

What's New with Coding Non-Pressure Ulcers

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Many ICD-10-CM codes were added throughout code category L97, Non-pressure chronic ulcer of the lower limb, not elsewhere classified, and subcategory L98.4, Non-pressure chronic ulcer of the skin, not elsewhere classified, to provide further description to laterality and severity. These fiscal year (FY) 2018 ICD-10-CM new codes are to be used for discharges and encounters effective October 1, 2017.

Origin of the New Non-Pressure Ulcer Codes

According to the Centers for Medicare and Medicaid Services' ICD-10 Coordination and Maintenance Committee Meeting (Diagnosis Agenda), held on March 9, 2016 and March 10, 2016, the Association of Home Care Coding and Compliance (AHCC) proposed the creation of these new non-pressure ulcer codes. These codes were proposed in the hopes of capturing additional severity levels of non-pressure chronic ulcers of the lower limb. AHCC conveyed that these types of chronic ulcers of the lower extremities are common in the post-acute setting and often require considerable resources over a long period of time. Often, the providers are not specific enough in their documentation and do not provide the level of detail needed to use these newly created codes.

Code Additions

There were 63 new codes created in subcategories L97.1 through L97.9 that cover non-pressure chronic ulcers of the lower limbs. There were also nine new codes added to subcategory L98.4, Non-pressure chronic ulcer of the skin, not elsewhere classified.

These newly created codes allow the coding professional to be able to convey the severity of a large variety of non-pressure ulcers that have not previously been able to be coded with specificity beyond the general physical location of the lower limb.

Alphabetical Index Changes

In conjunction with the code additions, the ICD-10-CM Alphabetical Index has also been changed to match the new codes that were added. You will find the changes under the main term Ulcer, ulcerated, ulcerating, ulceration, ulcerative; sub term lower limb. There are new sub terms for each body site that include:

- Bone Involvement without evidence of necrosis
- Muscle Involvement without evidence of necrosis
- Specified Severity

An example of an Alphabetical Index added change is:

- Ulcer, ulcerated, ulcerating, ulceration, ulcerative
 - lower limb – L97.909
 - with
 - bone involvement without evidence of necrosis L97.906
 - muscle involvement without evidence of necrosis L97.905
 - specified severity NEC L97.908

ICD-10-CM Official Guidelines for Coding and Reporting FY2018

There has been expansion regarding documentation and coding of non-pressure ulcers. The following example comes from the ICD-10-CM Official Guidelines for Coding and Reporting FY 2018. Guideline I.B.14 has not changed but should be reviewed:

Documentation for BMI, Depth of Non-pressure ulcers, Pressure Ulcer Stages, Coma Scale, and NIH Stroke Scale

For the Body Mass Index (BMI), depth of non-pressure chronic ulcers, pressure ulcer stage, coma scale, and NIH stroke scale (NIHSS) codes, code assignment may be based on medical record documentation from clinicians who are not the patient's provider (i.e., physician or other qualified healthcare practitioner legally accountable for establishing the patient's diagnosis), since this information is typically documented by other clinicians involved in the care of the patient (e.g., a dietitian often documents the BMI, a nurse often documents the pressure ulcer stages, and an emergency medical technician often documents the coma scale). However, the associated diagnosis (such as overweight, obesity, acute stroke, or pressure ulcer) must be documented by the patient's provider. If there is conflicting medical record documentation, either from the same clinician or different clinicians, the patient's attending provider should be queried for clarification.

The following guidelines, I.C.12.b.1 through I.C.12.b.3, were newly created specifically for non-pressure chronic ulcers.

1. Patients admitted with non-pressure ulcers documented as healed. No code is assigned if the documentation states that the non-pressure ulcer is completely healed.
2. Patients admitted with non-pressure ulcers documented as healing. Non-pressure ulcers described as healing should be assigned the appropriate non-pressure ulcer code based on the documentation in the medical record. If the documentation does not provide information about the severity of the healing non-pressure ulcer, assign the appropriate code for unspecified severity.
If the documentation is unclear as to whether the patient has a current (new) non-pressure ulcer or if the patient is being treated for a healing non-pressure ulcer, query the provider.
For ulcers that were present on admission but healed at the time of discharge, assign the code for the site and severity of the non-pressure ulcer at the time of admission.
3. Patient admitted with non-pressure ulcer that progresses to another severity level during the admission. If a patient is admitted to an inpatient hospital with a non-pressure ulcer at one severity level and it progresses to a higher severity level, two separate codes should be assigned: one code for the site and severity level of the ulcer on admission and a second code for the same ulcer site and the highest severity level reported during the stay.

Codebook Tabular Examples

Even though the instructional note area in the ICD-10-CM codebook did not change, it is still important to pay close attention to the "Code first" list at the beginning of the L97 category:

Code first any associated underlying conditions, such as:

- any associated gangrene (I96)
- atherosclerosis of the lower extremities (I70.23-, I70.24-, I70.33-, I70.34-, I70.43-, I70.44-, I70.53-, I70.54-, I70.63-, I70.64-, I70.73-, I70.74-)
- chronic venous hypertension (I87.31-, I87.33-)
- diabetic ulcers (E08.621, E08.622, E09.621, E09.622, E10.621, E10.622, E11.621, E11.622, E13.621, E13.622)
- postphlebotic syndrome (I87.01-, I87.03-)
- postthrombotic syndrome (I87.01-, I87.03-)
- varicose ulcer (I83.0-, I83.2-)

In accordance with the "Code first" list, these underlying conditions for the non-pressure ulcer should be coded first if documented in the medical record.

As previously mentioned, there were 63 added codes to the L97.2 subcategory. The following list includes a few of the additions under the L97.2 subcategory. Notice that the sixth character of 5, 6, and 8 have been added to each subcategory.

- L97.2, Non-pressure chronic ulcer of calf
 - L97.205, Non-pressure chronic ulcer of unspecified calf with muscle involvement without evidence of necrosis
 - L97.206, Non-pressure chronic ulcer of unspecified calf with bone involvement without evidence of necrosis
 - L97.208, Non-pressure chronic ulcer of unspecified calf with other specified severity
- L97.21, Non-pressure chronic ulcer of right calf
 - L97.215, Non-pressure chronic ulcer of right calf with muscle involvement without evidence of necrosis
 - L97.216, Non-pressure chronic ulcer of right calf with bone involvement without evidence of necrosis
 - L97.218, Non-pressure chronic ulcer of right calf with other specified severity
- L97.22, Non-pressure chronic ulcer of left calf
 - L97.225, Non-pressure chronic ulcer of left calf with muscle involvement without evidence of necrosis
 - L97.226, Non-pressure chronic ulcer of left calf with bone involvement without evidence of necrosis
 - L97.228, Non-pressure chronic ulcer of left calf with other specified severity

Some new codes added under the L98.4- subcategory include:

- L98.41, Non-pressure chronic ulcer of skin, not elsewhere classified
- L98.415, Non-pressure chronic ulcer of buttock with muscle involvement without evidence of necrosis
- L98.416, Non-pressure chronic ulcer of buttock with bone involvement without evidence of necrosis
- L98.418, Non-pressure chronic ulcer of buttock with other specified severity

Ulcer Case Scenario

Consider an 86-year-old male who presents to the emergency department with type 2 diabetes mellitus for treatment of a nonhealing diabetic ulcer of the left calf with muscle involvement. There is no evidence of necrosis.

Based on the recent updates, this should be coded with E11.622 for the type 2 diabetes mellitus with other skin ulcer, and code L97.225 for the non-pressure chronic ulcer of left calf with muscle involvement without evidence of necrosis as a secondary diagnosis.

Additional ICD-10-CM Code Changes to Review

This article only touches upon some of the many new ICD-10-CM non-pressure ulcer codes that were added for FY 2018. Coding professionals should review all the changes in their entirety to help ensure the most specific and accurate code assignment possible. The ability to describe the specific severity in terms of level of tissue involved results in a much better description of the situation to support the level of care needed for these ulcers as well as to improve the accuracy of coding.

As always, it is only ever appropriate to assign a code that is supported by the medical record, or to assign a code in accordance with the ICD-10-CM Official Guidelines for Coding and Reporting. If the documentation to support selection of one diagnosis over another is not clear, then a provider query should be considered.

References

American Hospital Association. *AHA Coding Clinic for ICD-10-CM and ICD-10-PCS* (Fourth Quarter 2017). Chicago, IL: AHA Central Office, 2017: 17.

Centers for Medicare and Medicaid Services. "Final Agenda." ICD-10 Coordination and Maintenance Committee Meeting (2016 Diagnosis Agenda), March 9 to March 10, 2016. Baltimore, MD.

www.cms.gov/Medicare/Coding/ICD9ProviderDiagnosticCodes/Downloads/2016-03-09-Agenda.pdf.

Centers for Medicare and Medicaid Services. "ICD-10-CM Official Guidelines for Coding and Reporting FY 2018."

www.cms.gov/Medicare/Coding/ICD10/Downloads/2018-ICD-10-CM-Coding-Guidelines.pdf.

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