❖ The condition requires development or revision of a disease-specific care plan.
 - ❖ The condition requires frequent adjustments in the medication regimen, and/or the management of the condition is unusually complex due to comorbidities.
 - ❑ 99425 +add on code (additional 30 minutes)
 - ❑ 99426 (first 30 minutes) Directed by physician or other qualified health care provider.
 - ❑ 99427 +add on code (additional 30 minutes)

Remote Therapeutic Monitoring (RTM) Services

RTM is designed for the management of patients using medical devices that collect non-physiological data. Data around indicators such as therapy/medication adherence, therapy/medication response, and pain level can be collected and billed under the new RTM codes that include the following:

- ❑ **98975:** RTM (e.g. respiratory system status, musculoskeletal system status, therapy adherence, therapy response); initial set-up and patient education on use of equipment.
- ❑ **98976 :** RTM (e.g. respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (e.g. daily) recording(s) and/or programmed alert(s) transmission to monitor respiratory system, each 30 days
- ❑ **98977:** RTM (e.g. respiratory system status, musculoskeletal system status, therapy adherence, therapy response); device(s) supply with scheduled (e.g. daily) recording(s) and/or programmed alert(s) transmission to monitor musculoskeletal system, each 30 days
- ❑ **98980:** RTM treatment, physician/other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient/caregiver during the calendar month; first 20 minutes
- ❑ **98981:** Remote therapeutic monitoring treatment, physician/other qualified health care professional time in a calendar month requiring at least one interactive communication with the patient/caregiver during the calendar month; each additional 20 minutes

Vaccine Updates

- The new ICD-10-CM codes for April 1st, 2022, implementation were released by the Centers for Medicare and Medicaid Services (CMS) and Centers for Disease Control and Prevention (CDC) on November 16, 2021. There are three new diagnosis codes for April 1:
- Z28.310 – Unvaccinated for COVID-19
- Z28.311 – Partially vaccinated for COVID-19
- Z28.39 – Other under immunization status
- These codes include coding instructions in the Tabular List. There is a note for the codes in subcategory Z28.31 that says, “These codes should not be used for individuals who are not eligible for the COVID-19 vaccines, as determined by the healthcare provider.” The inclusion terms for Z28.39 include delinquent immunization status and lapsed immunization schedule status. None of the new diagnosis codes are designated as a major comorbid condition (MCC) or comorbid condition (CC).

Resources

- shawn.m.bromley@lahey.org
- <https://www.healthypeople.gov/2020/topics-objectives>
- <https://health.gov/healthypeople/objectives-and-data/about-objectives>
- <https://www.healthypeople.gov/2020/About-Healthy-People/Development-Healthy-People-2030/Framework>
- <https://www.cms.gov/files/document/zcodes-infographic.pdf>
- [https://journal.ahima.org/improving-icd-10-cm-coding-for-social-determinants-of-health/#:~:text=Social%20determinants%20of%20health%20\(SDOH,%2C%20social%20isolation%2C%20and%20unemployment](https://journal.ahima.org/improving-icd-10-cm-coding-for-social-determinants-of-health/#:~:text=Social%20determinants%20of%20health%20(SDOH,%2C%20social%20isolation%2C%20and%20unemployment)
- https://www.bcbsil.com/pdf/clinical/ICD-10_Z_codes_flier.pdf
- <https://www.ahima.org/>
- <https://www.aapc.com/>