QUESTIONS & ANSWERS

CDC's responses to questions or comments submitted for diagnosis code topics using the "Q & A" feature during the March 10, 2021 ICD-10 Coordination and Maintenance Committee Meeting.

Question	Where are the meeting materials?
CDC Response	All ICD-10-CM Coordination and Maintenance materials can be found: [ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)](https://cdc.gov)
Comment	Meeting materials are available from:
CDC Response	[ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)](https://cdc.gov)
Question	"There is a section on that page saying ""meeting materials will be posted on this page"" but I do not see them" "Upcoming Meetings March 9-10, 2021 Proposal Packet pdf icon
CDC Response	All ICD-10-CM Coordination and Maintenance materials can be found: [ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)](https://cdc.gov)
Question	what about (neuro)cognitive disorder?
CDC Response	Thank you for your suggestion. It will be taken into consideration
Question	Could the CDC staff introducing each topic announce the page number in the topic packet? That would make it easier to quickly get to the correct page. Thank you.
CDC Response	"Sue, will do. Thanks"

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Comment	The underdosing code is not necessary. Nor is the adverse effect.
CDC Response	Support was verbally expressed during the meeting, this is a prescription drug, so these codes are necessary.
Comment	https://www.cdc.gov/nchs/data/icd/March-2021-proposal-packet-508.pdf
CDC Response	Thank you Jeanne
Questions	Can I please get a link to the agenda?
CDC Response	All ICD-10-CM Coordination and Maintenance materials can be found: ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)
Comment	"There is a typo at code I25.72. Atherosclerosis of internal mammary artery graft with angina pectoris"" should be an inclusion term, rather than part of the code descriptor for I25.72."
CDC Response	Thanks Nelly. Note taken. Herman emailed Nelly March 15, 2021
Comment	"In response to the question about the need for unspecified codes in the refractory angina proposal, these subcategories already have existing ""unspecified angina pectoris"" codes in each of these subcategories. These existing codes just weren't shown in the proposal."
CDC Response	Thank you Sue
Comment	"There is no way to unmute yourself until you folks unmute at your end. Then your computer tells you to unmute. I expected you were going to re-mute me, so I didn't mute at my end again. Sorry about that!"
Question	Will all of the slide decks be available?
CDC Response	Yes, in about a week or so. All ICD-10 Coordination and Maintenance materials can be found: ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)
Question	Was there a final agenda posted for this meeting? I am in need of the order of presentations.
CDC Response	All ICD-10 Coordination and Maintenance materials can be found: ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)

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Comment	I found the topic packet here: https://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm
Comment	The American Academy of Neurology is pleased to see the revised updated proposal and will submit written comments.
Comment	Thank you Linda. That helps tremendously with the codes.
Question	Would Z71.85 ever be used for a healthy patient moving from pediatrics to adult?
CDC Response	Excellent question. Response from the American Academy of Pediatrics (AAP: It would be appropriate if that is the reason for the encounter, however not sure how often this would occur.
Comment	This is a good idea but should the title be counseling. Isn't it also applicable for actual treatment. Guidelines should be created.
CDC Response	Thank you for your suggestion regarding code title and guidelines and yes, it could be applicable for actual treatment.
Comment	Thank you!
Comment	Thanks Traci this is the proposed packet. Is there an order for the presentations for today's meeting?
CDC Response	All ICD-10-CM Coordination and Maintenance materials can be found: ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)
Question	Would Z91.85 only be coded if the provider documents that the patient is at risk due to their military service or does this code assume that all veterans are at risk?
CDC Response	Per the submitter the new code request is for Personal history of military service, Previous concept did not apply to all veterans, only veterans with deployment.
Question	Is the expectation the physician would document all SDOH in order to code or will other aspects of the record be appropriate supporting documentation?
CDC Response	The guidelines have been updated to include language regarding SDOH. Page 16, Section I, B. General Coding Guidelines 14. Documentation by Clinicians Other than the Patient's Provider ICD-10-CM FY 2021-COVID- updated Jan-Guidelines (cdc.gov)

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Comment

"I was not able to get my comment into the queue on the SDOH proposal, but I would like to recommend that CDC consider implementing this proposal THIS October instead of October 2022. This is not the first time this proposal has been presented, and these codes are urgently-needed. I will put this recommendation in AHIMA's comment letter, as well as suggestions for some tweaking in terms of additional instructional notes that are needed. Thank you."

CDC Response

Thank you for your comment.

Comment

Kudos to the presenters for this recommendation!

Comment

"I'd very much appreciate a copy of the slides, especially Dementia."

CDC Response

All ICD-10 -CM Coordination and Maintenance materials can be found:
ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)

Question

"Currently, according to the ICD-10 Index, alcohol use directs the coder to code Z72.89. Would the index be revised to direct the coder to code F10.90?"

CDC Response

If the codes are approved, the indexing will be verified and updated accordingly.

Comment

These codes are very problematic. There should be the default of dependence if there is in remission. Unspecified substances is not a valid concept. There are too many such codes being put in the classification that are clinically very problematic. This proposal should not be approved.

CDC Response

Thank you for your input. NCHS will reach back to the SME for additional clinical input and evaluate all comments at the close of the comment period.

Comment

Fully support the addition of codes for substance use unspecified in remission.

CDC Response

Thank you.

Comment

"Hi Gail, there usually is not a order of presentations as it depends on when the providers are available. Then if a provider has to reschedule within the day, the NCHS fills in the time with a request without a presenter.

CDC Response

This is correct.

Question

"How will the tabular look for the alcohol use code? What code would be assigned for Alcohol Use Disorder when mild, moderate or severe is unspecified?"

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CDC Response   Response from APA: For purposes of cross-walking DSM-5 to ICD-10-CM, we (APA) consider "dependence" to include cases of both moderate use disorder and severe use disorder, and "abuse" to map onto mild use disorder, even though those concepts are not strictly speaking equivalent. So the code for alcohol use disorder where the severity in not specified would be alcohol use, unspecified.

Comment   "We need a code for when alcohol use disorder is documented without documentation of mild, moderate or severe, or remission, etc."

CDC Response   Thank you for your input. We will evaluate and discuss with SME on how to proceed.

Question   "Does 'history of alcohol use' mean the same thing as 'alcohol use in remission'? If so, can entries be added to the ICD-10 Index to direct the coder to that code... for example, could there be this entry in the Index: History --> personal --> alcohol use --> F10.91"   Roger Hettinger

CDC Response   Response from our SME: "Alcohol use in remission" indicates that the person once had an alcohol use disorder of some sort in the past that is now in remission, whereas "history of alcohol use" means exactly what it sounds like…that the person has a history of having used alcohol at some point in his or her life.

Comment   "In response to the earlier question about the need for unspecified codes in the refractory angina proposal, these subcategories already have existing ""unspecified angina pectoris"" codes in each of these subcategories. These existing codes just weren't shown in the proposal."

Comment   "I was not able to get my comment into the queue on the SDOH proposal, but I would like to recommend that CDC consider implementing this proposal THIS October instead of October 2022. This is not the first time this proposal has been presented, and these codes are urgently-needed. I will put this recommendation in AHIMA's comment letter, as well as suggestions for some tweaking in terms of additional instructional notes that are needed. Thank you."

CDC Response   Thank you.

Question   Where can we find the materials for day2?

CDC Response   All ICD-10 Coordination and Maintenance materials can be found:
ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)

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Question   "Where would ""apnea of prematurity"" be coded in the proposed new codes: P28.40 Unspecified apnea (of prematurity) of newborn or P28.44 Apnea of prematurity. The Excludes 2 under P28.3 states: apnea of prematurity (P28.40)" Rebecca Greenberg

CDC Response   As currently presented in the proposal, new proposed code P28.44 would be used; However, we will await all comments and additional SME input for review and possible modifications.

Question   "Is there rationale that you can share as to why the word ""sequelae"" is not in the code description?"

CDC Response   The code U09.9, and the code description "Post COVID-19 condition, unspecified" precisely match the proposed code and description created by WHO in the original ICD-10.

Comment   "No question, but completely agree with Nelly! The sooner the better for the U09 code we are seeing a lot of these patients being admitted now."

CDC Response   Based on input from and coordination with CMS, the earliest possible time for implementation of the new code proposed for post COVID-19 condition will be October 1, 2021.

Question   "Can we get clarification on terminology of sequelae, residual, h/of, post COVID. Even   with this, physicians don't speak-coding, so this is another issue to address. Ex. History of recent COVID (couple of weeks) now here with chronic respiratory failure but no active infection despite positive COVID test this admission."

CDC Response   If there is description of a sequela of COVID-19, a residual condition following COVID-19, or a post COVID-19 condition, then the new proposed code would be used. If there is a history of COVID-19, without a current related condition, then it would be appropriate to assign the code Z86.16, Personal history of COVID-19. If there is a current infection or recurrent infection with COVID-19, then it would be appropriate to assign the code U07.1, COVID-19. If there is a lack of clarity in the clinical record, then it would be appropriate to query the provider. For more information about COVID-19 and its long term effects or duration, please see the references below.
Long-Term Effects of COVID-19

https://www.cdc.gov/coronavirus/2019-ncov/long-term-effects.html

Interim Guidance on Duration of Isolation and Precautions for Adults with COVID-19   https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html#

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Comment	"I would also support Nelly's comment that ideally, it would be great if the post-COVID code could be implemented even sooner than October 1."
Question	"I have seen documentation of ""acute respiratory failure"" likely due to postcovid syndrome in an OB patient who delivered via C/S. Provider attributed her acute respiratory failure to prior COVID infection from 3 months ago. Would U09.9 be appropriate in the setting of acute illness related to prior covid19 infection?"
CDC Response	In the case described, it would be appropriate to assign a code from subcategory J96.0-, for Acute respiratory failure, along with the new proposed code U09.9, Post COVID-19 condition, unspecified.
Question	"Please clarify the difference between Sequela B94 and Post COVID, they sound very similar."
CDC Response	Sequela of COVID-19 would be appropriately coded to the proposed new code U09.9, Post COVID-19 condition, unspecified.
Question	Would this code not apply to long haul COVID?
CDC Response	The term "long haul COVID" has been used for a constellation of various findings and conditions that may occur following COVID-19. For coding such findings or conditions, it would be appropriate to code the specific conditions, and also to use the proposed new code U09.9, Post COVID-19 condition, unspecified.
Question	Will the SDOH slide presentation be available?
CDC Response	Yes they can be found: ICD - ICD-10-CM - Coordination and Maintenance Committee (cdc.gov)
Question	"How about adding the WHO code, U11 for, Need For Immunization Against COVID-19?"
CDC Response	While your comment will be taken into further consideration, it may be noted that at this time for such encounters, it would be appropriate to assign the ICD-10-CM code Z23, Encounter for immunization. Also, this code has the following, "Note: procedure codes are required to identify the types of immunizations given." It would thus be appropriate to use a procedure code to

identify the vaccination given. Further information about the procedure codes is available from the reference linked below.

Coding for COVID-19 Vaccine Shots | CMS
https://www.cms.gov/medicare/covid-19/coding-covid-19-vaccine-shots

Comment   David - that is the point of the new post-COVID code - it will identify the patient has had COVID

CDC Response   To be specific, the proposed new code U09.9, Post COVID-19 condition, unspecified, would identify when a patient has a condition that is related to having had COVID-19.

Comment   U09.9 would be used INSTEAD of the B94 code

CDC Response   This is correct, that in general, it would be appropriate to use the proposed new code U09.9, Post COVID-9 condition, unspecified, instead of the B94 code, for sequela of COVID-19.

Question   Can we have a new sequela of COVID code itself?

CDC Response   The proposed new code U09.9, Post COVID-9 condition, unspecified, should be used instead of a B94 code, for sequela of COVID-19.

Question   I had trouble signing in today. I am wondering if I need to stay signed in or try new access later?

CDC Response   You can remain signed in or log on later. Either way is fine.

Comment   "Not a question, just a comment. I never see this type of specificity for endometriosis documented in real life charts."

Comment   "Jeff - N80.9 is just plain ""Endometriosis, unspecified"

Comment   "For me, it's not necessary to have staff read the proposals. I can read the proposals. It is important to hear from clinicians and I appreciate those presentations."

Comment   The AAN is supportive of the proposal and will submit written comments with specifics about the actual structure including unique codes for each sarcoglycanopathies. Thank you

CDC Response   Thank you. NCHS looks forward to receiving your written comments and specific recommendations related to the proposal.

Question   "Hello, will you be discussing the request for comments on April 1st implementation for ICD-10-CM codes? This was discussed yesterday at the -PCS coding meeting but I was anticipating the topic would be discussed during this meeting as well since it also applies to diagnosis coding."

CDC Response   This was discussed at the end of the meeting. We would appreciate your comments.

Comment   Can't hear her Erica Remer

CDC Response   Is that better?

Comment   Thank you all for all your hard work!!!!

Comment   thank you all again!