ICD-10-CM Official Coding Guidelines Related to COVID-19

On February 20, 2020, the Centers of Disease Control and Prevention (CDC) issued official diagnosis coding guidance for health care encounters related to the 2019 novel coronavirus (COVID-19) previously named 2019-nCoV.

This guidance is intended to be used in conjunction with the current ICD-10-CM classification and the ICD-10-CM Official Guidelines for Coding and Reporting (effective October 1, 2019) and will be updated to reflect new clinical information as it becomes available. https://www.cdc.gov/nchs/data/icd/10cmguidelines-FY2020_final.pdf.

A new ICD-10 emergency code (U07.1, 2019-nCoV acute respiratory disease) has been established by the World Health Organization (WHO). The new code will be added to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) for reporting, effective with the next update, October 1, 2020.

In the meantime, the CDC has provided advice on coding the COVID-19 coronavirus:

Pneumonia
For a pneumonia case confirmed as due to COVID-19, assign codes J12.89, Other viral pneumonia, and B97.29, Other coronavirus as the cause of diseases classified elsewhere.

Acute Bronchitis
For a patient with acute bronchitis confirmed as due to COVID-19, assign codes J20.8, Acute bronchitis due to other specified organisms, and B97.29, Other coronavirus as the cause of diseases classified elsewhere. Bronchitis not otherwise specified (NOS) due to COVID-19 should be coded using code J40, Bronchitis, not specified as acute or chronic; along with code B97.29, Other coronavirus as the cause of diseases classified elsewhere.

Lower Respiratory Infection
If COVID-19 is documented as being associated with a lower respiratory infection NOS, or an acute respiratory infection, NOS, this should be assigned with code J22, Unspecified acute lower respiratory infection, with code B97.29, Other coronavirus as the cause of diseases classified elsewhere. If COVID-19 is documented as being associated with a respiratory infection, NOS, it would be appropriate to assign code J98.8, Other specified respiratory disorders, with code B97.29, Other coronavirus as the cause of diseases classified elsewhere.

ARDS
Acute respiratory distress syndrome (ARDS) may develop with COVID-19, according to the Interim Clinical Guidance for Management of Patients with Confirmed 2019 Novel Coronavirus (COVID-19) Infection.

https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html

Cases with ARDS due to COVID-19 should be assigned the codes J80, Acute respiratory distress syndrome, and B97.29, Other coronavirus as the cause of diseases classified elsewhere.

Exposure to COVID-19

For cases where there is a concern about a possible exposure to COVID-19, but this is ruled out after evaluation, it would be appropriate to assign the code Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out.

For cases where there is an actual exposure to someone who is confirmed to have COVID-19, it would be appropriate to assign the code Z20.828, Contact with and (suspected) exposure to other viral communicable diseases.

Signs and symptoms

For patients presenting with any signs/symptoms (such as fever over 100, cough, shortness of breath) and where a definitive diagnosis has not been established, assign the appropriate code(s) for each of the presenting signs and symptoms such as:

• R05 Cough
• R06.02 Shortness of breath
• R50.9 Fever, unspecified

Note: Diagnosis code B34.2, Coronavirus infection, unspecified, would generally not be appropriate for COVID-19, because the cases have universally been respiratory in nature, so the cite would not be "unspecified."

If the provider documents "suspected", "possible" or "probable" COVID-19, do not assign code B97.29. Assign a code(s) explaining the reason for encounter (such as fever, or Z20.828).

This coding guidance has been developed by the CDC and approved by the four organizations that make up the Cooperating Parties: The National Center for Health Statistics, the American Health Information Management Association, the American Hospital Association, and the Centers for Medicare & Medicaid Services.

Additional information is also available on the CDC website and through CMS.

Information on MA Program coverage related to COVID-19, to include an FAQ document, can be found on the Department of Human Services website here.

The Pennsylvania Department of Health has a dedicated page for COVID-19 that provides regular updates. Click here for the most up to date information regarding COVID-19.

Thank you for your service to our MA recipients.
We value your participation.
Check the Department's website often at: www.dhs.pa.gov.

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