

ICD-10-PCS Overview for Trauma

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Objectives

- Define ICD-10-PCS
 - What is it?
- Identify the difference between ICD-9-CM and ICD-10-PCS
 - What does it look like?
- PCS Organization

What is ICD-10-PCS

- ICD = International Classification of Diseases
 - International standard for classifying diagnoses for epidemiological, health management purposes and clinical use. For the U.S., Reimbursement as well.
- 10 = Tenth Revision
 - Continuously revised and updated.
- PCS = Procedure Coding System
 - Inpatient procedural reporting for hospitals and payers

What is ICD-10-PCS cont.

- Although titled “ICD-10”, ICD-10-PCS is not a derivative work of the international Classification of Diseases (ICD) Tenth Revision
- PCS was designed and developed for CMS (Centers for Medicare and Medicaid Services)
- PCS was titled ICD-10-PCS to maintain continuity with the change to ICD-10-CM

What is ICD-10-PCS cont.

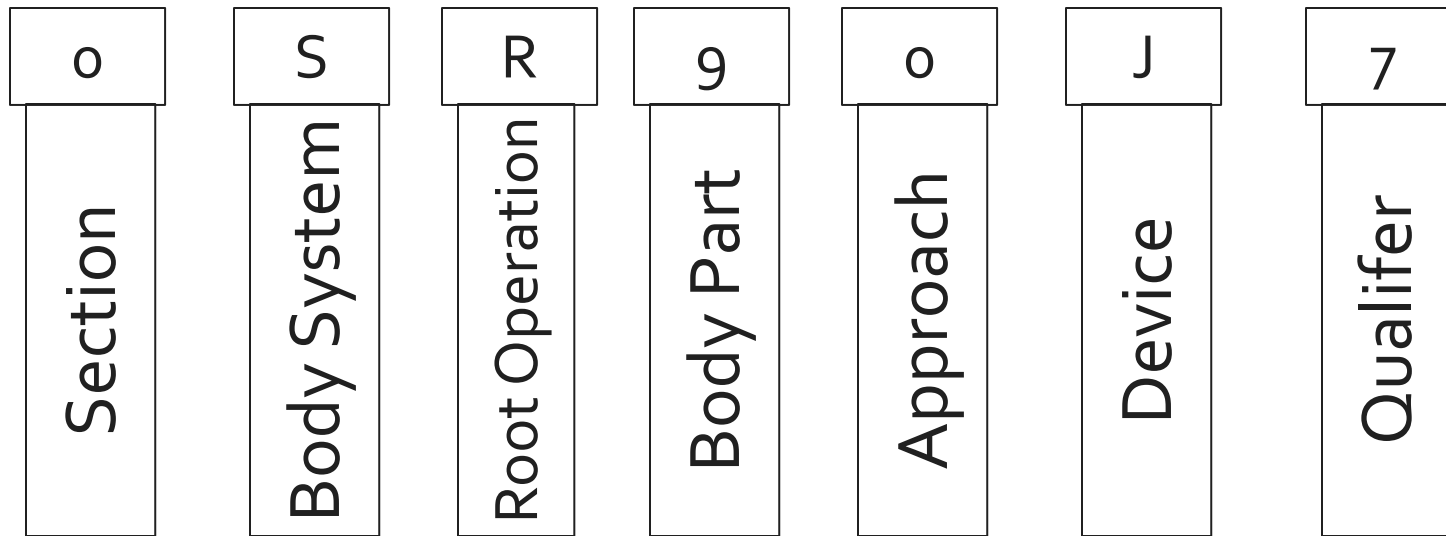
- PCS is not a classification – A classification groups similar conditions into a single group
- PCS is a coding system that assigns specific values to different aspects of a procedure and places them in a specific sequence to create a unique code.

What does ICD-10-PCS look like?

- The structure is alpha numeric.
- Each code is 7 characters as opposed to ICD-9-CM's 5 characters.
- It is bigger!
 - Diagnoses
 - ICD-9-CM = 14,000
 - ICD-10-CM = 69,000
 - Procedures
 - 3,800
 - 72,000

ICD-10-PCS Procedural Code Structure

- All codes are 7 digits and alpha numeric.



Procedure Code Example

- oSR90J7
 - Replacement of right hip joint, open approach, ceramic on ceramic with synthetic substitute,
 - Note the specificity that can be drawn just from the code itself.

Character 1

- 16 Sections, that can be broken into three groups:
 - Medical and Surgical Section (o)
 - Medical and Surgical Related Sections (1-9)
 - 1 = Obstetrics, 2 = Placement, 3 = Administration, 4 = Measurement and Monitoring, 5 = Extracorporeal Assistance and Performance, 6 = Extracorporeal Therapies, 7 = Osteopathic, 8 = Other Procedures, 9 = Chiropractic
 - Ancillary Sections (B,C,D,F,G,H)
 - B = Imaging, C = Nuclear Medicine, D = Radiation Oncology, F = Physical Rehabilitation and Diagnostic Audiology, G = Mental Health, H = Substance Abuse Treatment

Character 2

- For majority of sections it is body system
- Goes from 0 to Z
- Ex. 0 = Central Nervous System, Z = Anatomical regions, lower extremities
- For Section 2 (Placement Procedures), Character 2 = Anatomical Regions
- For Section F (Physical Rehabilitation and Diagnostic Audiology), Character 2 = Section Qualifier

Character 3

- Identifies the root operation or root type
- The Medical and Surgical Section (o) uses an extensive list of root operations.
- Each is defined by PCS
- Some of the definitions are very similar and may or may not match how you define them yourself
- They will just need to be memorized

Character 4

- May vary slightly by section
- Identifies the body part on which the procedure was performed
- Each body system (character 2) has specific body parts

Character 5

- In most sections this character refers to the approach or the method by which the body part is reached
- In the Medical and Surgical section (o) there are several approaches each of which is defined in PCS. Ex. open, via natural or artificial opening, percutaneous
- Some sections have unique fifth characters. Ex. Imaging Section (B), 5th character = contrast

Character 6

- Various meanings within each section
- In the biggest section, the Medical and Surgical Section (o) the 6th character equals the devices that remain after the procedure is completed.
 - Ex. Drainage device (o), synthetic substitute (J)

Character 7

- In each section this character refers to a “qualifier” that has a unique meaning for each section
- In the Medical and Surgical Section (o) each procedure may have a unique qualifier
- A large number of procedures will have No Qualifier (Z)

Conventions

- There are not many, only 11 paragraphs, mostly discuss the basic structure and give examples
- A7 – A valid code may be chosen directly from the tables
- A8 – All seven characters must be specified for a valid code
- A11 – The physician does not have to use PCS terms. Coders do not have to query physicians when information is clear.

PCS Table

<ul style="list-style-type: none"> o Medical and Surgical H Skin and Breast Q Repair 			
Body Part Character 4	Approach Character 5	Device Character 6	Qualifier Character 7
<ul style="list-style-type: none"> o Skin, Scalp 1 Skin, Face 2 Skin, Right Ear . . . C Skin, Left Upper Arm 	<ul style="list-style-type: none"> X External 	<ul style="list-style-type: none"> Z No Device 	<ul style="list-style-type: none"> Z No Qualifier
<ul style="list-style-type: none"> T Breast, Right U Breast, Left . . 	<ul style="list-style-type: none"> o Open 3 Percutaneous . . X External 	<ul style="list-style-type: none"> Z No Device 	<ul style="list-style-type: none"> Z No Qualifier

Procedure Code = oHQXZZ

PCS Table

B Imaging W Anatomical Regions 2 Computerized Tomography			
Body Part Character 4	Contrast Character 5	Qualifier Character 6	Qualifier Character 7
0 Abdomen 1 Abdomen and Pelvis 4 Chest and Abdomen . . 8 Head 9 Head and Neck	0 High Osmolar 1 Low Osmolar Y Other Contrast	0 Unenhanced and Enhanced Z None	Z None
0 Abdomen 1 Abdomen and Pelvis 4 Chest and Abdomen . . 8 Head 9 Head and Neck	Z None	Z None	Z None

Procedure Code = BW28ZZZ

Upcoming Issues

- COLLECTOR
 - Mapping
 - Screens
 - Queries and Reports
- Education
 - Yours
 - Ours

Take Away

- ICD-10-PCS is extremely different than coding procedures in ICD-9
- You will need to improve your knowledge of anatomy and your knowledge of procedures in general
- You will need to learn the PCS specific root operation and approach definitions
- You will need to review all of user defined queries and reports

Internet Resources

- www.AHIMA.org
- www.aapc.com/ICD-10/icd-10-codes.aspx
- www.cms.gov/Medicare/Coding/ICD10/index.html
- <http://www.cdc.gov/nchs/icd/icd10cm.htm>