ICD-10 Implementation for the Laboratory

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Health care providers across the United States and other industrialized nations use a standardized coding system known as ICD coding (International Classification of Diseases) for describing the specific items and services provided in the delivery of health care. The ICD coding system is used for a variety of health management and clinical purposes, including the analysis of the health situation of population groups, monitoring of diseases and other health problems, reimbursement and quality.

Since Oct. 1 claims submitted to insurance companies need to be coded with the new ICD-10 codes. The transition to ICD-10 is required for everyone in the United States covered by the Health Insurance Portability Accountability Act (HIPAA). ICD-10 will implement new documentation requirements to support medical necessity; therefore the diagnosis codes will need to be as specific as possible.

Laboratory billing and coding specialists have provided the following tips on specificity to assure ICD-10 coding requirements are met.

1. **Type of encounter**
   - Initial
   - Subsequent
   - Late Effect

2. **Acute vs. chronic condition**

3. **Congenital vs. acquired condition**

4. **Supervision of pregnancy**
   - Status (i.e. normal first pregnancy, normal other, high risk)
   - Any manifestations/conditions resulting from the pregnancy
   - Weeks of gestation

5. **Mental, behavioral, and neurodevelopmental disorders (substance use)**
   - Type of substance
   - Status (use, abuse, dependence, in remission)
   - Any manifestation/condition resulting from substance abuse, if any

6. **Wounds, ulcers and infections**
   - Pressure or non-pressure
   - Location
   - Laterality (i.e. right leg, left arm)
   - Severity
   - Organism/cause
   - Cellulitis vs. abscess

7. **Cancer/neoplasm**
   - Type and location
     - (i.e. right breast cancer)
   - Status
     - (active, in remission, relapse)
   - Primary vs. secondary

8. **Anemia**
   - Type (congenital, acquired)
   - Cause (iron deficiency, chronic blood loss)

9. **Long-term medication use**
   - Type of medication (i.e. Lasix, Coumadin)
   - Reason on medication (congestive heart failure, a trial fib)

10. **Cerebrovascular disease**
    - Type (cerebral infarction, occlusion, hemorrhage)
    - Site/location (cerebral, carotid, femoral)
    - Cause (embolism, thrombosis, occlusion)

11. **Diabetes**
    - Type 1 vs. type 2
    - Use of insulin
    - Any manifestation/complications

12. **Use of unspecified codes**
    - Insurance companies will not be willing to reimburse for unspecified codes. It is very important that you are as specific as possible to guarantee reimbursement.
CentraCare Health – Paynesville laboratory supports a 25-bed critical access hospital, a 52-bed attached long-term care unit, a senior housing with services unit, an assisted living facility, and five clinics located in Paynesville, Cold Spring, Richmond, Eden Valley and Belgrade.

The laboratory team is made up of three medical technologists (including the manager), eight medical laboratory technicians and eight laboratory assistants. The Paynesville laboratory is staffed from 5 a.m. to 9 p.m. Monday through Friday; 6 a.m. to 2:30 p.m. Saturday and 6–10 a.m. Sundays. A lab tech is on call during off hours for patients who present to the emergency room. The satellite clinic laboratories operate during their clinic hours, performing waived and moderate complexity testing as well as provider-performed microscopy.

The CCH – Paynesville laboratory performs basic chemistry, immunoassay, coagulation and transfusion services; complete blood counts, manual differentials and sedimentation rates in hematology; and full microbiology. Testing not performed at Paynesville is referred to CentraCare Laboratory Services at St. Cloud Hospital.

In addition to clinical services, CCH – Paynesville laboratory offers a Direct Laboratory Access test menu, paternity testing collections and employment DOT and non-DOT Drug Screen and Breath Alcohol collections.

The CCH – Paynesville laboratory team takes pride in providing a great training program and a solid student experience. Team members positively impact population health, giving back to the communities they serve by participating in health fairs and parades. The laboratory team at CCH – Paynesville has the benefit of getting to know their patients and their families as they form partnerships with them in their care.

CCH Laboratories Achieve Accreditation

Congratulations to the following laboratory sites that recently successfully completed the inspection process for their accreditation:

- **CCC-Belgrade**: CLIA inspection performed by Minnesota Department of Health (MDH) on March 6, 2015.
- **CCC-Becker**: CLIA inspection performed by MDH on March 18, 2015.
- **CCLS-Adult Pediatric Urology**: CLIA inspection performed by MDH on April 10, 2015.
- **CCH-Monticello Hospital**: Joint Commission inspection in July 2015. There were no laboratory related deficiencies.
- **CCH-Sauk Center**: CLIA inspection performed by MDH on July 14, 2015.
- **CCH-Long Prairie**: CLIA inspection performed by MDH on July 23, 2015.

**ABOUT THE REVIEW PROCESS:**

To ensure the highest quality laboratory testing, all sites are subject to thorough evaluation every two years. The Centers for Medicare & Medicaid Services (CMS) regulates all laboratory testing (except research) performed on humans in the United States through the Clinical Laboratory Improvement Amendments (CLIA). Several organizations have deemed status to perform laboratory inspection. CentraCare Health laboratories currently use services from MDH-CLIA, College of American Pathologists (CAP), COLA and the Joint Commission.

The CAP Laboratory Accreditation Program accredits the entire spectrum of laboratory test disciplines with the most scientifically rigorous customized checklist requirements. The CAP’s peer-based inspector model provides a unique balance of regulatory and educational coaching supported by the most respected worldwide pathology organization.

**For more information on laboratory accreditation:**

- [www.cap.org](http://www.cap.org)
- [www.cola.org](http://www.cola.org)
- [http://www.jointcommission.org/accreditation/laboratory.aspx](http://www.jointcommission.org/accreditation/laboratory.aspx)

COLA is a premier clinical laboratory education, consultation, and accreditation organization. Their services enable clinical laboratories and staff to meet CLIA and other regulatory requirements to provide the best possible patient care.

Joint Commission standards are the basis of an objective evaluation process that help health care organizations measure, assess and improve performance. The Joint Commission’s state-of-the-art standards set expectations for organization performance that are reasonable, achievable and surveyable.
Laboratory Leadership Transition

Congratulations to Trish Roehrl, who accepted the position of laboratory manager for CentraCare Health – Melrose and Sauk Centre. Trish replaces Steve Winges who retired June 5 as laboratory manager for CentraCare Health – Sauk Centre after 41 years in the laboratory profession. Previously Trish worked as laboratory manager for CCH – Melrose where she also performed testing within the clinical laboratory. In her expanded role she will provide administrative oversight to both locations.

ASCLS-MN, Central Region
Fall CEU Event
Thursday, October 29
CentraCare Health Plaza, Windfelt Room
Food/social starting at 5:30 p.m.
First speaker to begin at 6 p.m.

Speakers
Dr. Daren S. Danielson, M.D.
Cardiovascular/Thoracic Surgeon
Dr. Bradley A. Curtis, M.D.
Anatomical and Clinical Pathologist

For more information, email Kristina Carlson at kristinacarlson5@gmail.com.

Questions and Comments
If you have questions or comments, please contact Jeremy Angell, coordinator, CentraCare Laboratory Services, 320-251-2700, ext. 57248 or cclabser@centracare.com. If you would like to be added or removed from our email distribution list, please let us know.