# Tackling the ICD-10-PCS Approaches

Save to myBoK

### by Melanie Endicott

There are only seven approach values in ICD-10-PCS, so one would think that selecting the correct approach value would be simple, but it's not! Let's take a closer look at these seven approaches and then walk through some challenging cases.

## Open (0)

- Definition: Cutting through the skin or mucous membrane and any other body layers necessary to expose the site of the procedure
- Example: Abdominal hysterectomy

#### Percutaneous (3)

- Definition: Entry, by puncture or minor incision, of instrumentation through the skin or mucous membrane and/or any other body layers necessary to reach the site of the procedure
- Example: Needle biopsy of liver

## Percutaneous Endoscopic (4)

- Definition: Entry, by puncture or minor incision, of instrumentation through the skin or mucous membrane and/or any other body layers necessary to reach <u>and visualize</u> the site of the procedure
- Example: Knee arthroscopy

#### Via Natural or Artificial Opening (7)

- Definition: Entry of instrumentation through a natural or artificial external opening to reach the site of the procedure
- Example: Foley catheter placement

### Via Natural or Artificial Opening Endoscopic (8)

- Definition: Entry of instrumentation through a natural or artificial external opening to reach <u>and visualize</u> the site of the procedure
- Example: Sigmoidoscopy

# Via Natural or Artificial Opening Endoscopic with Percutaneous Endoscopic Assistance (F)

- Definition: Entry of instrumentation through a natural or artificial external opening and entry, by puncture or minor incision, of instrumentation through the skin or mucous membrane and any other body layers necessary to aid in the performance of the procedure
- Example: Laparoscopic-assisted vaginal hysterectomy

#### External (X)

- Definition: Procedures performed directly on the skin or mucous membrane and procedures performed indirectly by the application of external force through the skin or mucous membrane
- Example: Closed fracture reduction

# Case 1

Assign the code for an endobronchial ultrasound (EBUS) guided transbronchial biopsy of an intrathoracic lymph node.

Section Body System Operation	Medical and Surgical     Lymphatic and Hemic Systems     Excision: Cutting out or off, without replacement, a portion of a body part						
Body Part		Approach	Device	Qualifier			
O Lymphatic, Head Lymphatic, Right Lymphatic, Left N Lymphatic, Left U Lymphatic, Left U Lymphatic, Right Lymphatic, Right Lymphatic, Left A Lymphatic, Intern Lymphatic, Intern Lymphatic, Intern Lymphatic, Mese Lymphatic, Mese Lymphatic, Aortic Lymphatic, Aortic Lymphatic, Right Lymphatic, Left L Lymphatic, Right Lymphatic, Left L Lymphatic, Left In Lymphatic, Right Lymphatic, Right Lymphatic, Pleis Lymphatic, Right Lymphatic, Pleis Lymphatic, Right Lym	Neck leck Upper Extremity Axillary exillary axillary exillary exil	Open     Percutaneous     Percutaneous Endoscopic	<b>Z</b> No Device	X Diagnostic Z No Qualifier			

Let's build our code from the table above.

• Section: 0, Medical and Surgical

• Body System: 7, Lymphatic and Hemic Systems

• Root Operation: B, Excision

• Body Part: 7, Lymphatic, Thorax

• Approach: 4, Percutaneous Endoscopic

Device: Z, No DeviceQualifier: X, Diagnostic

Final Code: 07B74ZX

**Rationale:** The coder may be looking for the approach value 8, Via Natural or Artificial Opening Endoscopic, for this procedure; however, it is not present in this table. Careful review of the definition of approach value 8 reveals that procedures performed using this technique are performed within the orifice or tubular body part, without passing the lumen wall to get to a different body part. Since the wall of the bronchus is punctured and the scope is passed through the wall to reach the intrathoracic lymph node, the correct approach is 4, Percutaneous Endoscopic. A similar case was published in the *AHA Coding Clinic for ICD-10-CM and ICD-10-PCS* in 4<sup>th</sup> Quarter 2013, pages 111-112.

# Case 2

A melanoma is widely excised to the depth of the subcutaneous tissue and fascia of the right upper leg.

Section Body System	Medical and Surgical     Subcutaneous Tissue and Fascia			
Operation	B Excision: Cutting out or off, without re	placement, a portion of a	a body part	
Body Part		Approach	Device	Qualifier
1 Subcutaneous 4 Subcutaneous 5 Subcutaneous 6 Subcutaneous 8 Subcutaneous 9 Subcutaneous 9 Subcutaneous D Subcutaneous C Subcutaneous D Subcutaneous G Subcutaneous K Subcutaneous J Subcutaneous K Subcutaneous K Subcutaneous C Subcutaneous	Tissue and Fascia, Scalp Tissue and Fascia, Face Tissue and Fascia, Anterior Neck Tissue and Fascia, Posterior Neck Tissue and Fascia, Chest Tissue and Fascia, Back Tissue and Fascia, Buttock Tissue and Fascia, Buttock Tissue and Fascia, Perineum Tissue and Fascia, Pelvic Region Tissue and Fascia, Right Upper Arm Tissue and Fascia, Right Upper Arm Tissue and Fascia, Right Lower Arm Tissue and Fascia, Right Lower Arm Tissue and Fascia, Right Hand Tissue and Fascia, Right Upper Leg Tissue and Fascia, Left Upper Leg Tissue and Fascia, Right Lower Leg Tissue and Fascia, Right Lower Leg Tissue and Fascia, Right Lower Leg Tissue and Fascia, Right Foot Tissue and Fascia, Right Foot	0 Open 3 Percutaneous	Z No Device	X Diagnostic Z No Qualifier

Using the above table, we will construct our code.

- Section: 0, Medical and Surgical
- Body System: J, Subcutaneous Tissue and Fascia
- Root Operation: B, Excision
- Body Part: L, Subcutaneous Tissue and Fascia, Right Upper Leg
- Approach: 0, OpenDevice: Z, No DeviceQualifier: Z, No Device

Final Code: 0JBL0ZZ

**Rationale:** The coder may be looking for a device value of X, External, for this procedure; however, the definition of the External approach states that the procedure is performed on the skin and mucous membranes. Since the subcutaneous tissue and fascia is excised, using a wide excision, the correct approach value is 0, Open.

# References

AHA. AHA Coding Clinic for ICD-10-CM and ICD-10-PCS. 4th Quarter 2013, pages 111-112.

CMS. 2015 Code Tables and Index. <a href="http://cms.hhs.gov/Medicare/Coding/ICD10/2015-ICD-10-PCS-and-GEMs.html">http://cms.hhs.gov/Medicare/Coding/ICD10/2015-ICD-10-PCS-and-GEMs.html</a>.

Melanie Endicott, MBA/HCM, RHIA, CDIP, CCS, CCS-P, FAHIMA, is senior director of HIM practice excellence, coding and CDI products development at AHIMA. She has over 15 years experience in HIM and coding, with her most recent focus being in ICD-10-CM/PCS, and has presented numerous times at the regional, state, and national levels on HIM and coding topics. She was previously a director of HIM practice excellence, focusing on coding products, resources, and education, at AHIMA. Melanie is an AHIMA-approved ICD-10-CM/PCS trainer and an ICD-10 Ambassador.

#### Original source:

Endicott, Melanie. "Tackling the ICD-10-PCS Approaches" (<u>Journal of AHIMA website</u>), May 13, 2015.

# Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.