HIM-2160: Coding with ICD-10-CM

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HIM-2160: CODING WITH ICD-10-CM

Cuyahoga Community College

Viewing: HIM-2160: Coding with ICD-10-CM

Board of Trustees:

March 2021

Academic Term:

Fall 2021

Subject Code

HIM - Health Information Management

Course Number:

2160

Title:

Coding with ICD-10-CM

Catalog Description:

Principles, theories, concepts and applications required to code diseases and procedures using the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Classification System.

Credit Hour(s):

2

Lecture Hour(s):

1

Lab Hour(s):

3

Requisites

Prerequisite and Corequisite

BIO-2341 Anatomy and Physiology II, and HIM-1301 Introduction to Health Information Management and departmental approval: Program Manager approval.

Outcomes

Course Outcome(s):

Articulate the recent evolution of diagnostic coding in health care.

Essential Learning Outcome Mapping:

Not Applicable: No Essential Learning Outcomes mapped. This course does not require application-level assignments that demonstrate mastery in any of the Essential Learning Outcomes.

Objective(s):

- 1. Discuss the history of the development of clinical vocabularies.
- 2. Explain the standards mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA).
- 3. Explain the Health Insurance Portability and Accountability Act (HIPAA) Electronic Transactions and Coding Standards Rule.
- 4. Discuss the Medicare Prescription Drug, Improvement, and Modernization Act of 2003
- 5. Explain the purpose of the Coordination and Maintenance Committee

Course Outcome(s):

Validate the principles of ICD-10-CM coding.

Essential Learning Outcome Mapping:

Not Applicable: No Essential Learning Outcomes mapped. This course does not require application-level assignments that demonstrate mastery in any of the Essential Learning Outcomes.

Objective(s):

- 1. Describe the format of the Tabular List of Diseases and Injuries
- 2. Identify the chapters and subchapters or blocks used in ICD-10-CM
- 3. Identify and define the sub-terms, carryover lines, nonessential modifiers, and eponyms used in ICD-10-CM
- 4. Recognize the contents of the ICD-10-CM Appendices
- 5. Explain the format of the Alphabetic Index to Diseases found in ICD-10-CM
- 6. Identify and define the cross-reference terms and instructional notes used in ICD-10-CM
- 7. Describe the rules for multiple coding
- 8. Explain how connecting words are used in the Alphabetic Index
- 9. Apply the symbols, punctuation, and abbreviations used in ICD-10-CM

Course Outcome(s):

Evaluate and assign appropriate diagnosis codes from the current ICD-10-CM code set

Essential Learning Outcome Mapping:

Not Applicable: No Essential Learning Outcomes mapped. This course does not require application-level assignments that demonstrate mastery in any of the Essential Learning Outcomes.

Objective(s):

- 1. Describe the medical documentation that must be present to select an ICD-10-CM code
- 2. Describe coding conventions for 1CD-10-CM
- 3. Identify etiology and manifestation conventions
- 4. Identify cross-references and other terms used in ICD-10-CM
- 5. Describe general coding guidelines
- 6. Apply multiple coding for a single condition
- 7. Understand and apply basic steps in selecting appropriate ICD-10-CM coding.

Course Outcome(s):

Apply the ICD-10-CM Official Guidelines for Coding and Reporting when coding diagnoses for outpatient services.

Essential Learning Outcome Mapping:

Not Applicable: No Essential Learning Outcomes mapped. This course does not require application-level assignments that demonstrate mastery in any of the Essential Learning Outcomes.

Objective(s):

- 1. Determine and select the appropriate conventions used in ICD-10-CM
- 2. Identify and define Carryover Lines
- 3. Identify and define Nonessential Modifiers
- 4. Identify and define an Eponym
- 5. Identify and appropriately apply "see" and "see also" instructions
- 6. Understand and apply "Code Also" notations
- 7. Understand and apply abbreviations
 - a. NEC: not elsewhere classified
 - b. NOS: not otherwise specified
- 8. Understand and apply punctuation
 - a. Brackets []
 - b. Parenteses ()
 - c. Colon:
- 9. Identify and apply instructional notes
- 10. Identify and apply "Includes" and "Excludes" notations

Course Outcome(s):

Identify and apply chapter specific coding guidelines

Essential Learning Outcome Mapping:

Not Applicable: No Essential Learning Outcomes mapped. This course does not require application-level assignments that demonstrate mastery in any of the Essential Learning Outcomes.

Objective(s):

1. Apply chapter specific coding guidelines for all chapters and body systems listed in the ICD-10-CM coding book.

Methods of Evaluation:

- 1. Homework assignments
 - a. Identifying correct ICD-10-CM diagnosis codes
- 2. Quizzes
- 3. Tests
- 4. Midterm examination
- 5. Final examination
- 6. Student participation and interaction

Course Content Outline:

- 1. Introduction to coding and coding professions
 - a. History of the development of clinical vocabularies
 - b. Coding professions
 - c. Health insurance portability and accountability act of 1996 (HIPAA) standards
- 2. An overview of ICD-10-CM
 - a. Chapters
 - i. Titles
 - ii. Correspond codes
 - b. ICD-10-clinical modification conventions
 - c. Medical record as a source document
- 3. Conventions used in ICD-10-CM
 - a. Description of conventions
 - b. Abbreviations
 - i. NOS
 - ii. NEC
 - c. Symbols
 - d. Instructional notes
 - e. Type 1 and type 2 excludes notes
- 4. Steps in diagnostic code selection
 - a. Required medical documentation to select an ICD-10-CM code
 - b. Steps to select diagnostic codes based on ICD-10-CM Official guidelines for coding and reporting
 - c. Main terms that are referenced in the alphabetic index of ICD-10-CM
 - d. Steps in coding
 - e. Key terms in diagnostic code selection
 - i. granularity
 - ii. laterality
- 5. Diagnostic coding guidelines
 - a. Cooperating parties for ICD-10-CM
 - b. Purpose of the ICD-10-CM official guidelines for coding and reporting
 - c. Four sections of the ICD-10-CM official guidelines for coding and reporting
 - d. Guidelines for inpatient versus outpatient and physician office visits
 - e. Guidelines for sequencing and diagnostic codes
 - i. Selection of principal diagnosis
 - ii. Reporting additional diagnoses
 - f. Key terms related to diagnostic coding guidelines
 - i. Combination code
 - ii. Late effect
 - iii. Principal diagnosis
 - iv. Secondary diagnosis
- 6. Infectious and parasitic diseases
 - a. Key terms in the infectious and parasitic diseases section
 - b. Differentiating between infectious and parasitic diseases
 - c. Single-code, combination-code, and dual-code assignment

- d. Coding of symptomatic and asymptomatic causes of HIV
- e. Types of hepatitis and the code for each
- f. Infectious and parasitic disease codes using the ICD-10-CM system
- g. Case studies
- 7. Neoplasms
 - a. Groups of neoplasms classified in ICD-10-CM
 - b. Coding guidelines that relate to neoplasms
 - c. Comparison of the ICD-9-CM and the ICD-10-CM code systems
 - d. Key terms related to neoplasms
 - e. Case studies
- 8. Diseases of the blood and blood-forming organs
 - a. Three types of blood cells
 - b. Diseases of the blood and blood-forming organs
 - c. Codes for diseases of the blood and blood-forming organs
 - d. Case studies
- 9. Endocrine, nutritional, and metabolic diseases
 - a. Influence of hormones on functions within the body
 - b. Different types of diabetes
 - c. Selecting ICD-10-CM codes for the various types of diabetes
 - d. ICD-10-CM coding guidelines for diabetes and endocrine, nutritional and metabolic diseases
 - e. Case studies
- 10. Mental and behavioral disorders
 - Mental health disorders and conditions and key terms related to these disorders
 - b. Sequencing of codes for drug and alcohol abuse and dependence
 - c. Coding for this specialty vs. coding from the other specialties
 - d. Challenges of coding for this specialty
 - e. Comparison of the ICD-9-CM and the ICD-10-CM coding systems for these disorders
 - f. Case studies
- 11. Diseases of the nervous system
 - a. Major structures of the nervous system
 - b. Conditions that involve the nervous system
 - c. Case studies
- 12. Disorders of the eye and adnexa
 - a. Major structures of the eye and adnexa
 - b. Disorders that impact the eye and adnexa
 - c. Coding disorders of the eye and adnexa
 - d. Case studies
- 13. Diseases of the ear and mastoid process
 - a. Major structures of the ear and mastoid process
 - b. Anatomy of the ear
 - c. Coding disorders of the ear and mastoid process
 - d. Case studies
- 14. Diseases of the circulatory system
 - a. Diseases of the circulatory system
 - b. ICD-10-CM guidelines for diseases of the circulatory system
 - c. Types of hypertension and the codes for each
 - d. Coding diseases of the circulatory system
 - Key terms related to the circulatory system
 - f. Case studies
- 15. Diseases of the respiratory system
 - a. Major structures of the respiratory system
 - b. Diseases and conditions that impact the respiratory system
 - c. Terminology associated with the respiratory system
 - d. Coding guidelines for diseases of the respiratory system
 - e. Diagnostic codes for conditions and diseases of the respiratory system
 - f. Case studies
- 16. Diseases of the digestive system

- a. Anatomical structures of the digestive system
- b. Conditions that are related to the digestive system
- c. Coding related to the different conditions encountered in the digestive system
- d. Diagnostic codes to diagnoses for the digestive system
- e. Case studies
- 17. Diseases of the skin and subcutaneous tissue
 - a. Layers of the skin
 - b. Conditions and diagnoses related to the skin and subcutaneous tissue
 - c. Coding diagnoses of diseases of the skin and subcutaneous tissue
 - d. Case studies
- 18. Diseases of the musculoskeletal system and connective tissue
 - a. Identify the anatomical structures of the musculoskeletal system
 - b. Explain the conditions and disorders that affect the musculoskeletal system
 - c. Coding guidelines related to the conditions encountered in the musculoskeletal system
 - d. Coding guidelines for coding acute fractures versus aftercare
 - e. Case studies
- 19. Diseases of the genitourinary system
 - a. Anatomical structures of the urinary system
 - b. Anatomical structures of the male and female genital tracts
 - c. Conditions related to the genitourinary system
 - d. Coding quidelines related to the conditions encountered in the genitourinary system
 - e. Case studies
- 20. Pregnancy, childbirth, and the puerperium
 - a. Stages of pregnancy
 - b. Complications encountered during pregnancy and how they affect code assignment
 - c. Coding guidelines related to the coding of this section
 - d. Use of the final character indicating the code for a trimester of pregnancy
 - e. Different types of abortions and explain how the code assignments are affected
 - f. Case studies
- 21. Conditions originating in the perinatal period
 - a. Perinatal conditions of the mother affecting the fetus or newborn
 - b. Conditions that may affect the fetus or newborn
 - c. Perinatal conditions
 - d. Case studies
- 22. Congenital malformations, deformations, and chromosomal abnormalities
 - a. Difference between the terms congenital anomaly and deformity
 - b. Conditions related to this section
 - c. Congenital vs. acquired conditions
 - d. Case studies
- 23. Symptoms, signs, and abnormal clinical laboratory findings
 - a. Terms used in locating codes for symptoms, signs, and ill-defined conditions
 - b. Coding guidelines that relate to "Symptoms, Signs, and Abnormal Clinical Laboratory Findings Not Elsewhere Classified"
 - c. Code signs, symptoms, and ill-defined conditions from cases studies
- 24. Injury, poisoning, and certain other consequences of external causes
 - a. Combination codes for injuries
 - b. Various types of fractures
 - c. Abrasions, contusions, and superficial and complex injuries
 - d. Types of open wounds
 - e. Coding guidelines that relate to injuries and poisoning
 - f. Case studies
- 25. External causes of morbidity
 - a. What "external cause" means and when it is appropriately assigned
 - b. Sequencing of the V, W, X and Y codes
 - c. Case studies
- 26. Factors influencing health status and contact with health services
 - a. Purpose of Z codes and identify key terms used to locate Z codes
 - b. Encounters for which Z codes are used

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- c. V codes in ICD-9-CM vs. Z codes in ICD-10-CM
- d. Case studies

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Resources

Lou Ann Schraffenberger, MBA, RHIA, CCS, CCS-P, FAHIMA. (2020) Basic ICD-10-CM + ICD-10-PCS CODING, Chicago: Ingenix.

Nanette Sayles, . (2020) *Health Information Management Technology an Applied Approach*, Chicago: American Health Information Management Association.

American Medical Association. (2021) ICD-10-CM Official Code book, Baltimore: American Medical Association.

Mary Jo Bowie, MS, BS, RHIA. (2020) Understanding ICD-10-CM and ICD-10-PCS: A Worktext, Boston: Cengage.

Resources Other

- 1. Journal of the AHIMA/American Health Information Management Association, Chicago, IL: The Association, Monthly publication.
- 2. 3M Clinical Coding Encoder Software
- 3. Internet searches for diagnostic conditions

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