

# Correct Codes Utilizing the AHA Coding Clinic<sup>®</sup>

Presented By:

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# Webinar Participant Tips

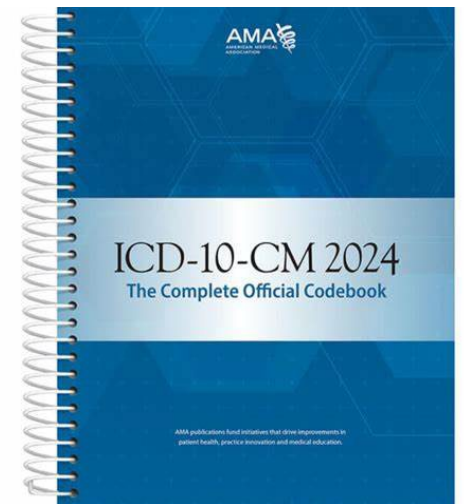
- All participant lines are muted. To protect your privacy, you will only see your name and the presenters names in the participant box.
  - To submit a question to the presenters any time during the event;
  - In the Event window, in the Panels drop-down list, select Q & A.
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# Objectives

- Define what the AHA Coding Clinic<sup>®</sup> is and why we use it
- Explain why the AHA Coding Clinic<sup>®</sup> should be used in the day-to-day operations of medical coding.
- Discuss why the AHA Coding Clinic<sup>®</sup> should be used in conjunction with the ICD-10-CM Guidelines
- Discuss the impact of not referencing the AHA Coding Clinic<sup>®</sup>
- Discuss steps your organization can take to make the AHA Coding Clinic<sup>®</sup> an integral part of your operations

# What is the AHA Coding Clinic®?

- AHA stands for the American Hospital Association
- A resource that is used to clarify ICD-10-CM/PCS correct code capture
- A coding resource that is updated quarterly to clarify new and revised codes as well as those that are not fully understood
- Answers to some questions submitted by individuals



# Poll

Does your organization utilize the AHA Coding Clinic®?

- A. Yes
- B. No
- C. Not sure



# Using the AHA Coding Clinic® in daily operations


- New codes or revised codes are often not clear
- Indexing in ICD-10-CM may be confusing
- Provider's documentation may not be indexable and the AHA CC® can help
- The ICD-10-CM official update is October 1<sup>st</sup> but the AHA CC® updates quarterly
- ICD-10-CM has updates within the year, periodically (*only visible on the CMS website or within some encoders*)
  - Examples – 1/2/2021, 4/1/2022 4/1/2023 and 4/1/2024


# Using the AHA Coding Clinic® in daily operations

- Example of when a condition cannot be indexed
  - Pseudogout of the knee
    - *Reference AHA Coding Clinic® 2018 Issue 3*

**M11.269** Other chondrocalcinosis, unspecified knee...

ICD-10-CM Diagnosis Codes



**M11.269** - Other chondrocalcinosis, unspecified knee 

ICD-9: 712.36

M11.2 Chondrocalcinosis NOS

# Using the AHA Coding Clinic® in daily operations

- Example of ICD-10-CM mid-year update

- ICD-10-CM 2024 Guidelines

7) **Aftercare**

Aftercare visit codes cover situations when the initial treatment of a disease has been performed and the patient requires continued care during the healing or recovery phase, or for the long-term consequences of the disease. The aftercare Z code should not be used if treatment is directed at a current, acute disease. The diagnosis code is to be used in these cases. Exceptions to this rule are codes Z51.0, Encounter for antineoplastic radiation therapy, and codes from subcategory Z51.1, Encounter for antineoplastic chemotherapy and immunotherapy. These codes are to be first listed, followed by the diagnosis code when a patient's encounter is **solely** to receive radiation therapy, chemotherapy, or immunotherapy for the treatment of a neoplasm. If the reason for the encounter is more than one type of antineoplastic therapy, code Z51.0 and a code from subcategory Z51.1 may be assigned together, in which case one of these codes would be reported as a secondary diagnosis.

- ICD-10-CM 2024 Guidelines – Updated 4/1/2024

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# The AHA CC<sup>®</sup> and ICD-10-CM Connection



- Excludes 1 more thoroughly explained
  - *Constipation and Fecal Impaction Q2 2024*
- Code also notes
  - *COPD and Asthma Q2 2024*
- ICD-10-CM Guidelines confusion
  - *In (due to), with, causal...what do I do? Dementia and epilepsy Q2 2024*
- Coding scenarios and clarifications
  - *Hierarchical Condition Category (HCC) Coding Q2 2022*
  - *Code Assignment Based on Up and Down Arrows Q1 2011*
- ICD-10-CM is about code capturing but not HOW to capture the code


# The AHA CC<sup>®</sup> and ICD-10-CM Connection

- Example of confusion with Excludes 1
  - Constipation with Fecal Impaction
    - Reference AHA Coding Clinic<sup>®</sup> 2024 Issue 2

**K59.00** Constipation, unspecified...



ICD-10-CM Diagnosis Codes


 

**K59.00** - Constipation, unspecified 



ICD-9: 564.00

K59.0 Excludes1: fecal impaction (K56.41)




**K56.41** Fecal impaction... 

ICD-10-CM Diagnosis Codes

  **Code Changed 2023-10-01: Full Description Changed.**

**K56.41** - Fecal impaction

Excludes1: constipation (K59.0-) 

# The AHA CC<sup>®</sup> and ICD-10-CM Connection

- Example of confusion with indexing and the code also note
  - Asthma with COPD
    - *Reference AHA Coding Clinic<sup>®</sup> 2024 Issue 2*

index ICD-10-CM Index

term Disease, diseased lung x

+ obstructive (chronic) J44.9 MCC

10. Diseases of the respiratory system (J00-J99)

J40-J47 Chronic lower respiratory diseases (J40-J47)

J44 Other chronic obstructive pulmonary disease

J44.9 Chronic obstructive pulmonary disease, unspecified MCC

+ with

- + acute
- + alveolitis, allergic J67.9 MCC
- + asthma J44.9 MCC

index ICD-10-CM Index

term Asthma, asthmatic (bronchial) (catarrh) (spasmodic) x

+ Asthma, asthmatic (bronchial) (catarrh) (spasmodic) J45.909 MCC

10. Diseases of the respiratory system (J00-J99)

J40-J47 Chronic lower respiratory diseases (J40-J47)

J45 Asthma

J45.9 Other and unspecified asthma

J45.90 Unspecified asthma

J45.909 Unspecified asthma, uncomplicated MCC

+ with

- + chronic obstructive bronchitis J44.89 MCC
- + chronic obstructive pulmonary disease J44.89 MCC

J44.89 Other specified chronic obstructive pulmonary disease...

ICD-10-CM Diagnosis Codes

Code Added 2023-10-01

J44.89 - Other specified chronic obstructive pulmonary disease

Chronic asthmatic (obstructive) bronchitis

Chronic emphysematous bronchitis

J44 Includes:

- asthma with chronic obstructive pulmonary disease
- chronic asthmatic (obstructive) bronchitis
- chronic bronchitis with airway obstruction
- chronic bronchitis with emphysema
- chronic emphysematous bronchitis
- chronic obstructive asthma
- chronic obstructive bronchitis
- chronic obstructive tracheobronchitis

Code Also type of asthma, if applicable (J45.-) ←

# The AHA CC<sup>®</sup> and ICD-10-CM Connection

- Example of confusion with in (due to), with and causal relationships
  - Dementia and Epilepsy F03.90/G40.909 or G40.909/F02.80
    - *Reference AHA Coding Clinic<sup>®</sup> 2024 Issue 2*

## 15. “With”

The word “with” or “in” should be interpreted to mean “associated with” or “due to” when it appears in a code title, the Alphabetic Index (either under a main term or subterm), or an instructional note in the Tabular List. The classification presumes a causal relationship between the two conditions linked by these terms in the Alphabetic Index or Tabular List. These conditions should be coded as related even in the absence of provider documentation explicitly linking them, unless the documentation clearly states the conditions are unrelated or when another guideline exists that specifically requires a documented linkage between two conditions (e.g., sepsis guideline for “acute organ dysfunction that is not clearly associated with the sepsis”).

For conditions not specifically linked by these relational terms in the classification or when a guideline requires that a linkage between two conditions be explicitly documented, provider documentation must link the conditions in order to code them as related.

The word “with” in the Alphabetic Index is sequenced immediately following the main term or subterm, not in alphabetical order.

index ICD-10-CM Index

term Dementia (degenerative (primary)) (old age) (persisting) (unspecified severity) (without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety) x

+ in (due to)

- + alcohol F10.97 [MCC]
- Alzheimer's disease - see Disease, Alzheimer's
- arteriosclerotic brain disease - see Dementia, vascular
- + cerebral lipidoses E75.- [F02.80] [MCC] - see also Dementia, in, diseases specified elsewhere
- + Creutzfeldt-Jakob disease A81.00 [MCC] - see also Creutzfeldt-Jakob disease or syndrome (with dementia)
- + diseases specified elsewhere (unspecified severity) (without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety) F02.80 [MCC]
- + epilepsy G40.- [F02.80] [MCC] - see also Dementia, in, diseases specified elsewhere

# Poll

Based on our discussion so far, how more likely are you to use the AHA CC®?

- A. More likely than my current use
- B. About the same, no change
- C. Definitely, because I wasn't using it previously or wasn't familiar with how to use it/why to use it
- D. I'm still not convinced because I need to see/know more about it

# The Impact

- By not using the AHA CC®
  - Possible loss of revenue
  - Possible over/undercoding
- By investing in the AHA CC®
  - Correct coding resulting in proper reimbursement
  - Clean claims being submitted



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# How can you make the AHA CC<sup>®</sup> part of your organization?

- Test it out – You can do a trial.
- Decide what is best for your organization.
  - Print (Digital)/add-on
  - Who will have access
- Add-on to your existing encoder program
  - Common encoders – Find-A-Code, Encoder Pro, HCC Coder
- Have your training department keep up with the updates
- Don't take shortcuts
  - Do not share logins, Do not copy and paste, Do reference often



# Resources

AHA Coding Clinic<sup>®</sup> Advisor

<https://www.codingclinicadvisor.com/>

Find-A-Code

<https://www.findacode.com/index.html>



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THANK YOU