MUST KNOW CODING GUIDELINES FOR
COVID-19

Are you aware of the updated coding guidelines and diagnosis codes to be used while encountering a Covid-19 patient? Top medical coding companies work as surveillance to capture the updated coding guidelines along with diagnosis codes for a better revenue cycle management service.

Accurate information on coverage, coding and payment services are provided by ensuring perfect medical coding practices are held accordingly. As Covid-19 is new to the world, healthcare professionals particularly care for the diagnosis codes as well as reporting work on medical claims and surveillance data.

Therefore, CMS and NCHS has presented a significant amount of ever changing details on diagnosis codes and coding guidelines those to be followed by healthcare professionals and top medical coding companies.

Brief Explanation of Coding and Guidance in April 1, 2020:

After declaration of Covid-19 pandemic by WHO on January 30,2020, WHO International Classification , Network Classifications and Statistic Advisory Committee arranged an immediate meeting to have a special discussion of medical code classification for covid-19 codes.

A new code for Coronavirus, International Classification of Diseases, Tenth Revision (ICD-10) emergency code (U07.1, 2019-nCov acute respiratory disease) was established by WHO.

The same coding system will be continued till October 1,2020 in United States of America. The updated codes of ICD-10-CM will be announced on October 1,2020.

However, NCHS has announced coding guidelines for ICD-10-CM that provides interim coding guidance related to the encounters of Covid-19 outbreak.

This Interim guidance was effective in top medical coding companies in February 20,2020. Specific codes B97.29 were assigned to identify Covid -19 and the causes of diseases classified elsewhere.

The above codes and guidelines are published for top medical coding companies for interval use until new code U07.1 is implemented on October 1,2020.

Due to Coronavirus outbreak, there was an immediate requirement to capture diagnosis codes and surveillance data when a new code and guidance was published by CDC (Centers of Disease Control).

ICD-10-CM Guidelines and Description:

Code only Confirmed Cases:

Healthcare professional documents a positive Covid-19 test result, or a presumptive positive Covid-19 test result.

For confirmed cases, diagnosis code assigned is U07.1, COVID-19.

The above code is an exception to the hospital inpatient guidelines section 2nd. In this particular context, it doesn't require any confirmation of the documentation on the test performed.

Presumptive positive Covid-19Covid-19test results must be coded as confirmed. A presumptive positive test results which means an individual has positively tested for the virus at state and local level but yet to confirm by Centres for Disease Control and Prevention(CDC) but it's no longer required.

If the healthcare professionals documents are mentioned as "suspected", "possible" or "probable", Covid-19, U07.1 are not to be assigned.

Explain and assign the codes with the reasons for encounter or just as fever with codes Z20.828.

Sequencing the diagnosis codes:

While Covid-19 encounters the definition of principal diagnosis U07.1, COVID-19 must be sequenced at the first placeplace followed by appropriate codes and associated manifestations except in the case of obstetrics patients as indicated in I.C.15.s for Covid-19 in pregnancy, childbirth and Pueperium in ICD-10-CM , 2020 top medical coding companies' official coding guidelines.

Acute Respiratory illness due to Covid-19:

Pneumonia :

For a pneumonia confirmed cases as due to COVID-19, assign codes U07.1 COVID-19 and J12.89 Other viral pneumonia.

Acute bronchitis:

For a patient with acute bronchitis confirmed as due to COVID-19, assign codes U07.1 COVID-19 and J20.8 Acute bronchitis due to other specified organisms. Bronchitis not otherwise specified (NOS) due to COVID-19 must be coded using code U07.1 COVID-19 and J40 Bronchitis, unspecified as acute or chronic.

Lower respiratory infection :

If COVID-19 is documented as it's associated with a lower respiratory infection, not otherwise specified (NOS), or an acute respiratory infection, NOS, codes U07.1 COVID-19 and J22 unspecified acute lower respiratory infection.

If COVID-19 is documented as being associated with a respiratory infection, NOS, codes U07.1 COVID-19 and J98.8 Other specified respiratory disorders, must be assigned.

Acute respiratory distress syndrome :

For acute respiratory distress syndrome (ARDS) due to COVID-19, top medical coding companies must assign codes U07.1 COVID-19 and J80 acute respiratory distress syndrome.

Exposure to Covid-19:

For cases which concerns about a present and possible exposure to COVID-19, but is ruled out after evaluation, assign code Z03.818 encounter for observation for suspected exposure to other biological agents ruled out.

For cases which has actual exposure to someone who is confirmed or suspected (not ruled out) to have COVID-19, and the exposed individual either tests negative or the test results are unknown, assign code Z20.828.
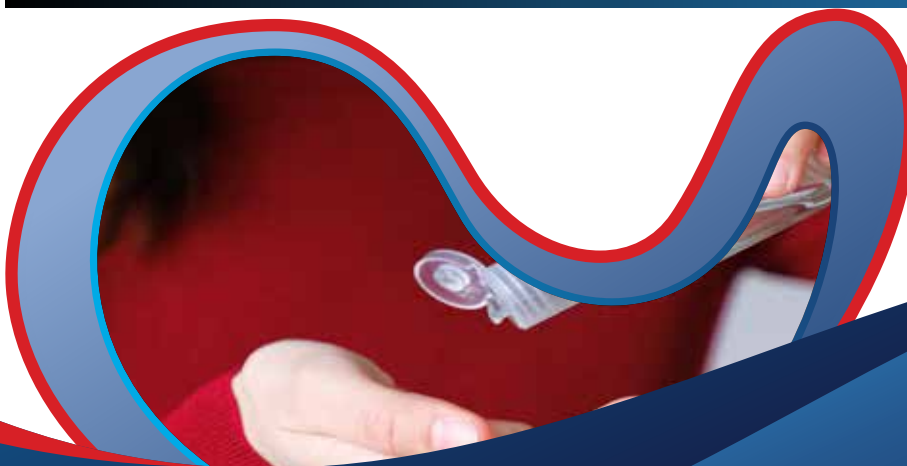
Screening for Covid-19:

For asymptomatic individuals who are screened for COVID-19 and have unknown exposure to the virus, and the test results are either unknown or negative, top medical coding companies can assign code Z11.59 encounter for screening for other viral diseases.

Signs and symptoms:

For patients associated with any signs and symptoms with COVID-19 (such as fever, etc.) but a definitive diagnosis has not been established, assign the appropriate codes for each of the applicable signs and symptoms such as:

- R05 Cough
- 02 Shortness of breath
- 9 Fever, unspecified

If a patient with signs and symptoms associated with COVID-19 also has an actual or suspected contact with exposure to someone with COVID-19, assign Z20.828.

Asymptomatic Individuals tested positive for Covid-19:

For asymptomatic individuals with positive COVID-19, assign code U07.1 COVID-19. For the reason, although the individual is asymptomatic, the individual has tested positive and is considered to have the COVID-19 infection.

Covid-19 infection during pregnancy, childbirth and Pueperium:

For pregnancy, childbirth or the puerperium, a patient admitted because of COVID-19 are supposed to receive a principal diagnosis code of O98.5- Other viral diseases complicating pregnancy, childbirth and the puerperium, followed by code U07.1 COVID-19, and the appropriate codes for associated manifestations.

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