Pathway to Acquire New ICD-10 Codes Pertinent to New Wound Care Technology

Donna Cartwright*

Integra LifeSciences Corporation, Plainsboro, New Jersey.

Donna Cartwright, MPA, RHIA, CCS, RAC, FAHIMA

Submitted for publication July 26, 2018. Accepted August 10, 2018.

*Correspondence: Integra LifeSciences Corporation in Plainsboro, 311 Enterprise Drive, Plainsboro, NJ 08536
(email: dcartwright@integralife.com)

New technologies are continually developed for the wound care market. This article provides an overview of the process for obtaining a new or revised ICD-10-Clinical Modification and/or ICD-10-Procedure Coding System code. Manufacturers, providers and researchers often forget that this process can be lengthy and must be included in product development timelines. An example of timelines required for implementation of new 2020 ICD-10 codes is provided in the article. In addition, the article provides insight into the appropriate individuals, within a manufacturing organization or consulting firm, who may be able to assist with evaluating whether pertinent ICD-10 diagnosis or procedure codes exist within the ICD-10 coding system or whether an application must be submitted for one or more new/revised ICD-10 codes.

Keywords: ICD-10 codes, coding, inpatient, Centers for Medicare and Medicaid Services, National Center for HealthStatistics

INTRODUCTION

IN TODAY'S WOUND CARE environment many new technologies are developed every day. In addition, multiple coding systems are involved to code and bill for wound care services, procedures, and products.

- The ICD-10-Clinical Modification (ICD-10-CM) diagnosis coding system is utilized in all care settings for classification of diagnosis codes.
- The ICD-10-Procedure Coding System (ICD-10-PCS) is used for coding procedures performed in the inpatient hospital.
- The Current Procedural Terminology (CPT®*) coding system is used by physicians, other qualified health care professionals, and

hospital outpatient wound care provider-based departments.

- The Healthcare Common Procedure Coding System (HCPCS) is used to identify specific medical devices (e.g., cellular and/or tissue-based products for skin wounds, surgical dressings, negative pressure wound therapy durable medical equipment, etc.).

This article outlines the steps needed to evaluate whether a new wound care technology fits into an existing ICD-10-CM and/or ICD-10-PCS code and the timeline that must be built into a new wound care technology launch plan if a new code request is necessary.

WOUND CARE PROBLEM ADDRESSED

If a pertinent ICD-10-CM diagnosis code is not available to support the

*CPT is a registered trademark of the American Medical Association.

medical necessity for a new wound care technology, wound care providers will have a difficult time receiving payment, and patients will not have easy access to the new technology. Similarly, if a pertinent ICD-10-PCS procedure code is not available to appropriately describe a new wound care procedure performed in the inpatient hospital, the hospital will also have a difficult time receiving payment for the hospitalization. Therefore, researchers, physicians, and manufacturers should understand how to assess (1) whether current ICD-10 codes appropriately represent a new wound care technology and (2) whether they need to apply for one or more new ICD-10 code(s).

DISCUSSION

Enlist assistance from ICD-10 coding specialists and professional medical specialty societies

To begin the review of current ICD-10 codes, the new wound care technology stakeholders should work with the company reimbursement team/specialist who has expertise in ICD-10 coding. If the company does not have an ICD-10 coding specialist, the stakeholders should consider working with an outside consultant who has that level of expertise. The following credentials may indicate ICD-10 coding expertise:

- Member of American Health Information Management Association (AHIMA¹) whose credentials include Registered Health Information Administrator, Certified Coding Specialist (CCS), and/or AHIMA approved ICD-10 coding trainer.
- Member of American Academy of Procedural Coders (AAPC²) whose credentials may include Certified Inpatient Coder (CIC^{TM†}) and/or several other specialty credentials that are described on the AAPC website.

Members of these organizations usually have ICD-10-CM diagnoses coding experience and ICD-10-PCS procedure coding experience in the hospital inpatient setting.

If a new or revised ICD-10 code is needed, the new wound care technology stakeholders should obtain sponsorship from an appropriate professional medical specialty society. Physician support for new ICD-10 codes is extremely helpful when the code request is reviewed.

Ask questions to determine whether a new/revised ICD-10 code is needed

To determine whether current ICD-10-CM diagnosis codes adequately describe the disease state, severity of illness, and comorbid conditions that may be treated at the same time as the disease for which the new wound care technology is utilized, ICD-10 coding specialists should assist new technology wound care stakeholders answer these and other pertinent questions.

- What disease state does the new wound care technology treat?
- What are the potential complications that can occur when utilizing the new wound care technology, such as mechanical (shearing, dislodgement) or medical complications (infection, hematoma, etc.)?
- What patient populations will the new wound care technology serve, such as children, elderly, diabetics, and others, and what are the typical comorbidities of these patient populations?
- What are specific characteristics of the new wound care technology (*e.g.*, a right or left sided device) and is the new technology used on a specific body part?

After researching the answers to these and other pertinent questions, the ICD-10 coding professional should recommend if a new or revised diagnosis code is needed for the new wound care technology.

To determine whether a new/revised ICD-10-PCS procedure code is needed, the ICD-10 coding specialists should assist the new technology wound care stakeholders answer these and other pertinent questions:

- What definitive procedure will be performed?
- What is the actual approach for the procedure (*e.g.*, laparoscope, open, or percutaneous)?
- On what exact body part will the procedure be performed?
- Is the technology an implantable device or is it a topical application?
- Is the procedure always the primary procedure performed or is it commonly performed as a secondary procedure?

After researching the answers to these and other pertinent questions, the ICD-10 coding professional will identify the distinguishing factors of the new wound care technology procedure and will recommend whether a new or revised ICD-10-PCS code is needed.

[†]CIC is a registered trademark of the American Academy of Procedural Coders

Understand who reviews and approves ICD-10 coding requests

The ICD-10 Coordination and Maintenance (C&M) Committee is a public forum on ICD-10-CM and ICD-10-PCS code revisions and new codes. The Centers for Medicare & Medicaid Services (CMS³) and National Center on Health Statistics (NCHS⁴) co-chair these meetings, which are held twice a year. The CMS leads the process for updating the ICD-10-PCS procedure coding system. The CDC leads the process for changes to the ICD-10-CM diagnosis coding system.

Two months before a scheduled C&M meeting, wound care stakeholders, who need a new ICD-10 code or need to revise a current ICD-10 code pertinent to new wound care technology, should submit their proposed requests and recommendations. Proposals should be consistent with the ICD-10 structure and conventions of the classification and should include:

- Description of the requested new code(s) or code change(s)
- Rationale for why the new code/change is needed (including clinical relevancy)
- Supporting clinical references and literature

As stated earlier, ICD-10 code proposals carry more weight when they are supported by an appropriate professional medical specialty society. At the public meeting, physicians from the professional medical specialty society, and any other persons, have an opportunity to comment on these proposals. Final Decisions are made by the C&M Committee and are codified in the Inpatient Prospective Payment System Final Rule effective October 1 every year. Persons who submitted applications for new or revised ICD-10 codes should review the Final Rule

to learn whether their code request is included in the new ICD-10 code listing.

Incorporate the C&M Committee's timeline into the launch plan for new wound care technology

Requestors for new/revised ICD-10 codes should be aware of the C&M committee's timeline. Because the process can be lengthy, new wound care technology stakeholders should build the C&M committee's timeline into their launch plan. Table 1 depicts an example of the C&M committee's timeline for requesting or revising a code for implementation in April 2020 and October 2020.

The tentative agenda for the ICD-10-CM diagnosis portion of the C&M committee meeting is posted on the NCHS website.⁵ The tentative agenda for the ICD-10-PCS procedure portion of the C&M committee meeting is posted on the CMS website under the ICD-10-CM meeting materials by date under references.⁶

Any new ICD-10 codes required to capture new technology that will be implemented on the following April 1 will be announced. Information on any new codes to be implemented April 1, 2019 will be posted on the following the NCHS for diagnosis or CMS website for procedures under the ICD-10 coding sections.

Public Law 99-509 mandates that all new/revised ICD-10 codes, which will be implemented on October 1, must be included in the Hospital Inpatient Prospective Payment System (IPPS) Final Rule that is published in the Federal Register in August. The IPPS Final Rule includes links to all the final ICD-10 codes and can be accessed at the CMS website.⁷

The final addendum of new and revised ICD-10-CM diagnosis codes are available on the NCHS website⁵ and any final addendum of new and revised ICD-10-PCS codes are available on the CMS website.⁷

Final Thought: The C&M committee process is lengthy. Missing a C&M committee deadline could delay creation of a new ICD-10 code or revision of an existing ICD-10 code for a year. Therefore, if the ICD-10 coding professional can find existing ICD-10 codes that pertain to the new wound care technology, new wound care technology stakeholders will not have to build this lengthy ICD-10 process and timeline into the new technology launch plan.

ACKNOWLEDGMENTS AND FUNDING SOURCES

None declared.

Table 1. Example Coordination and Maintenance Committee ICD-10 Timeline

	April 2020; ICD-10 Code Implementation	October 2020; ICD-10 Code Implementation
Deadline to submit ICD-10 code proposal to CMS for procedures and to NCHS for diagnoses	July 2019	January 2020
Agenda for C&M public meeting posted	August 2019	February 2020
C&M public meeting to review code proposals	September 2019	March 2020
Deadline for public comments on proposals	October 2019	April 2020
New ICD-10 codes announced	November 2019	August 2020

C&M, Coordination & Maintenance; CMS, Centers for Medicare & Medicaid Services; NCHS, National Center for Health Statistics.

AUTHOR DISCLOSURE AND GHOSTWRITING

D.C. is an employee of Integra LifeSciences Corporation. The content of this article was written exclusively by the author listed. No ghostwriters were used to write the article. Information regarding coding, coverage, and payment is provided as a service to our readers. Every effort has been made to ensure the accuracy of the information. Providers, suppliers, and manufacturers are responsible for case-by-case assessment, documentation, and justification of medical necessity. However, the author does not represent, guarantee, or warranty that the coding, coverage, and payment information is error-free and/or that payment will be received. The ultimate responsibility for verifying coding, coverage, and payment information accuracy lies with the reader.

ABOUT THE AUTHOR

Donna Cartwright, MPA, RHIA, CCS, RAC, FAHIMA is Senior Director of Health Policy and Reimbursement for Integra LifeSciences Corporation in Plainsboro, NJ. Donna is an American

TAKE HOME MESSAGES

- The ICD-10-CM diagnosis and the ICD-10-PCS procedure coding systems are more specific than the predecessor ICD-9-CM and ICD-9-PCS coding systems.
- To ensure a new wound care technology has the proper ICD-10 coding in place for billing, data capture, and research wound care stakeholders should work with an ICD-10 coding professional.
- New technology wound care stakeholders should enlist an appropriate professional medical specialty society that will offer support during the ICD-10 request process.
- Wound care stakeholders should build ICD-10 timelines into their new wound care technology launch process to ensure appropriate ICD-10 codes are in place when the new wound care technology is launched.

Health Information Management Association approved ICD-10-CM/PCS Trainer and has been designated as a Fellow of the American Health Information Management Association. She is a member of the Editorial Advisory Board of Today's Wound Clinic magazine, member of the Association for the Advancement of Wound Care, and has presented and published on ICD-10 coding systems many times. Ms. Cartwright can be reached at 609-936-2265 for questions or via email at dcartwright@integralife.com

REFERENCES

1. American Health Information Management Association. www.AHIMA.com (last accessed October 1, 2018).
2. American Academy of Procedural Coding. www.AAPC.com (last accessed October 1, 2018).
3. Centers for Medicare and Medicaid Services Coordination and Maintenance Committee Website for Procedures. <https://www.cms.gov/Medicare/Coding/ICD10/ICD-10-Coordination-and-Maintenance-Committee-Meetings.html> (last accessed October 1, 2018).
4. National Center for Health Statistics Coordination and Maintenance Committee Website for Diagnosis. https://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm (last accessed October 1, 2018).
5. Centers for Disease Control and Prevention. National Center for Health Statistics: ICD-10-CM Coordination and Maintenance Committee. https://www.cdc.gov/nchs/icd/icd10cm_maintenance.htm (last accessed October 19, 2018).
6. Centers for Medicare and Medicaid Services. ICD-10 Coordination and Maintenance Committee Meetings. <https://www.cms.gov/Medicare/Coding/ICD10/ICD-10-Coordination-and-Maintenance-Committee-Meetings.html> (last accessed October 1, 2018).
7. Centers for Medicare & Medicaid Services. FY 2019 Final Rule Homepage. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2019-IPPS-Final-Rule-Home-Page.html> (last accessed October 19, 2018).

Abbreviations and Acronyms

AAPC	= American Academy of Procedural Coders
AHIMA	= American health Information Management Association
C&M	= Coordination and Maintenance Committee
CMS	= Centers for Medicare & Medicaid Services
ICD-10-CM	= International Classification of Disease Clinically Modified
ICD-10-PCS	= International Classification of Disease-Procedural Coding System
IPPS	= Inpatient Prospective Payment System
NCHS	= National Center for Health Statistics