The International Classification of Diseases Version 10 (ICD-10)

What you need to know before the end of February, 2014

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1.8.2014

Objectives:

1. *Review the history of the International List of Causes of Death and its relation to the International Classification of Disease*
2. *Recognize ICD-9 as inadequate to classify diseases*
3. *Identify how ICD-10 assists coding*
4. *Examine why ICD-11 is needed (and on its way)*
5. *Recognize the role of:*
    1. *Code Sets,*
    2. *Reference Terminologies, and*
    3. *Interface Terminologies in Electronic Health Records;*
6. *Describe Allscripts' MAPPING of ICD-9 codes to ICD-10*
7. *Demonstrate Allscripts functionality in CONVERTING ICD-9 codes to ICD-10*

Death Registration

- The beginnings of death registration can be found in mid-15th century Italy
- A death certificate was required before a burial certificate could be issued
- By the 16th Century, Boards of Health were established in France, Switzerland and the Netherlands
- Used to monitor epidemics in various cities

Bills of Mortality

- 1532
  - England began a systematic collection of data on causes of death, the *Bills of Mortality*.
- 1837
  - The Registration Act was passed in England with provisions for inquiry into causes of death in the population.
- 1842
  - The first State Registration law in the US was enacted by Massachusetts in 1842.

American Medical Association

- 1855
  - The American Medical Association (AMA) adopted a resolution urging its members to take “immediate and concerted action in petitioning legislative bodies to establish offices for the registration of vital events”.
- 1900
  - Ten states and the District of Columbia had met the requirements of the U.S. Bureau of the Census for admission to the U.S. Death Registration.
  - The compilation of annual mortality statistics for the United States began with these states in 1900.
  - Nationwide coverage was achieved in 1933.

1891 ISI meeting in Vienna Jacques Bertillon, Chief of Statistics for the City of Paris

Bertillon's main headings

1. General diseases
2. Diseases of nervous system and sense organs
3. Diseases of circulatory system
4. Diseases of respiratory system
5. Diseases of digestive system
6. Diseases of genitourinary system
7. Puerperal diseases
8. Diseases of skin and annexes
9. Diseases of locomotor organs
10. Malformations
11. Diseases of early infancy
12. Diseases of old age
13. Effects of external causes.
14. Ill-defined diseases
15. Residual categories, "other

ICD-10

1. Certain infectious and parasitic diseases
2. Neoplasms
3. Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
4. Endocrine, nutritional and metabolic diseases
5. Mental and behavioural disorders
6. Diseases of the nervous system
7. Diseases of the eye and adnexa
8. Diseases of the ear and mastoid process
9. Diseases of the circulatory system
10. Diseases of the respiratory system
11. Diseases of the digestive system
12. Diseases of the skin and subcutaneous tissue
13. Diseases of the musculoskeletal system and connective tissue
14. Diseases of the genitourinary system
15. Pregnancy, childbirth and the puerperium
16. Certain conditions originating in the perinatal period
17. Congenital malformations, deformations and chromosomal abn.
18. Symptoms, signs and abnormal clinical and laboratory findings, NEC
19. Injury, poisoning and certain other consequences of external causes
20. External causes of morbidity and mortality
21. Factors influencing health status and contact with health services
22. Codes for special purposes

ICD-First Revision
1900 (in use 1900–1909)

- In 1899, ISI had approved the proposal made for the decennial revision of the list.
- August 18, 1900
  - The first International Conference for the Revision of the International List of Causes of Death convened in Paris
  - Producing the first **International List of Causes of Death**, a revision cycle was established to keep the list abreast of medical progress.

1948 - Sixth Revision of the International Lists of Diseases and Causes of Death

- April 26-30, 1948
  - The International Conference for the **Sixth Revision of the International Lists of Diseases and Causes of Death** was convened in Paris by the Government of France.
  - The committee created the **"Manual of the International Statistical Classification of Diseases, Injuries, and Causes of Death"** from the data; in two volumes.
- By the time of the 7th revision, in 1955, the name **International Classification of Diseases** had been adopted.

1955 - Seventh Revision the International Classification of Diseases

- February 1955
  - The International Conference for the Seventh Revision of the International Classification of Diseases was held in Paris under the auspices of WHO

1965 - Eighth Revision Conference

- July 6-12, 1965
  - The Eighth Revision Conference convened by WHO met in Geneva
  - Left unchanged the basic structure of the Classification
  - Also reinforced the general philosophy of classifying diseases, whenever possible, according to their etiology rather than a particular manifestation.

1977 - Ninth Revision of the International Classification of Diseases

- September 30-October 6
  - The 9th version of ICD came about in 1977. Convened by WHO, the Conference met in Geneva
  - To date, it's the last version that every country adopted at the same time. Incorporated into it were many of the category extensions of diseases and maladies that several represented countries wanted for better clarity of what was occurring in their areas.
- Since 1900, the ICD has been modified about once every 10 years, except for the 20-year interval between the last two revisions, ICD-9 and ICD-10.

ICD-10 Delays

- The ICD-10 update was supposed to begin in 1985, following what had become a 10-year process for working on ICD code revisions.
- ICD-10 was endorsed in May 1990 by the Forty-third World Health Assembly.
- Continuing delays kept it from coming out until 1995 (~18 years ago).
- It is cited in more than 20,000 scientific articles and used by more than 100 countries around the world

Why ICD-9 Remained in the US

- The U.S. remained on ICD-9 primarily because of billing and payment issues.
- In 1983, ICD-9 was introduced as a critical part of medical billing by physicians and hospitals, and was further embedded by the passage of the Medicare Catastrophic Coverage Act.
- That act was later repealed however, the payment process was already set, as other insurance companies followed Medicare
- The U.S. will (finally) change over to the ICD-10 system on October 1, 2014

ICD-10 Used for Mortality Reporting in U.S. Since 1999

- Effective with deaths occurring in 1999, the United States replaced ICD-9, in use for the reporting of deaths from 1979 to 1998, with ICD-10.
- Publications showing mortality data coded under ICD-10 differ substantially from those reported under ICD-9 because of
  - Changes in coding rules
  - Changes in category names and ICD numbers
  - Changes in the tabulation lists used to group mortality data.

International Statistical Classification of Diseases, 10th Revision, Second Edition. Geneva: World Health Organization, 2005. [WHO] " Volume 1 The classification of diseases and related health problems in 22 chapters:

1. Certain infectious and parasitic diseases
2. Neoplasms
3. Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
4. Endocrine, nutritional and metabolic diseases
5. Mental and behavioural disorders
6. Diseases of the nervous system
7. Diseases of the eye and adnexa
8. Diseases of the ear and mastoid process
9. Diseases of the circulatory system
10. Diseases of the respiratory system
11. Diseases of the digestive system
12. Diseases of the skin and subcutaneous tissue
13. Diseases of the musculoskeletal system and connective tissue
14. Diseases of the genitourinary system
15. Pregnancy, childbirth and the puerperium
16. Certain conditions originating in the perinatal period
17. Congenital malformations, deformations and chromosomal abnormalities
18. Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified
19. Injury, poisoning and certain other consequences of external causes
20. External causes of morbidity and mortality
21. Factors influencing health status and contact with health services
22. Codes for special purposes

- Volume 2: Instruction Manual
  Volume 3: Alphabetical Index "

Organization of ICD-10

- ICD-9 is divided into categories based on a five digit code (which limits the size of the vocabulary), where round numbers represent the more general concepts.
- ICD-10 has some 8,000 categories (ICD-9 had only 4,000) and 12,500 codes.
- ICD in form is a strict hierarchy; code determines position in hierarchy.
- Deaths are ranked on a list of 113 causes (except infant deaths, which are ranked separately on a list of 130 causes.
- A selected list of 39 causes of death is used to show mortality data for geographic areas

ICD-9 has several limitations that prevent complete and precise coding and billing including:

- The 35-year old code set contains outdated terminology
- The code length and alphanumeric structure limit the number of new codes that can be created, and
- Many ICD-9 categories are already full.
- The codes themselves lack specificity and detail to support the following:
  - Accurate anatomical descriptions
  - Differentiation of risk and severity
  - Key parameters to differentiate disease manifestations
  - Optimal claim reimbursement
  - Value-based purchasing methodologies

NCHS and ICD-10-CM

- The National Center for Health Statistics (NCHS), the federal agency is responsible for the United States' use of ICD-10
- NCHS developed ICD-10-CM, a clinical modification of the classification for morbidity reporting purposes, to replace our ICD-9-CM Codes, Volumes 1 and 2.
- ICD10-CM included a thorough evaluation by a technical advisory panel and extensive consultation with physician groups, clinical coders, and others to ensure clinical accuracy and usefulness.

Benefits of ICD-10

- ICD-10 provides more specific data than ICD-9 and better reflects current medical practice.
- The added detail embedded within ICD-10 codes informs health care providers and health plans of patient incidence and history, which improves the effectiveness of case-management and care-coordination functions.
- Accurate coding also reduces the volume of claims rejected due to ambiguity.

ICD-9 and ICD-10 Diagnosis Code Comparison

CD-9-CM	ICD-9-CM (VOLS. 1 & 2)	ICD-10-CM
Field Length	3-5 Characters	3-7 Characters
Code Composition (numeric or alpha)	Digit 1 = alpha or numeric Digits 2-5 = numeric	Digit 1 = alpha Digit 2 = numeric Digits 3-7 = alpha or numeric
Available Space for New Codes	Limited	Flexible

ICD-9 and ICD-10 Diagnosis Code Comparison

CD-9-CM	ICD-9-CM (VOLS. 1 & 2)	ICD-10-CM
Overall Detail Embedded Within Codes	Limited detail in many conditions	Allows descriptions of comorbidities, manifestations, etiology/causation, complications, detailed anatomical location, sequelae (after effects of a disease, condition, or injury such as scar formation after a burn), degree of functional impairment, biologic and chemical agents, phase/stage, lymph node involvement, lateralization and localization, procedure or implant related, age related, or joint involvement)

ICD-9 and ICD-10 Diagnosis Code Comparison

CD-9-CM	ICD-9-CM (VOLS. 1 & 2)	ICD-10-CM
Laterality	Does not identify right versus left	Often identifies right versus left
Sample Code	**81315** Open fracture of head of radius	**S52122C** Displaced fracture of head of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC

Benefits of ICD-10?

- The benefits of transition from ICD-9 to ICD-10 include the increased specificity offered by the ICD-10 code format
- This specificity will benefit:
  - Patients, doctors, and researchers (by giving more detailed diagnosis and treatment information)
  - Payers (by more accurately defining services) and
  - International organizations that monitor worldwide disease.

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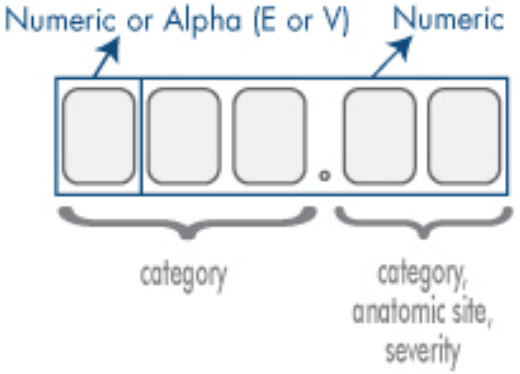
Current ICD-9-CM (Clinical Modification) Codes

- **ICD-9-CM** codes are three to five digits
  - The first digit is either numeric or alpha (the letters E or V only)
  - all other digits are numeric.



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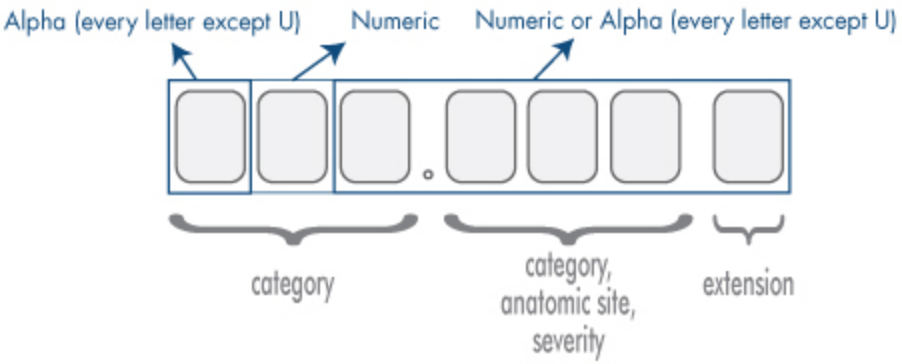
ICD-10-CM (Clinical Modification) Codes

- **ICD-10-CM** Allows dramatically more specificity however, all of this comes at a price—the codes are becoming more complex.
- In ICD-10-CM, codes can be up to seven digits
  - The first digit is always alpha
    - (it can be any letter except U)
  - the second digit is always numeric
  - the remaining five digits can be any combination.



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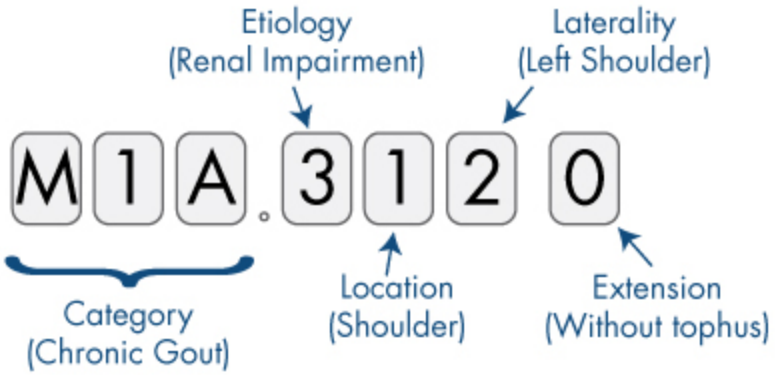
Increased Specificity in the ICD-10 Code

- The following example shows an ICD-10-CM code for chronic gout due to renal impairment, left shoulder, without tophus.
- The corresponding ICD-9-CM code would have been 274.02 (gouty arthropathy)
- As you can see, the ICD-10-CM code contains much more information



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1:1 Mapping (ICD-9 to ICD-10)

- Some ICD-9-CM codes map easily to ICD-10 in a simple one-to-one conversion.
- For example, the ICD-9-CM code 733.6 (Tietze's Syndrome) maps directly to the ICD-10-CM code M94.0. (An exact map does not always mean the codes match in detail.)

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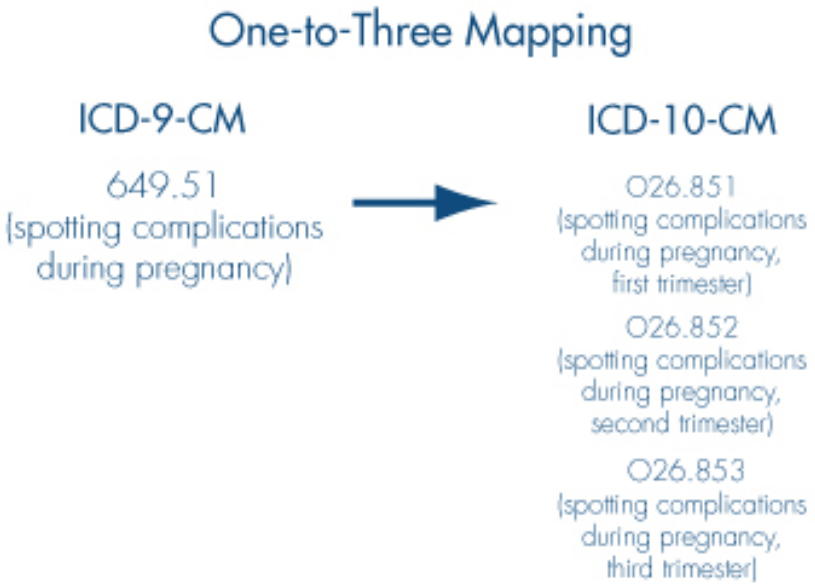
1:3 Mapping (ICD-9 to ICD-10)

- Other codes require additional information to map for possible solutions.
- The ICD-9-CM code 649.51 (spotting complicating pregnancy) requires information about weeks in pregnancy to map.
- There are three (four including unspecified) options:
  - O26.851 (spotting complicating pregnancy, **first trimester**),
  - O26.852 (spotting complicating pregnancy, **second trimester**), and
  - O26.853 (spotting complicating pregnancy, **third trimester**)



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GoToMeeting Viewer
Webcams Zoom: 100%
Now viewing Crystal Vervaecke's screen

MEDCIN TO IMO

Medcin	
ICD-9 Code	ICD-9 Term
649.50	Maternal Spotting Complicating Pregnancy / Childbirth / Puerperium

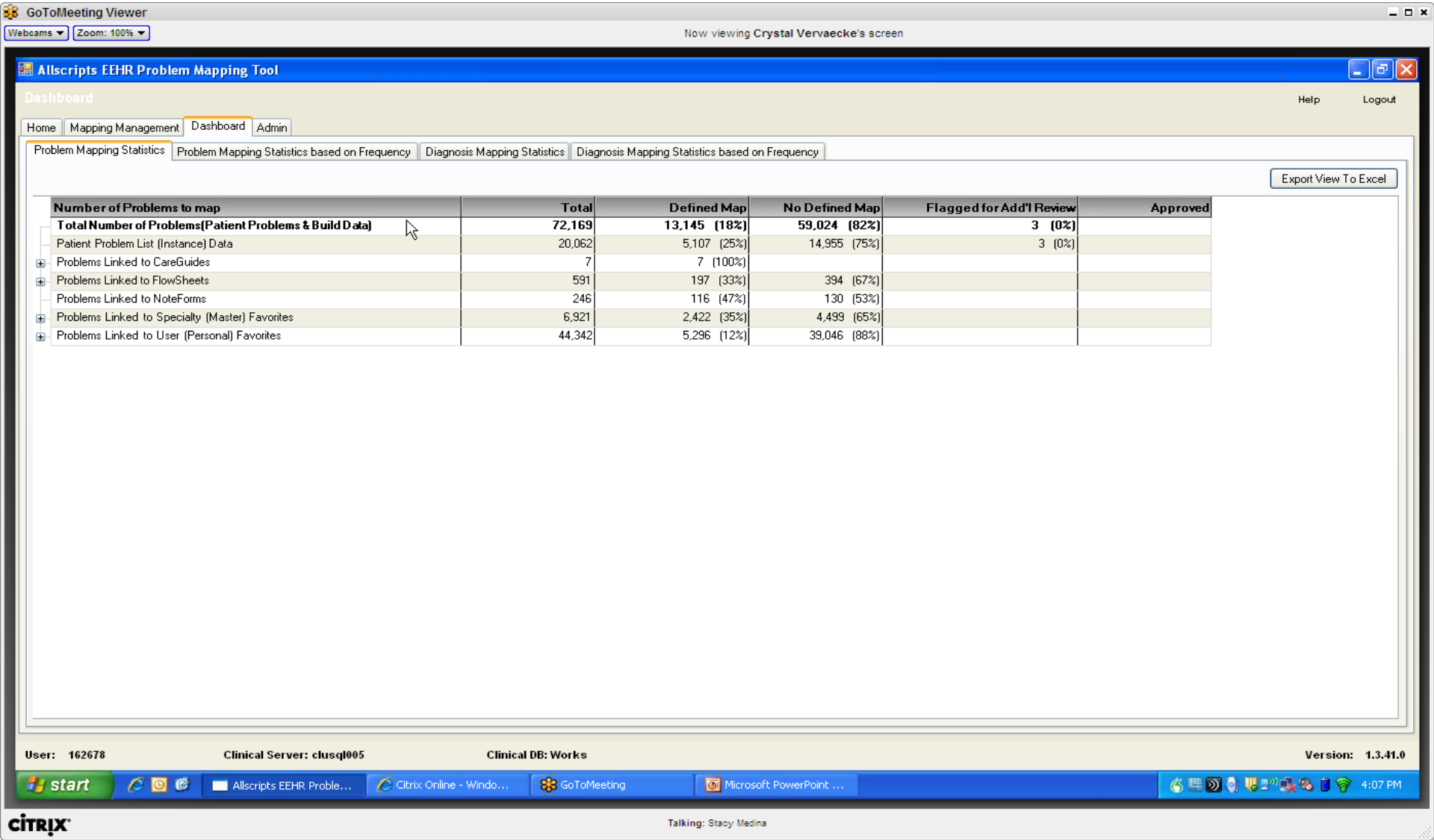
IMO			
ICD-9 Code	ICD-9 Term	ICD-10 Code	ICD-10 Term
649.50	Spotting complicating pregnancy, unspecified trimester	026.859	Spotting complicating pregnancy, unspecified trimester
649.50	Spotting complicating pregnancy, First trimester	026.851	Spotting complicating pregnancy, First trimester
649.50	Spotting complicating pregnancy, Second trimester	026.852	Spotting complicating pregnancy, Second trimester
649.50	Spotting complicating pregnancy, Third trimester	026.853	Spotting complicating pregnancy, Third trimester

CITRIX
Talking: Stacy Medina

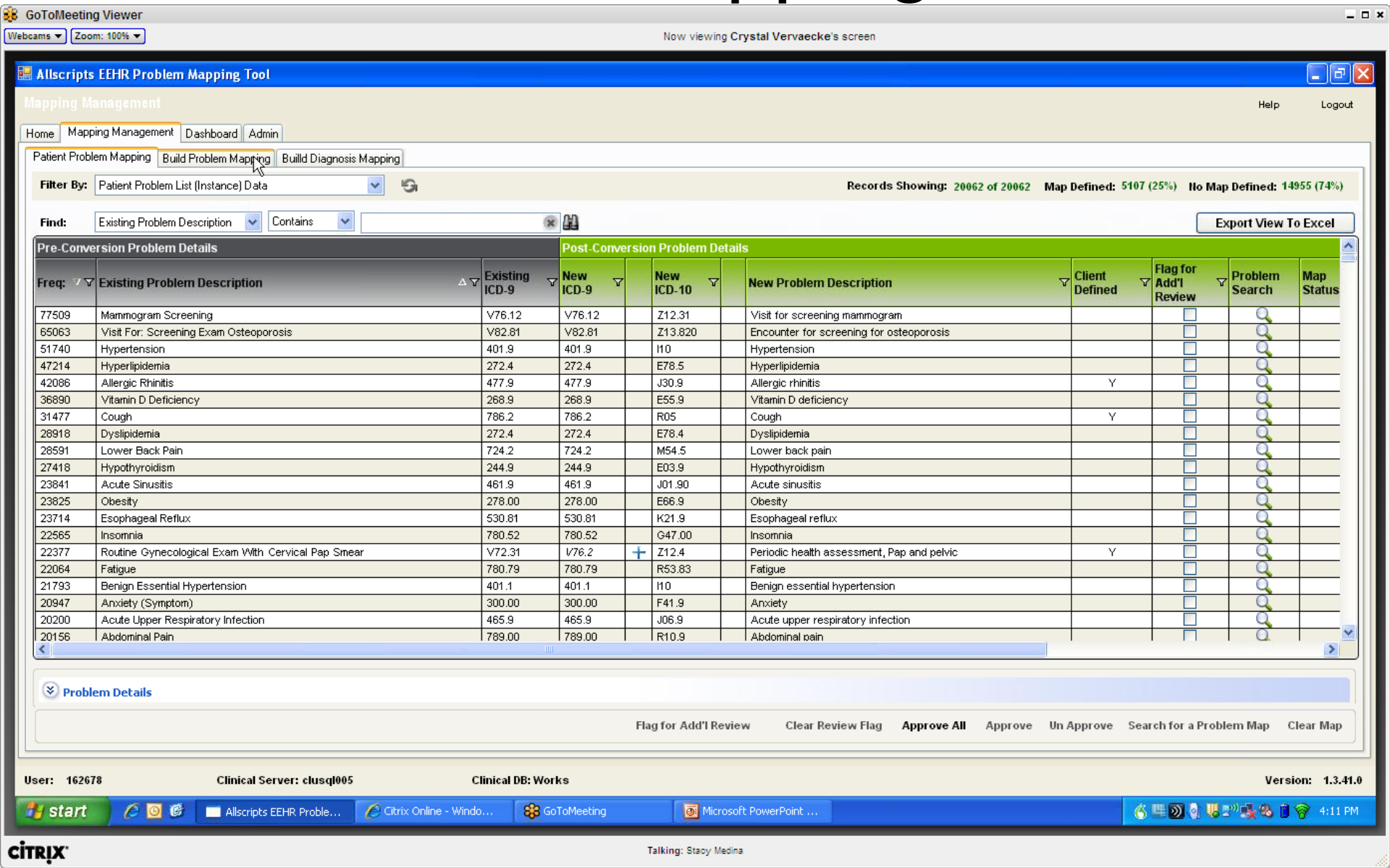
GEMS

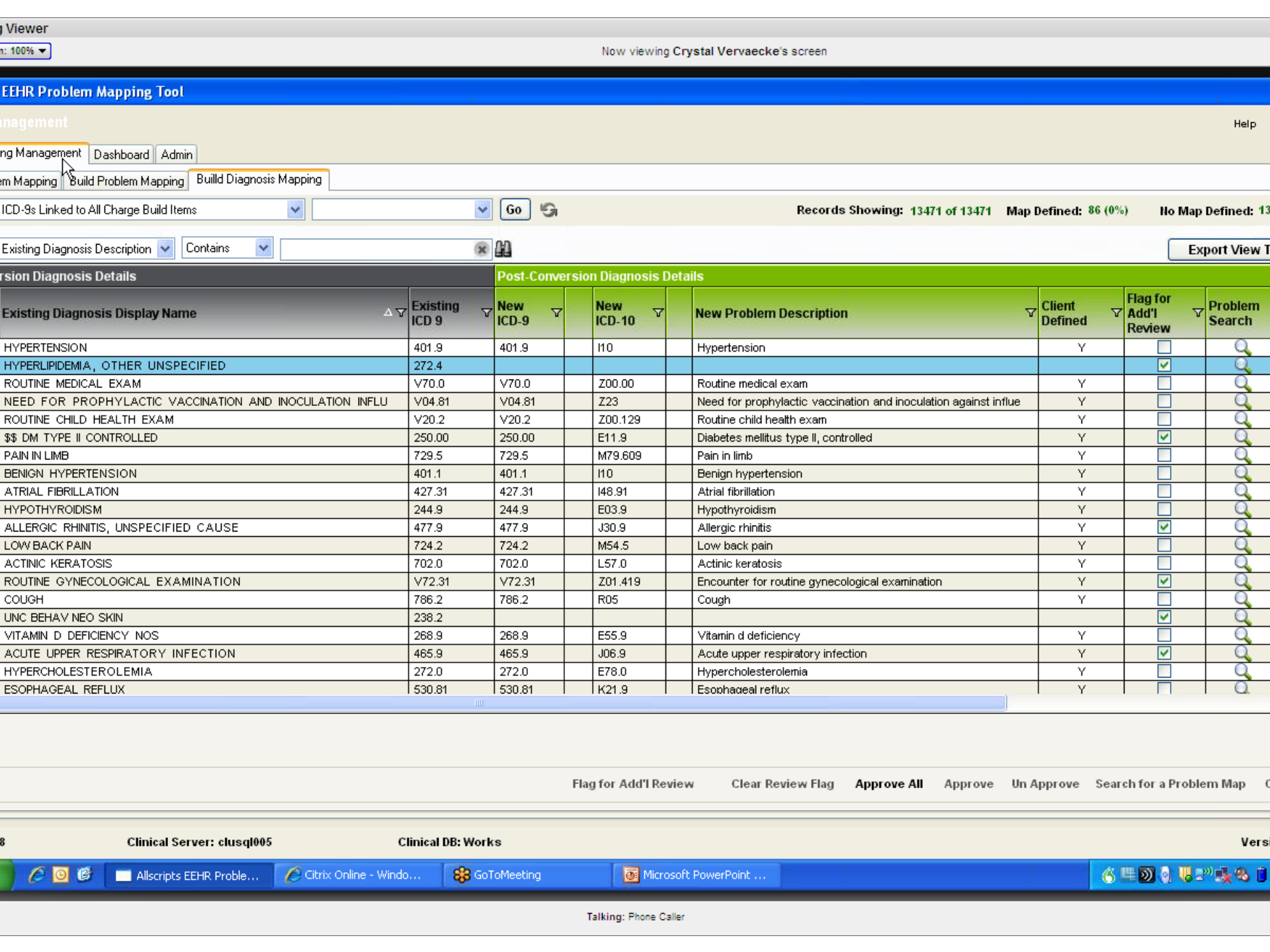
- General Equivalence Mappings (GEMS) tool is provided by CMS
- Created with Medicare Data therefore not comprehensive for all diagnoses and Situations

Allscripts Problem Mapping Tool



Problem Mapping Tool




Viewer
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EEHR Problem Mapping Tool
Help
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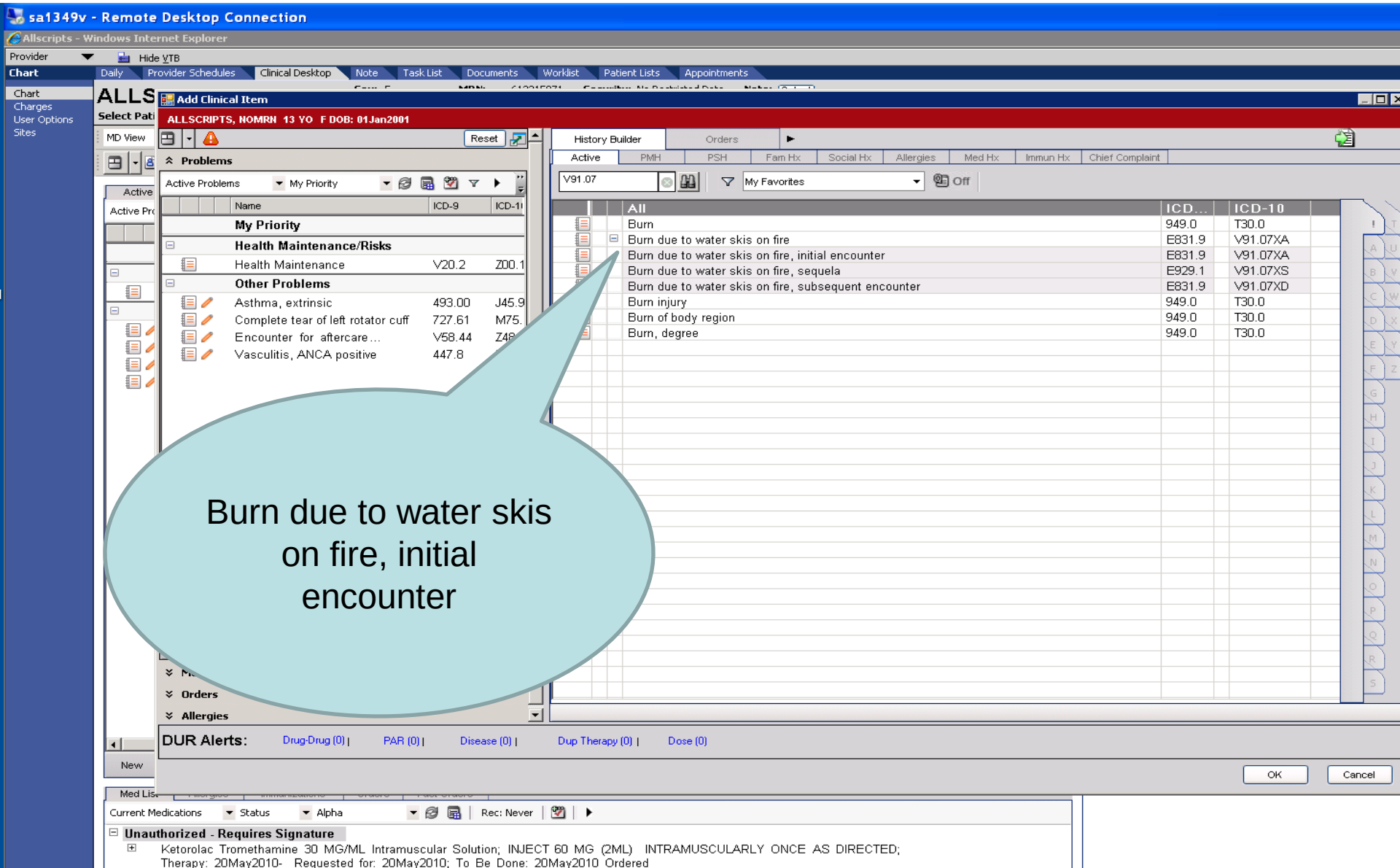
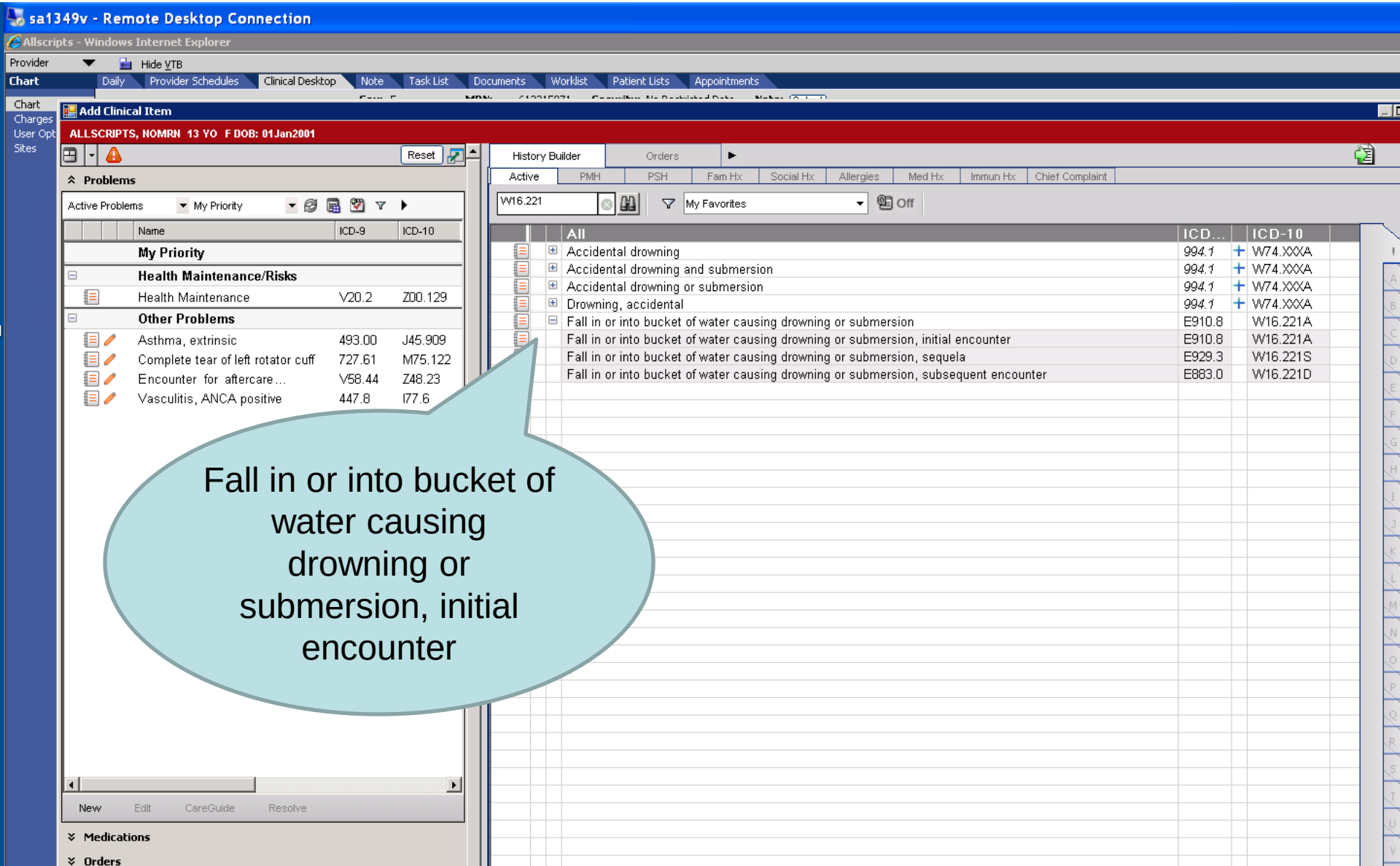
Existing Diagnosis Display Name
Existing ICD 9
New ICD-9
New ICD-10
New Problem Description
Client Defined
Flag for Add'l Review
Problem Search
HYPERTENSION 401.9 401.9 I10 Hypertension Y
HYPERLIPIDEMIA, OTHER UNSPECIFIED 272.4
ROUTINE MEDICAL EXAM V70.0 V70.0 Z00.00 Routine medical exam Y
NEED FOR PROPHYLACTIC VACCINATION AND INOCULATION INFLU V04.81 V04.81 Z23 Need for prophylactic vaccination and inoculation against influe Y
ROUTINE CHILD HEALTH EXAM V20.2 V20.2 Z00.129 Routine child health exam Y
$$ DM TYPE II CONTROLLED 250.00 250.00 E11.9 Diabetes mellitus type II, controlled Y
PAIN IN LIMB 729.5 729.5 M79.609 Pain in limb Y
BENIGN HYPERTENSION 401.1 401.1 I10 Benign hypertension Y
ATRIAL FIBRILLATION 427.31 427.31 I48.91 Atrial fibrillation Y
HYPOTHYROIDISM 244.9 244.9 E03.9 Hypothyroidism Y
ALLERGIC RHINITIS, UNSPECIFIED CAUSE 477.9 477.9 J30.9 Allergic rhinitis Y
LOW BACK PAIN 724.2 724.2 M54.5 Low back pain Y
ACTINIC KERATOSIS 702.0 702.0 L57.0 Actinic keratosis Y
ROUTINE GYNECOLOGICAL EXAMINATION V72.31 V72.31 Z01.419 Encounter for routine gynecological examination Y
COUGH 786.2 786.2 R05 Cough Y
UNC BEHAV NEO SKIN 238.2
VITAMIN D DEFICIENCY NOS 268.9 268.9 E55.9 Vitamin d deficiency Y
ACUTE UPPER RESPIRATORY INFECTION 465.9 465.9 J06.9 Acute upper respiratory infection Y
HYPERCHOLESTEROLEMIA 272.0 272.0 E78.0 Hypercholesterolemia Y
ESOPHAGEAL REFLUX 530.81 530.81 K21.9 Esophageal reflux Y
Flag for Add'l Review
Clear Review Flag
Approve All
Approve
Un Approve
Search for a Problem Map
Clinical Server: clusql005
Clinical DB: Works
Allscripts EEHR Proble...
Citrix Online - Windo...
GoToMeeting
Microsoft PowerPoint ...
Talking: Phone Caller

Specificity in Injury Reports



Granularity in Injury Reports



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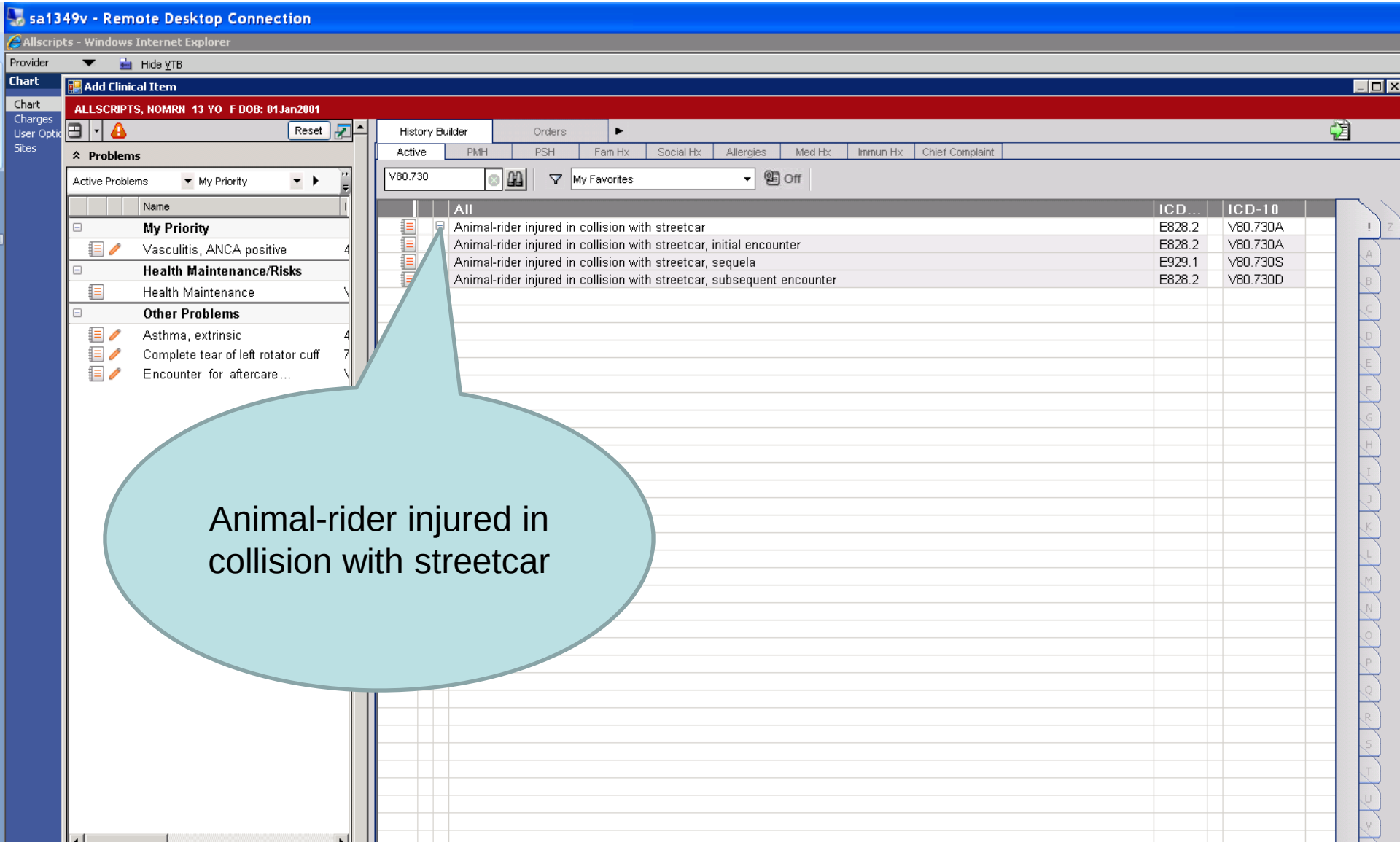
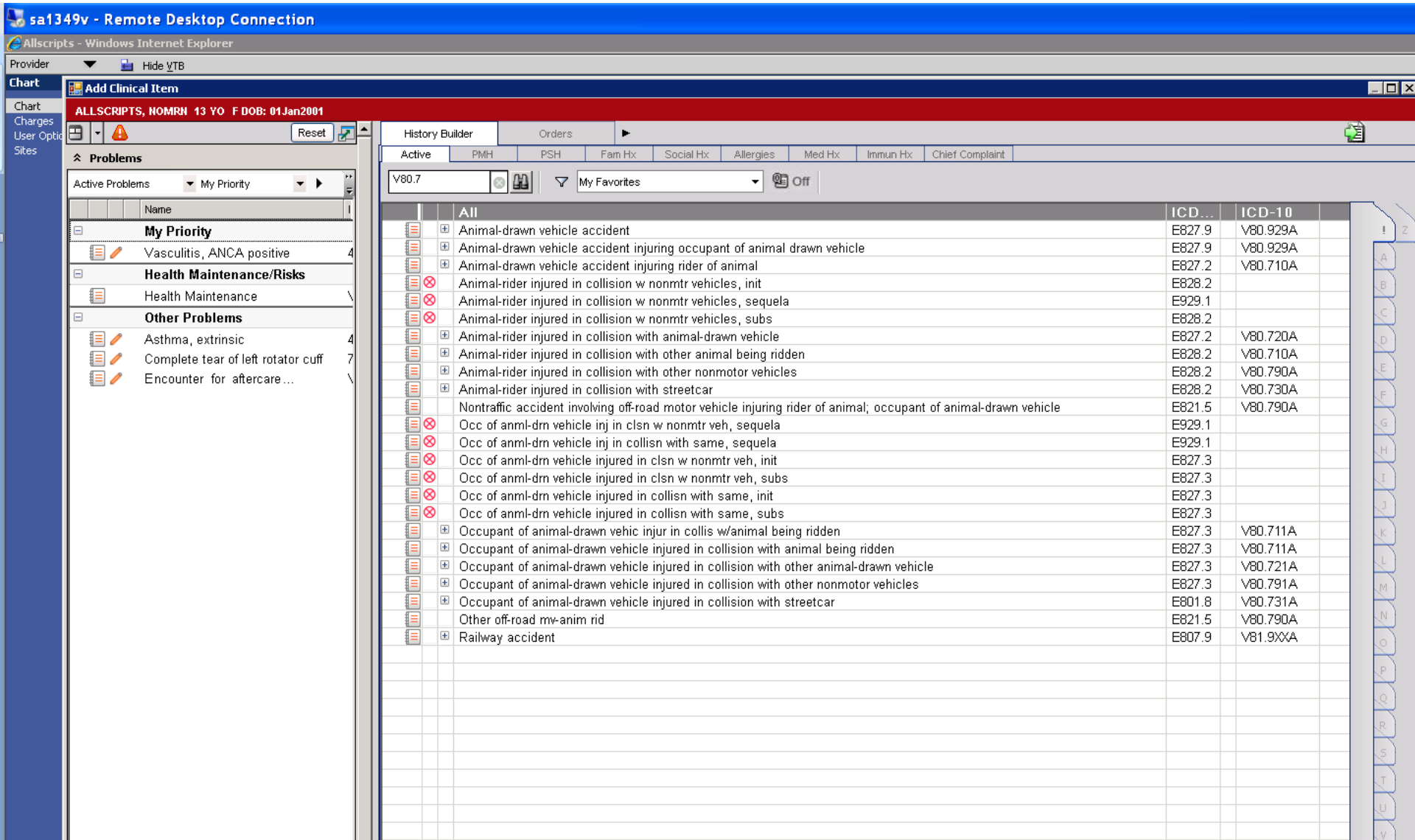


World Wide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Allscripts - Windows Internet Explorer
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Health Maintenance/Risks
Health Maintenance
Other Problems
Asthma, extrinsic
Complete tear of left rotator cuff
Encounter for aftercare...
History Builder
Orders
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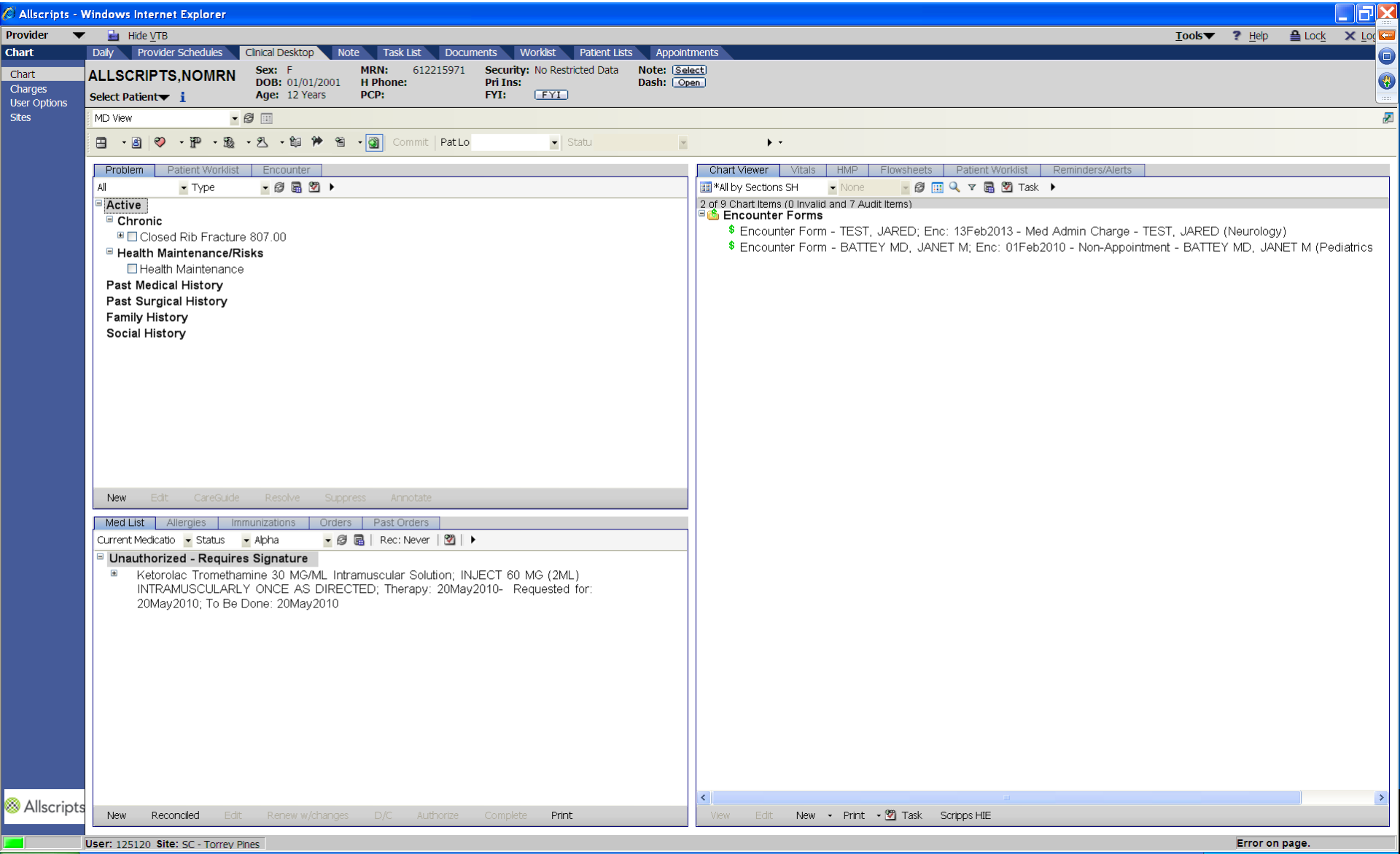
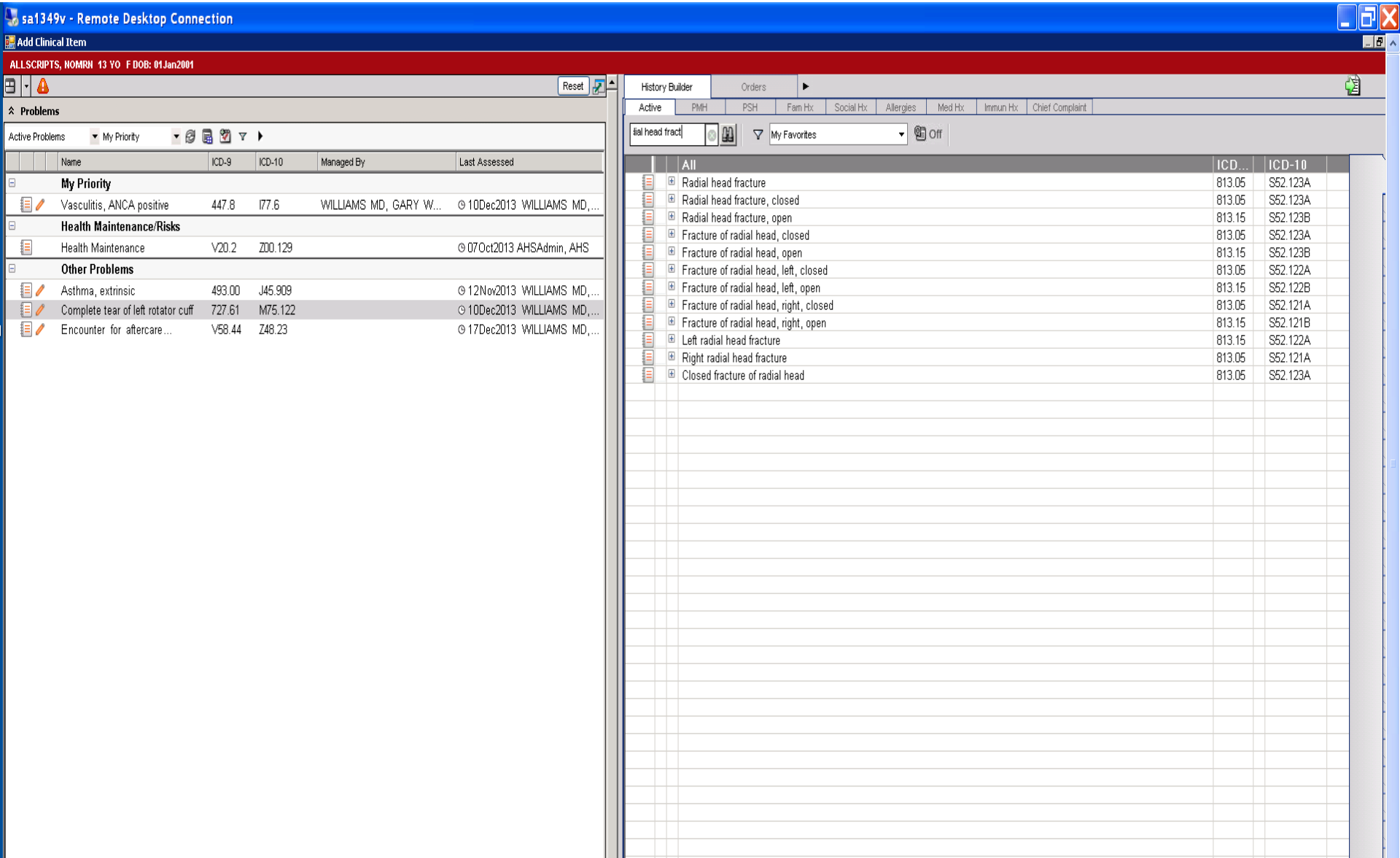
PMH
PSH
Fam Hx
Social Hx
Allergies
Med Hx
Immun Hx
Chief Complaint
V80.7
My Favorites
Off
All
ICD...
ICD-10
Animal-drawn vehicle accident E827.9 V80.929A
Animal-drawn vehicle accident injuring occupant of animal drawn vehicle E827.9 V80.929A
Animal-drawn vehicle accident injuring rider of animal E827.2 V80.710A
Animal-rider injured in collision w nonmtr vehicles, init E828.2
Animal-rider injured in collision w nonmtr vehicles, sequela E929.1
Animal-rider injured in collision w nonmtr vehicles, subs E828.2
Animal-rider injured in collision with animal-drawn vehicle E827.2 V80.720A
Animal-rider injured in collision with other animal being ridden E828.2 V80.710A
Animal-rider injured in collision with other nonmotor vehicles E828.2 V80.790A
Animal-rider injured in collision with streetcar E828.2 V80.730A
Nontraffic accident involving off-road motor vehicle injuring rider of animal; occupant of animal-drawn vehicle E821.5 V80.790A
Occ of anml-drn vehicle inj in clsn w nonmtr veh, sequela E929.1
Occ of anml-drn vehicle inj in collisn with same, sequela E929.1
Occ of anml-drn vehicle injured in clsn w nonmtr veh, init E827.3
Occ of anml-drn vehicle injured in clsn w nonmtr veh, subs E827.3
Occ of anml-drn vehicle injured in collisn with same, init E827.3
Occ of anml-drn vehicle injured in collisn with same, subs E827.3
Occupant of animal-drawn vehic injur in collis w/animal being ridden E827.3 V80.711A
Occupant of animal-drawn vehicle injured in collision with animal being ridden E827.3 V80.711A
Occupant of animal-drawn vehicle injured in collision with other animal-drawn vehicle E827.3 V80.721A
Occupant of animal-drawn vehicle injured in collision with other nonmotor vehicles E827.3 V80.791A
Occupant of animal-drawn vehicle injured in collision with streetcar E801.8 V80.731A
Other off-road mv-anim rid E821.5 V80.790A
Railway accident E807.9 V81.9XXA

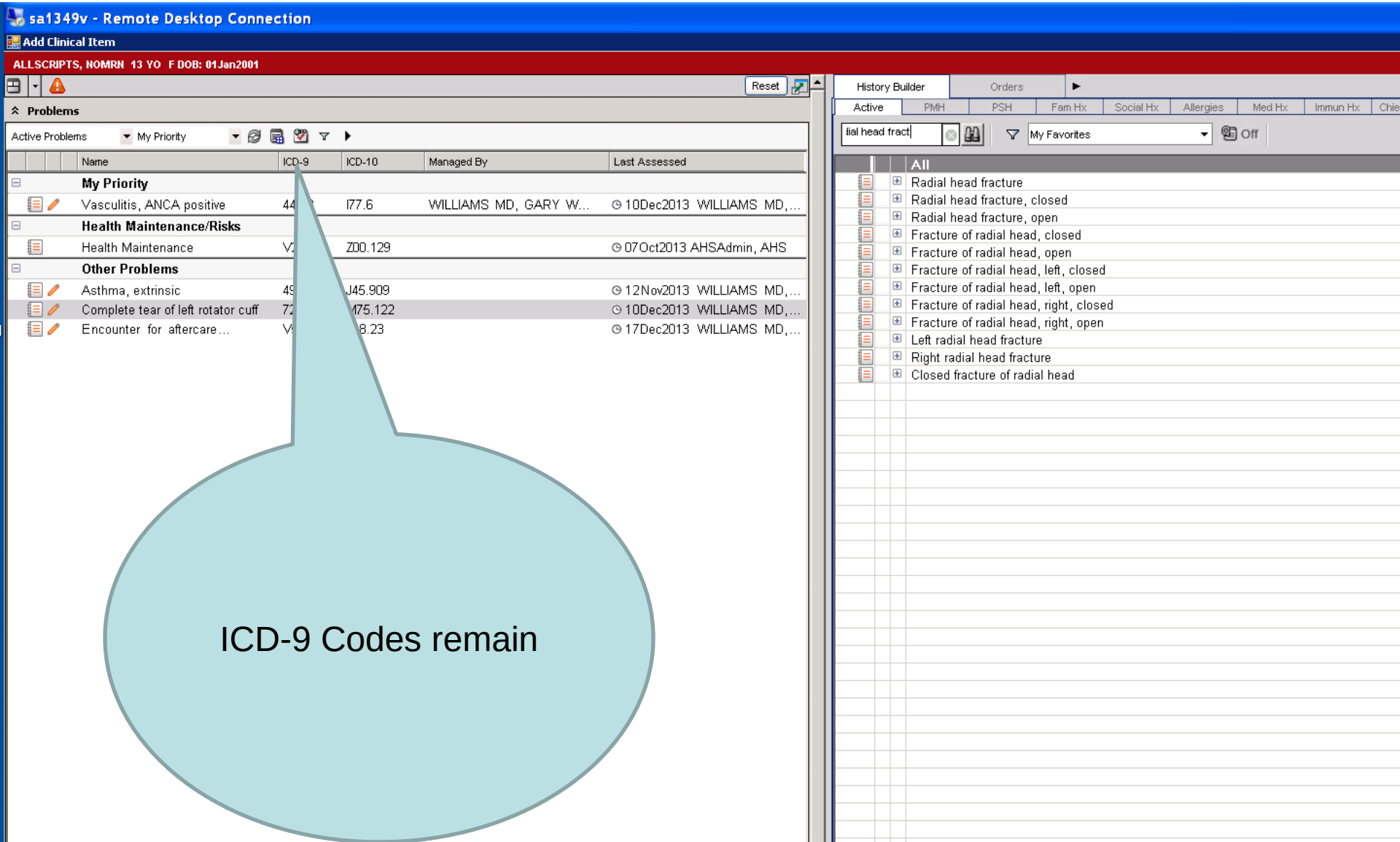
Current Allscripts



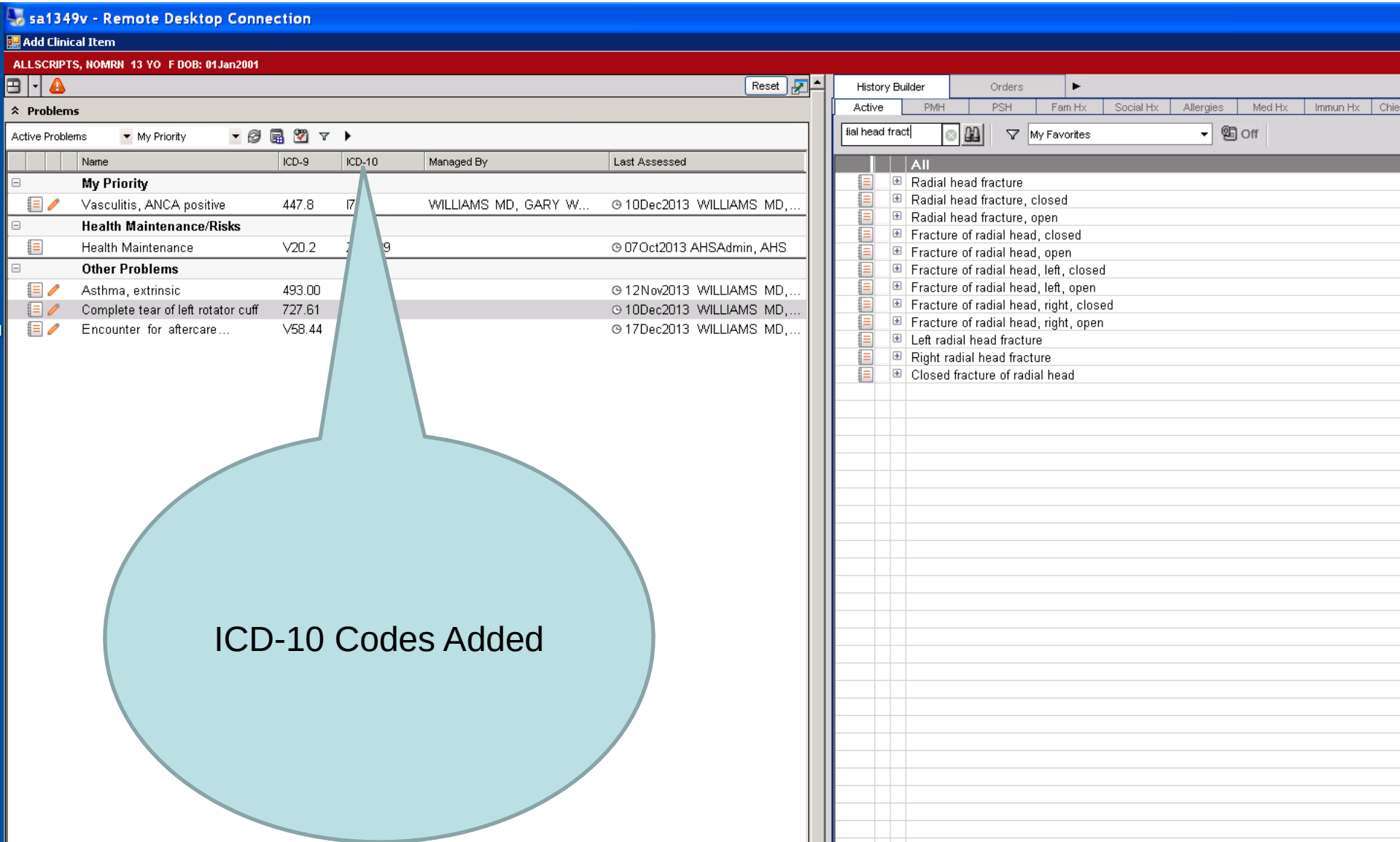
Allscripts Problem List Changes



ICD-9 and ICD-10 Codes



ICD-9 and ICD-10 Codes



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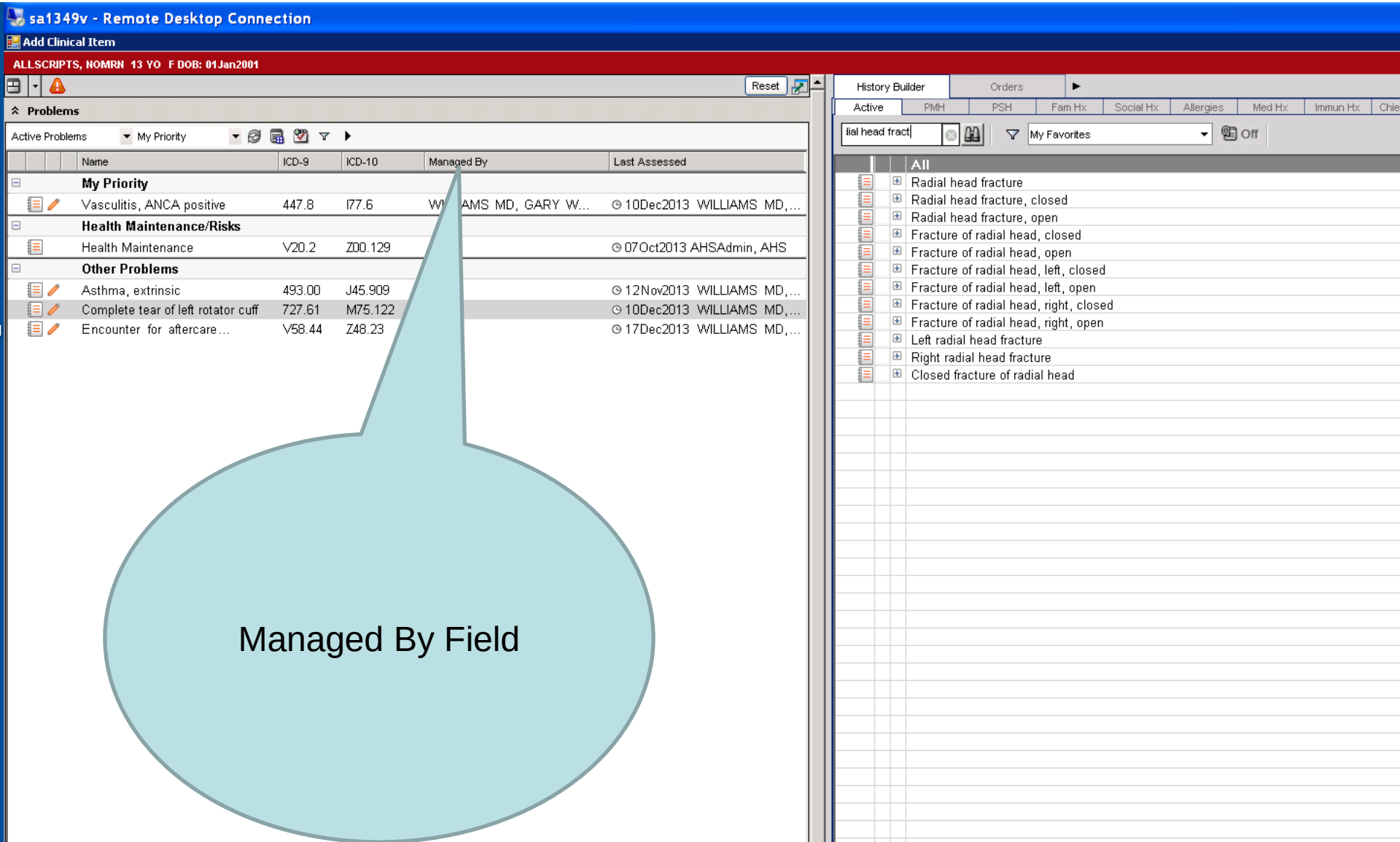
sa1349v - Remote Desktop Connection
Add Clinical Item
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Problems
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Name
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Vasculitis, ANCA positive
447.8
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10Dec2013 WILLIAMS MD,...
Health Maintenance/Risks
Health Maintenance
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07Oct2013 AHSAdmin, AHS
Other Problems
Asthma, extrinsic
493.00
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Complete tear of left rotator cuff
727.61
M75.122
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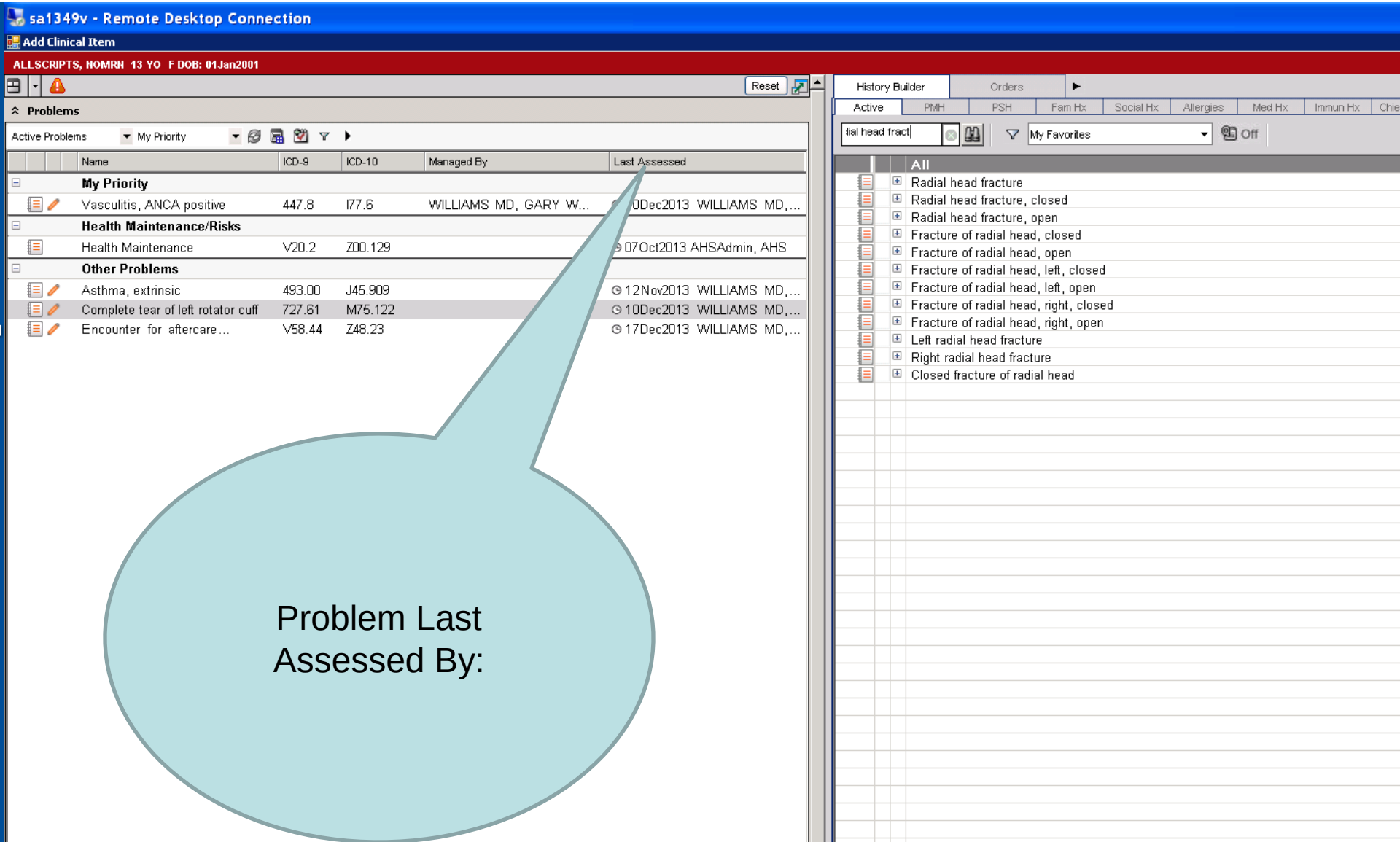
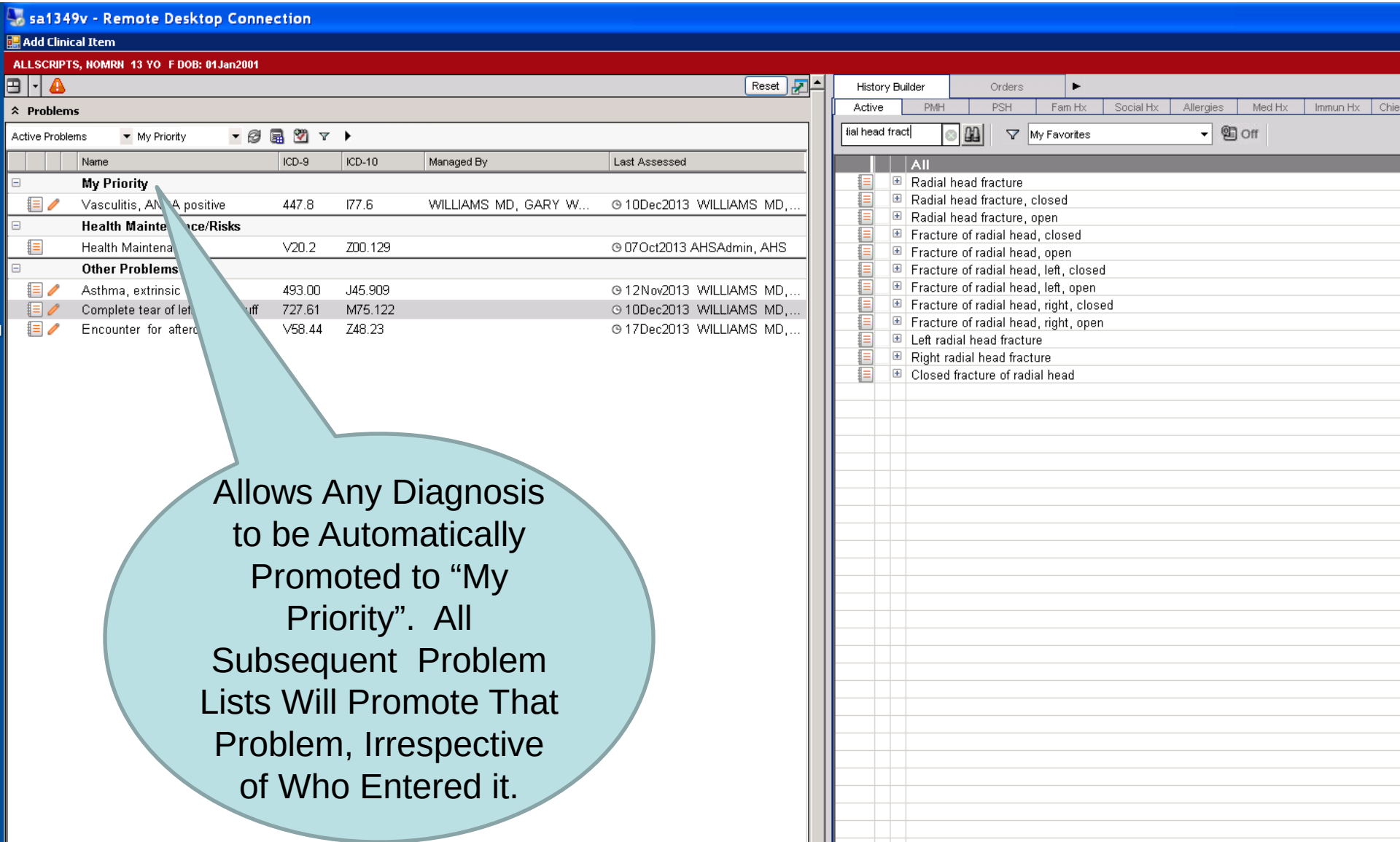
V58.44
Z48.23
17Dec2013 WILLIAMS MD,...
History Builder
Orders
Active
PMH
PSH
Fam Hx
Social Hx
Allergies
Med Hx
Immun Hx
ial head fract
My Favorites
Off
All
Radial head fracture
Radial head fracture, closed
Radial head fracture, open
Fracture of radial head, closed
Fracture of radial head, open
Fracture of radial head, left, closed
Fracture of radial head, left, open
Fracture of radial head, right, closed
Fracture of radial head, right, open
Left radial head fracture
Right radial head fracture
Closed fracture of radial head
Managed By Field

Last Assessed



My Priority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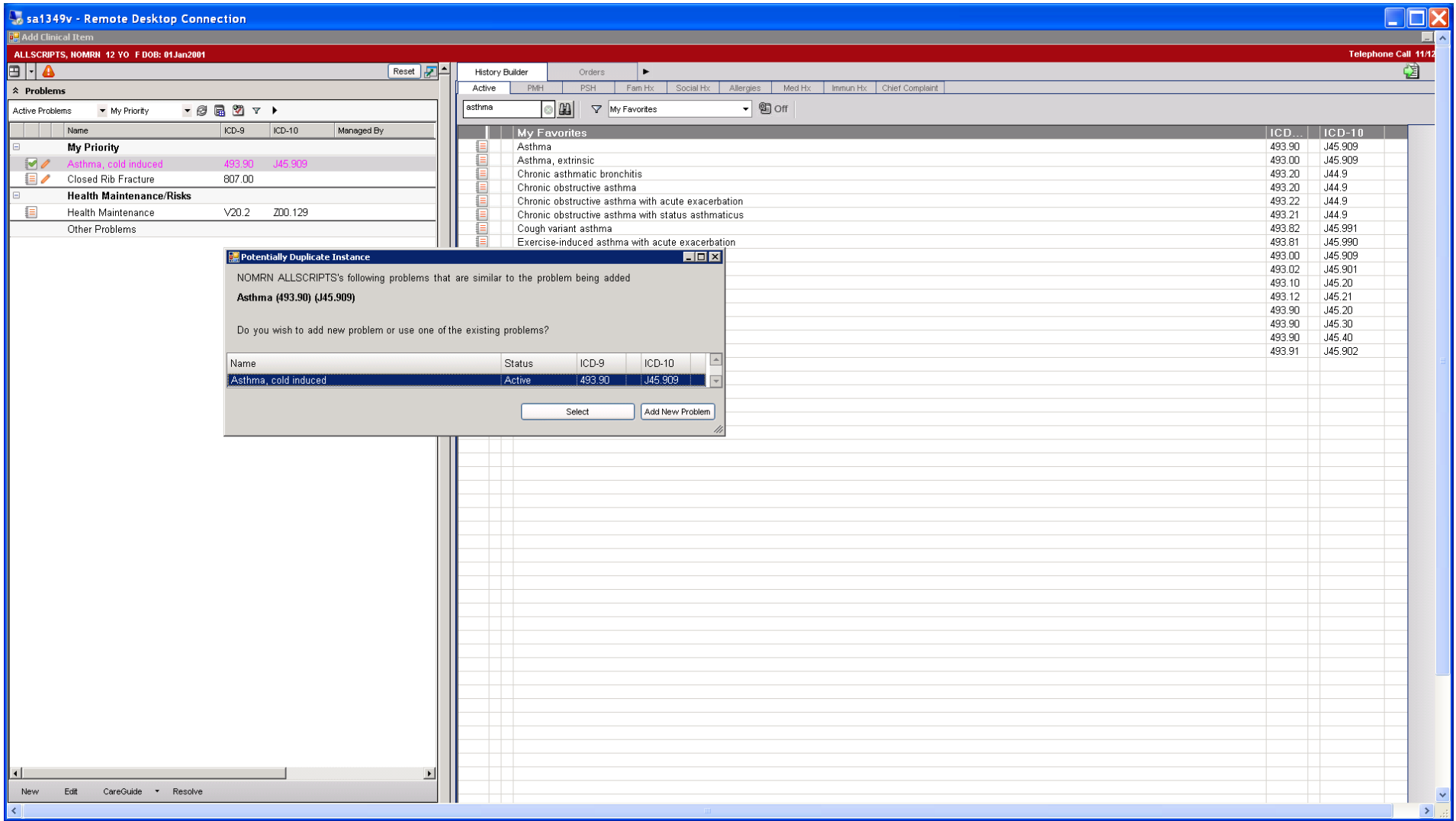
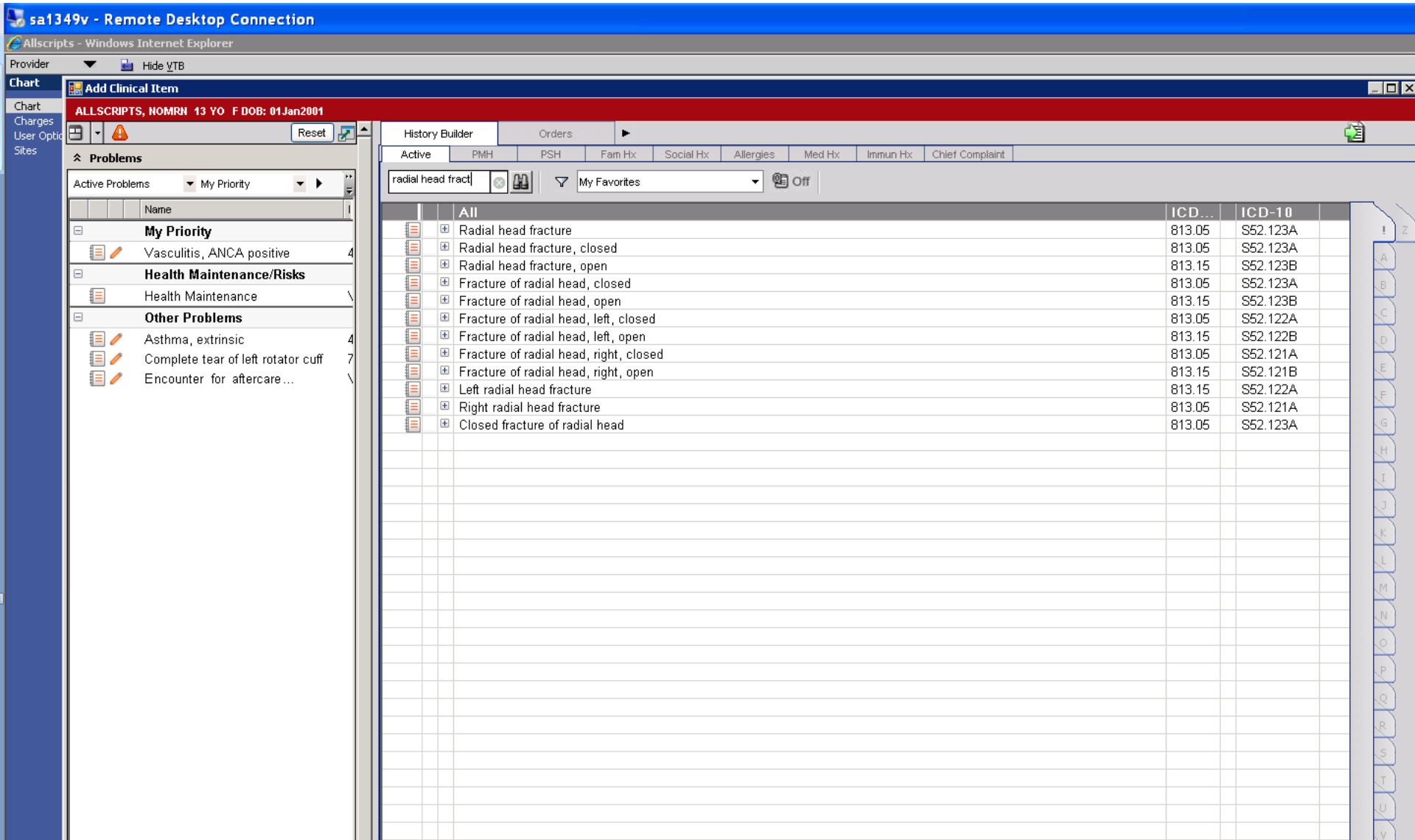
Radial head fracture
Radial head fracture, closed
Radial head fracture, open
Fracture of radial head, closed
Fracture of radial head, open
Fracture of radial head, left, closed
Fracture of radial head, left, open
Fracture of radial head, right, closed
Fracture of radial head, right, open
Left radial head fracture
Right radial head fracture
Closed fracture of radial head
Allows Any Diagnosis to be Automatically Promoted to “My Priority”. All Subsequent Problem Lists Will Promote That Problem, Irrespective of Who Entered it.

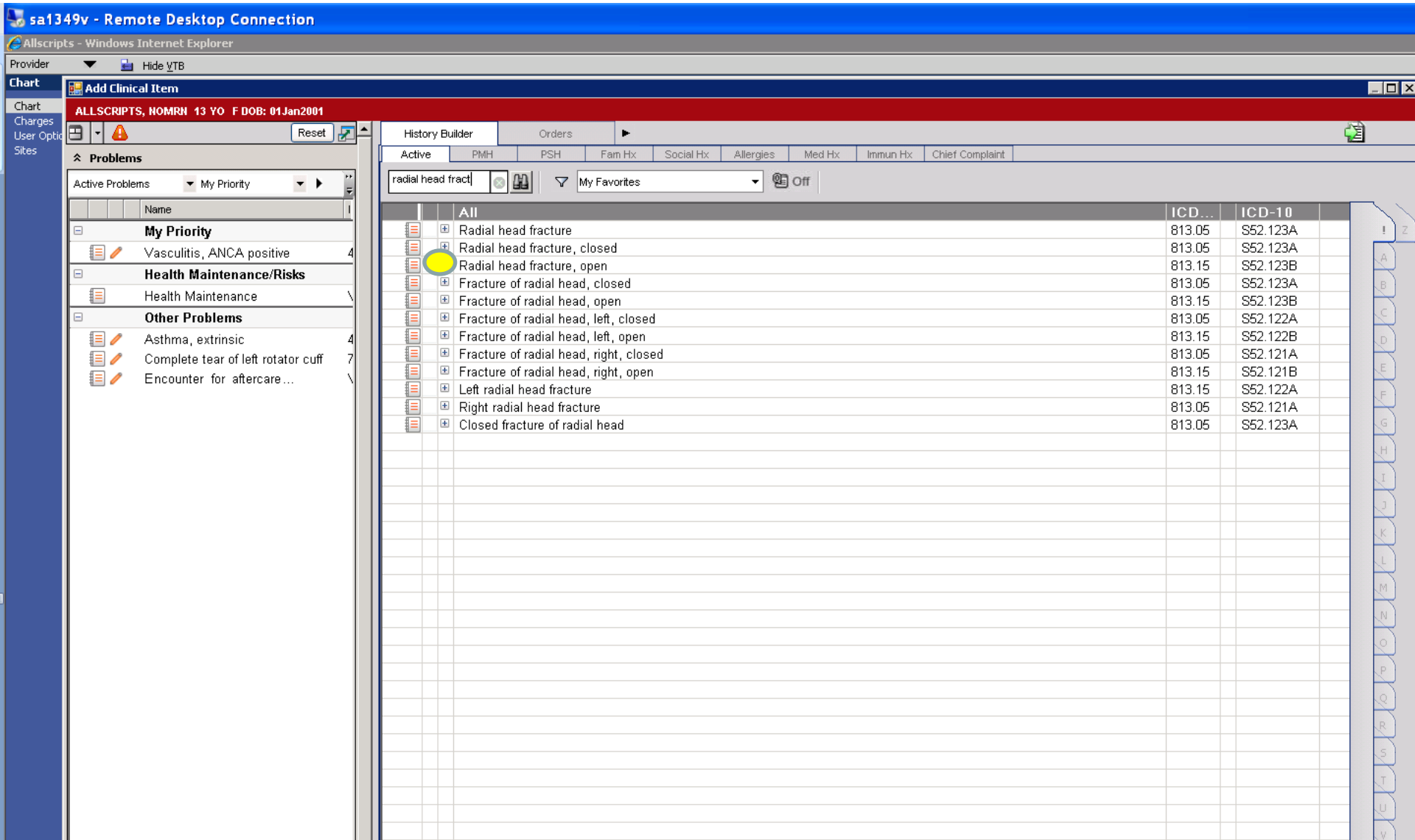
PROMPT FOR DUPLICATES



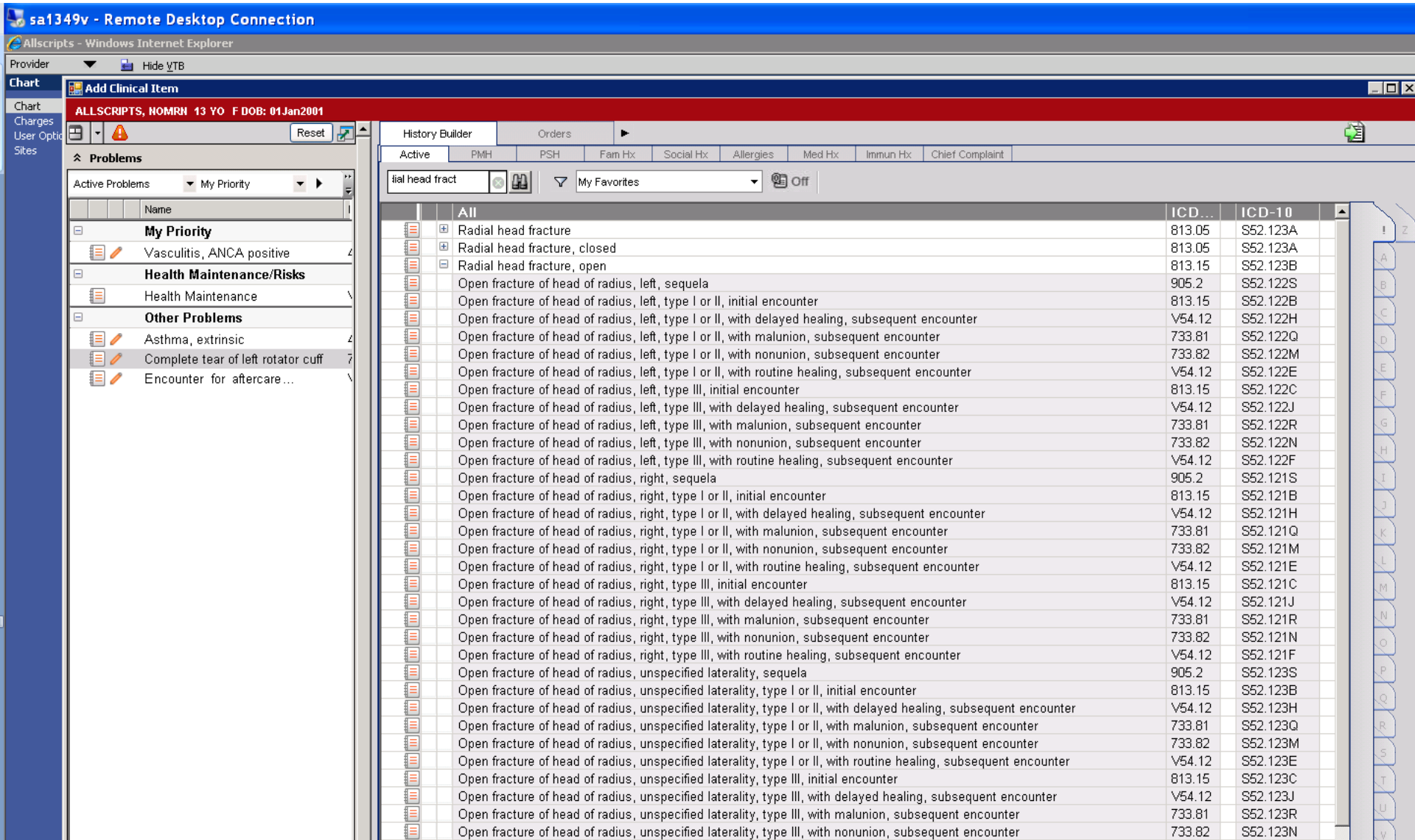
EXPANDED OPTIONS FOR FRACTURES



EXPANDED SPECIFICITY FOR FRACTURES



EXPANDED OPTIONS FOR FRACTURES



Sample Documentation Requirements for Fractures of the Radius

CATEGORY	DOCUMENTATION REQUIREMENTS
Fracture Type	Open Closed Pathologic Physeal (Growth Plate) Fractures Neoplastic Disease Torus (Buckle) Fractures Green Stick Fractures Stress Fractures Orthopedic Implant (fractures associated with) Bent Bone

Sample Documentation Requirements for Fractures of the Radius

Healing	Routine Delayed Nonunion Malunion
Localization	Shaft Lower End Upper End Head Neck Styloid Process
Encounter	Initial Subsequent Sequelae
Displacement	Displaced Nondisplaced

Sample Documentation Requirements for Fractures of the Radius

Classification	Salter Harris I Salter Harris II Salter Harris III Salter Harris IV Gustilo Type I or II Gustilo Type IIIA, IIIB, or IIIC
Laterality	Right Left Unspecified Side Unilateral Bilateral
Joint Involvement	Intra-articular Extra-articular

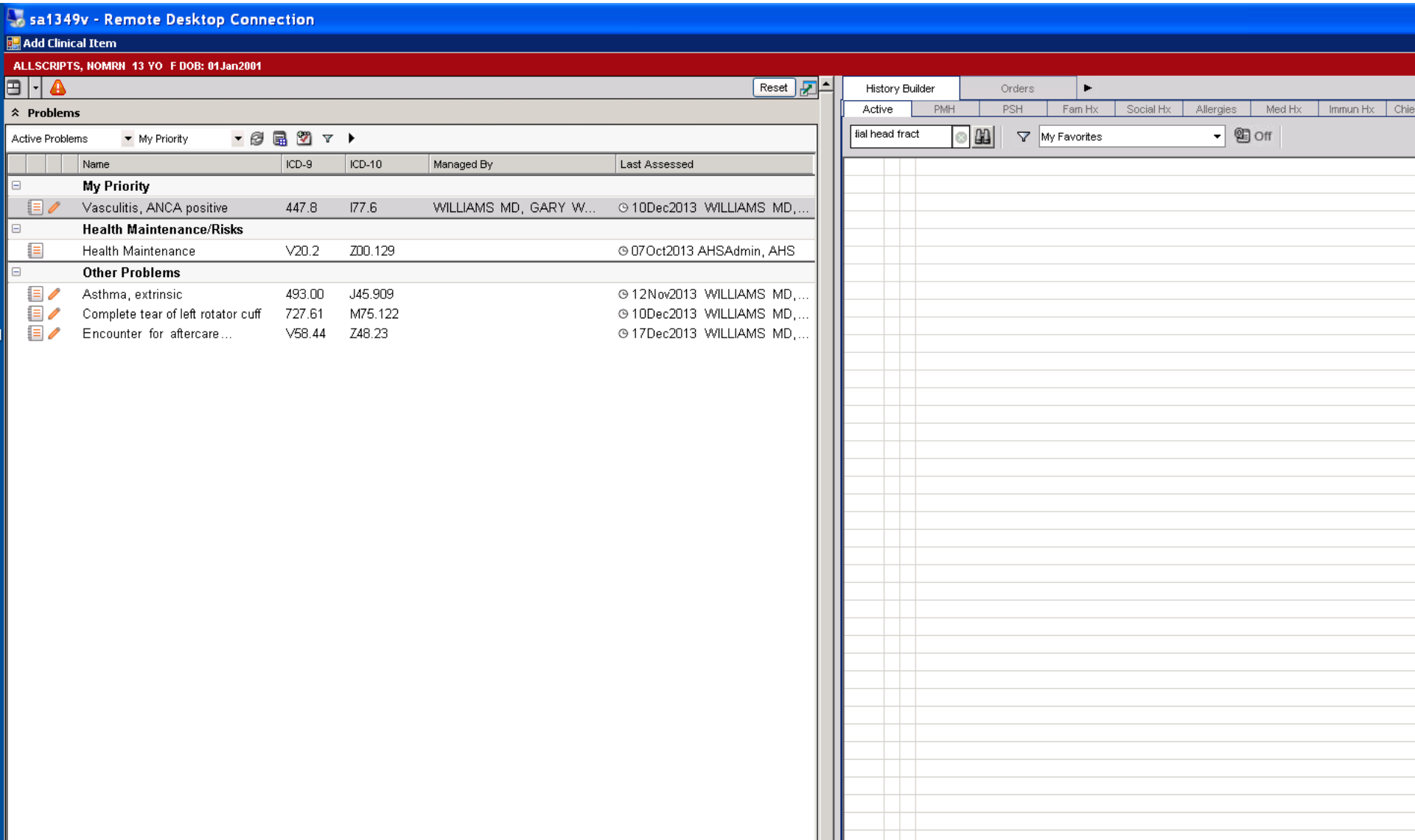
Thinking (Dictating) in ICD-10

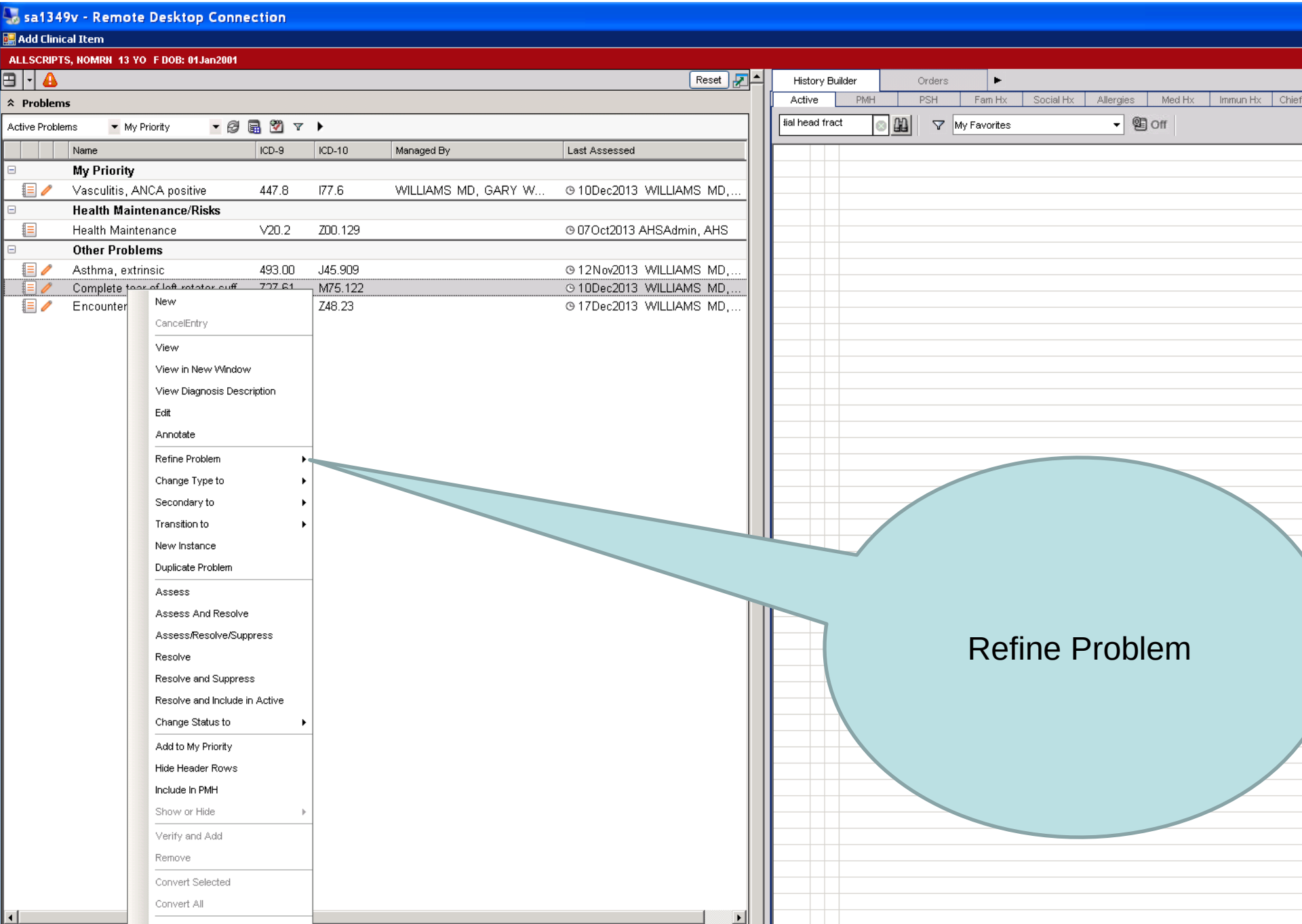
ICD-9 Descriptor and Code	ICD-10 Descriptor and Code
81315 Open fracture of head of radius	**S52.122C** Displaced fracture of head of left radius, initial encounter for open fracture type IIIA, IIIB, or IIIC
Initial Sentence of Dictation	Initial Sentence of Dictation
The patient is seen for evaluation of an open radial head fracture	“The patient is seen for 1) initial evaluation of a 2) left 2) open 3) displaced 2) type IIIA 5) radial head fracture”

Some ICD-10 Specificity is Unlikely to be Used

- **M05.20 Rheumatoid vasculitis with rheumatoid arthritis of unspecified site**
- M05.211 Rheumatoid vasculitis with rheumatoid arthritis of right shoulder
- M05.212 Rheumatoid vasculitis with rheumatoid arthritis of left shoulder
- M05.219 Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder
- M05.221 Rheumatoid vasculitis with rheumatoid arthritis of right elbow
- M05.222 Rheumatoid vasculitis with rheumatoid arthritis of left elbow
- M05.229 Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow
- M05.231 Rheumatoid vasculitis with rheumatoid arthritis of right wrist
- M05.232 Rheumatoid vasculitis with rheumatoid arthritis of left wrist
- M05.239 Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist
- M05.241 Rheumatoid vasculitis with rheumatoid arthritis of right hand
- M05.242 Rheumatoid vasculitis with rheumatoid arthritis of left hand
- M05.249 Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand
- M05.251 Rheumatoid vasculitis with rheumatoid arthritis of right hip
- M05.252 Rheumatoid vasculitis with rheumatoid arthritis of left hip
- M05.259 Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip
- M05.261 Rheumatoid vasculitis with rheumatoid arthritis of right knee
- M05.262 Rheumatoid vasculitis with rheumatoid arthritis of left knee
- M05.269 Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee
- M05.271 Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot
- M05.272 Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot
- M05.279 Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot
- **M05.29 Rheumatoid vasculitis with rheumatoid arthritis of multiple sites**

PROBLEM LIST ENHANCEMENTS

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17Dec2013 WILLIAMS MD,...
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View Diagnosis Description
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Annotate
Refine Problem
Change Type to
Secondary to
Transition to
New Instance
Duplicate Problem
Assess
Assess And Resolve
Assess/Resolve/Suppress
Resolve
Resolve and Suppress
Resolve and Include in Active
Change Status to
Add to My Priority
Hide Header Rows
Include In PMH
Show or Hide
Verify and Add
Remove
Convert Selected
Convert All
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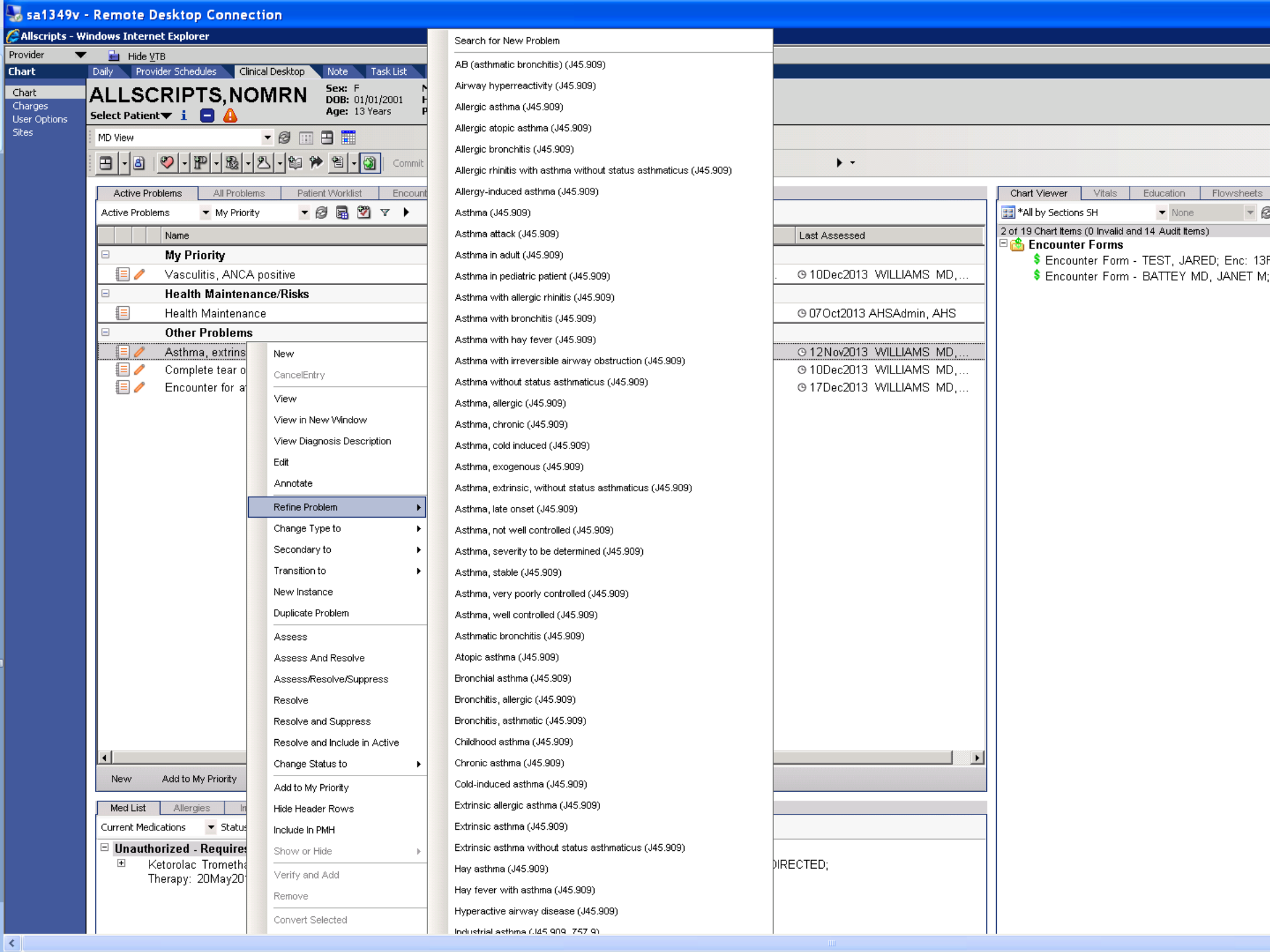
Refine Problem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DOB: 01/01/2001
Age: 13 Years
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Remove
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New
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Med List
Allergies
Current Medications
Unauthorized - Requires
Ketorolac Trometha
Therapy: 20May20
Search for New Problem
AB (asthmatic bronchitis) (J45.909)
Airway hyperreactivity (J45.909)
Allergic asthma (J45.909)
Allergic atopic asthma (J45.909)
Allergic bronchitis (J45.909)
Allergic rhinitis with asthma without status asthmaticus (J45.909)
Allergy-induced asthma (J45.909)
Asthma (J45.909)
Asthma attack (J45.909)
Asthma in adult (J45.909)
Asthma in pediatric patient (J45.909)
Asthma with allergic rhinitis (J45.909)
Asthma with bronchitis (J45.909)
Asthma with hay fever (J45.909)
Asthma with irreversible airway obstruction (J45.909)
Asthma without status asthmaticus (J45.909)
Asthma, allergic (J45.909)
Asthma, chronic (J45.909)
Asthma, cold induced (J45.909)
Asthma, exogenous (J45.909)
Asthma, extrinsic, without status asthmaticus (J45.909)
Asthma, late onset (J45.909)
Asthma, not well controlled (J45.909)
Asthma, severity to be determined (J45.909)
Asthma, stable (J45.909)
Asthma, very poorly controlled (J45.909)
Asthma, well controlled (J45.909)
Asthmatic bronchitis (J45.909)
Atopic asthma (J45.909)
Bronchial asthma (J45.909)
Bronchitis, allergic (J45.909)
Bronchitis, asthmatic (J45.909)
Childhood asthma (J45.909)
Chronic asthma (J45.909)
Cold-induced asthma (J45.909)
Extrinsic allergic asthma (J45.909)
Extrinsic asthma (J45.909)
Extrinsic asthma without status asthmaticus (J45.909)
Hay asthma (J45.909)
Hay fever with asthma (J45.909)
Hyperactive airway disease (J45.909)
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Encounter Form - BATTEY MD, JANET M;
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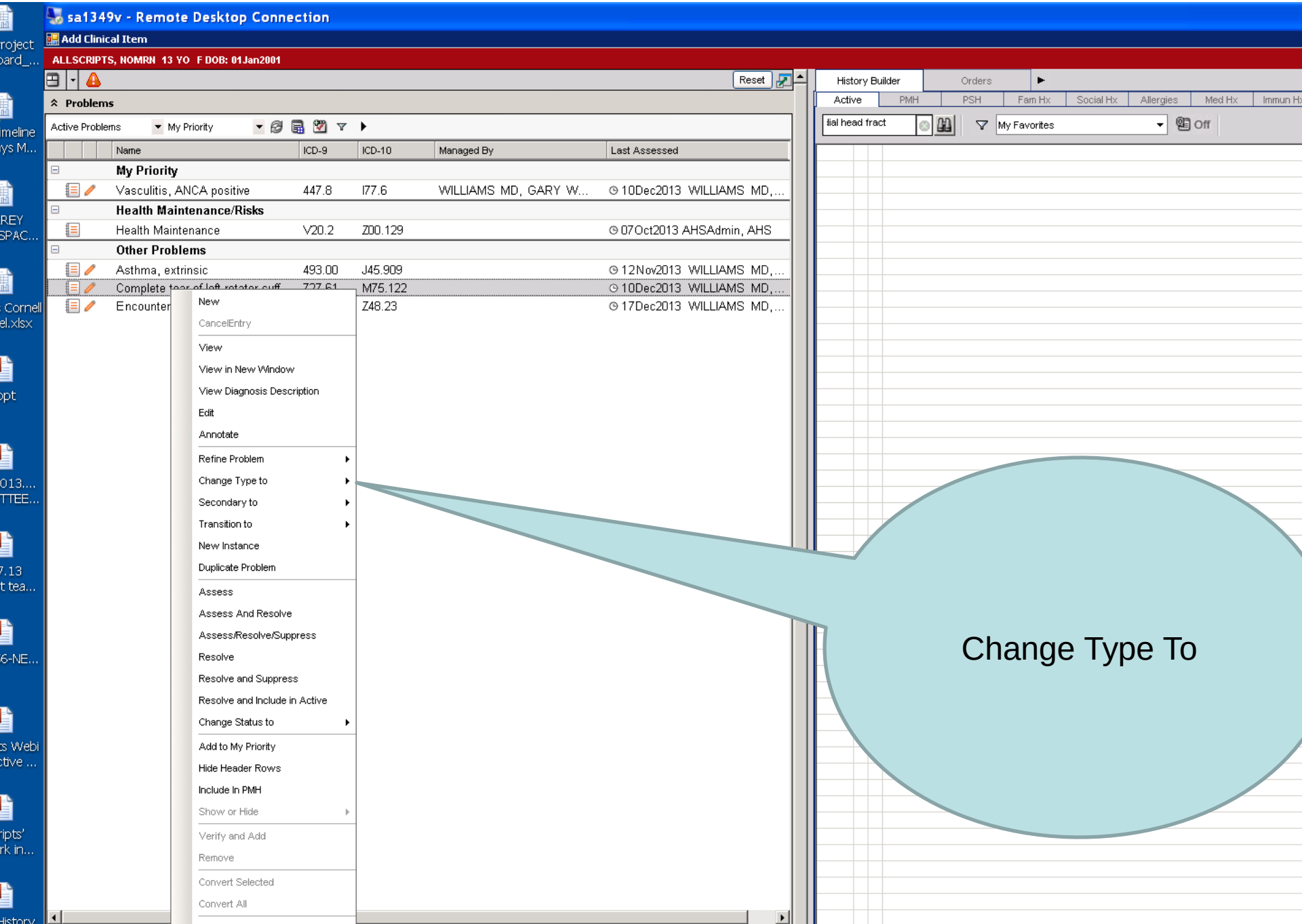
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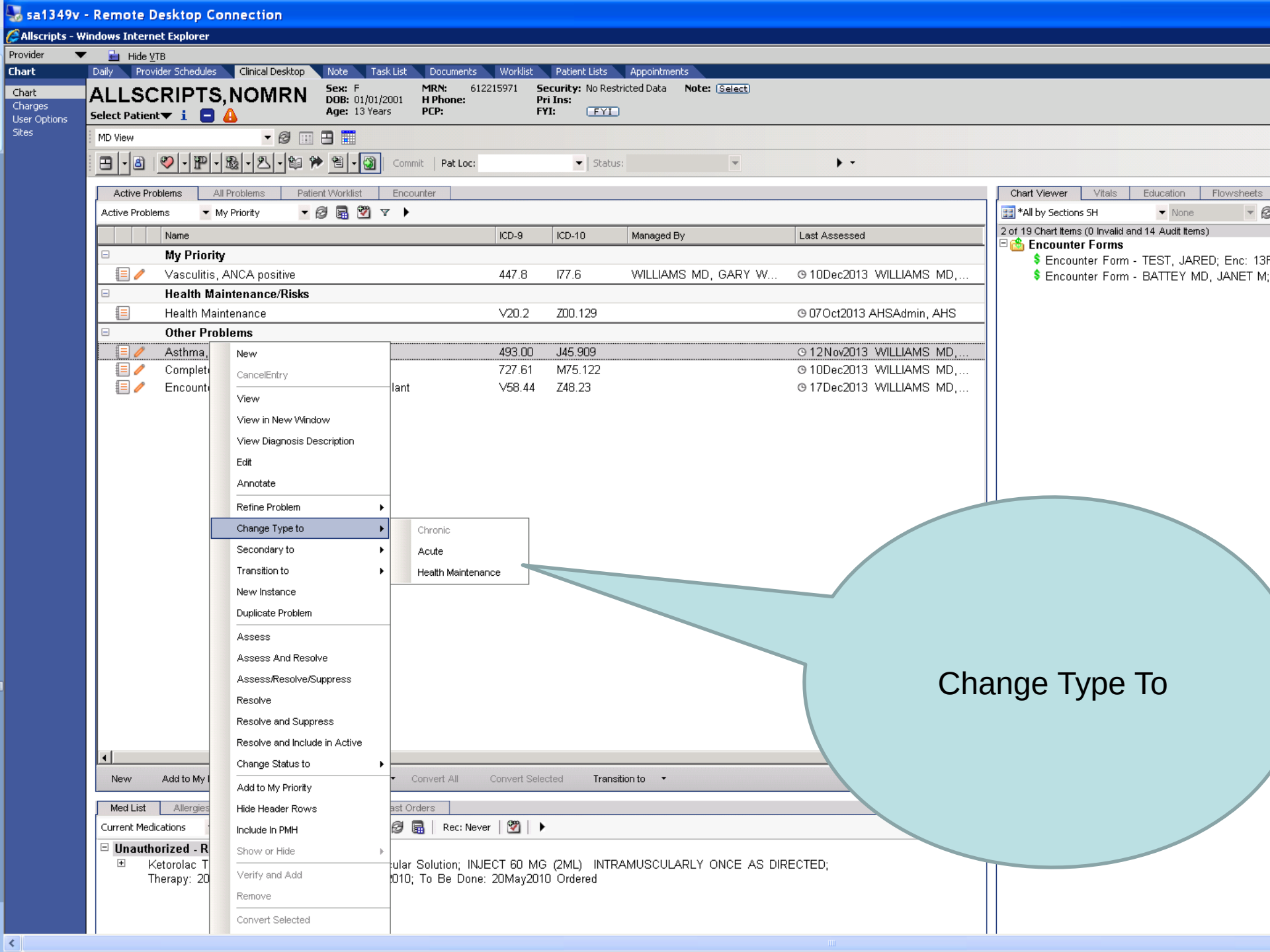
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DOB: 01/01/2001
Age: 13 Years
MRN: 612215971
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Encounter Form - BATTEY MD, JANET M;
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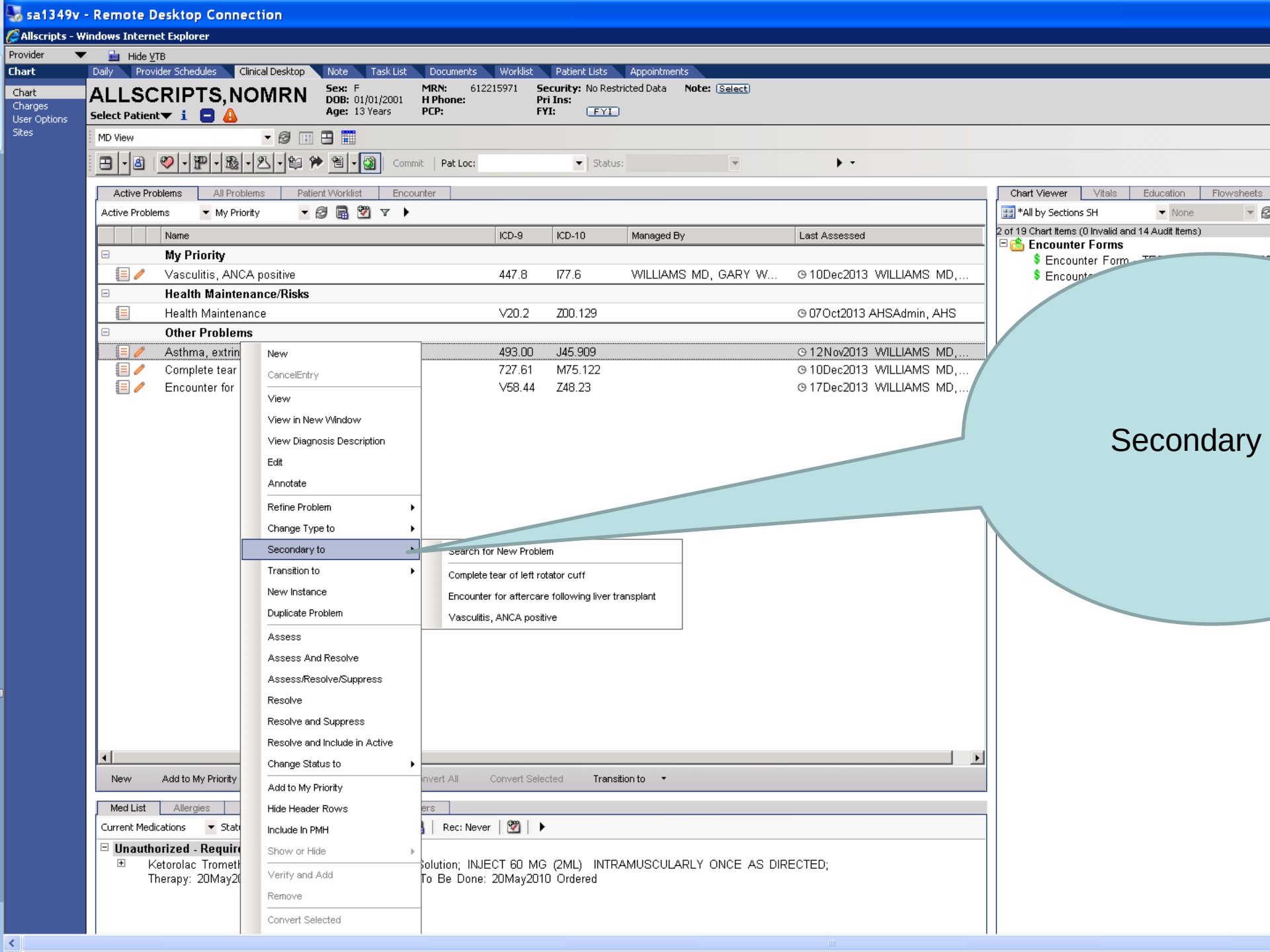
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Encounter for aftercare following liver transplant
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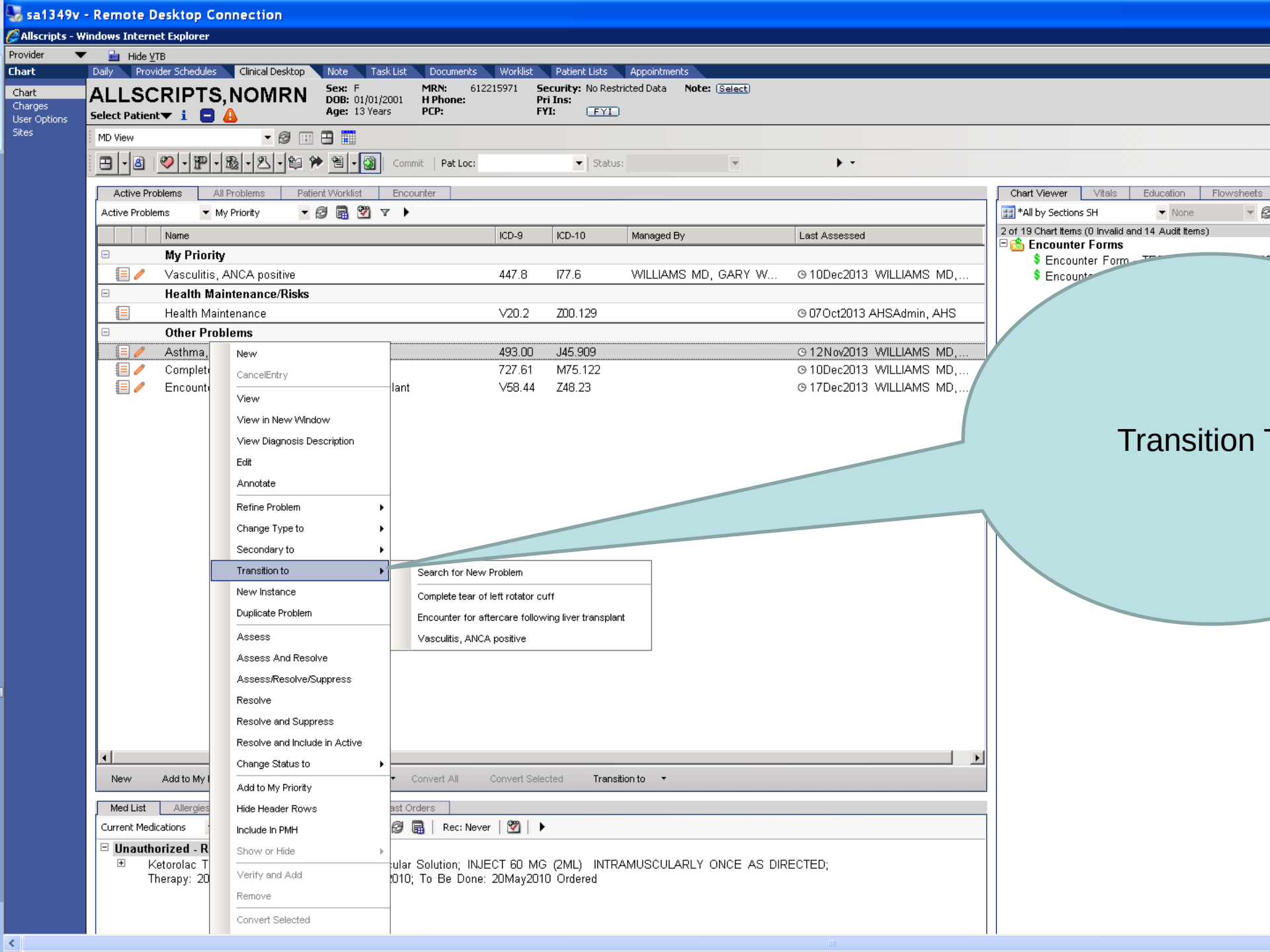
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None
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Encounter Forms
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Problem Conversion (up to 7 days)

Time to complete the CONVERSION of all MAPPED problems in ~400,000 charts)

- Actual Conversion of ICD-9 codes (already Mapped with the mapping tool) to ICD-10 will start at Go Live Weekend
- PRIORITY
  - First Week of Scheduled Encounters Convert All* Patients' Problems
  - Patients with Most Frequent Encounters (frequent visitors)
  - Most Frequently Used Diagnoses (will map diagnosis in every chart)

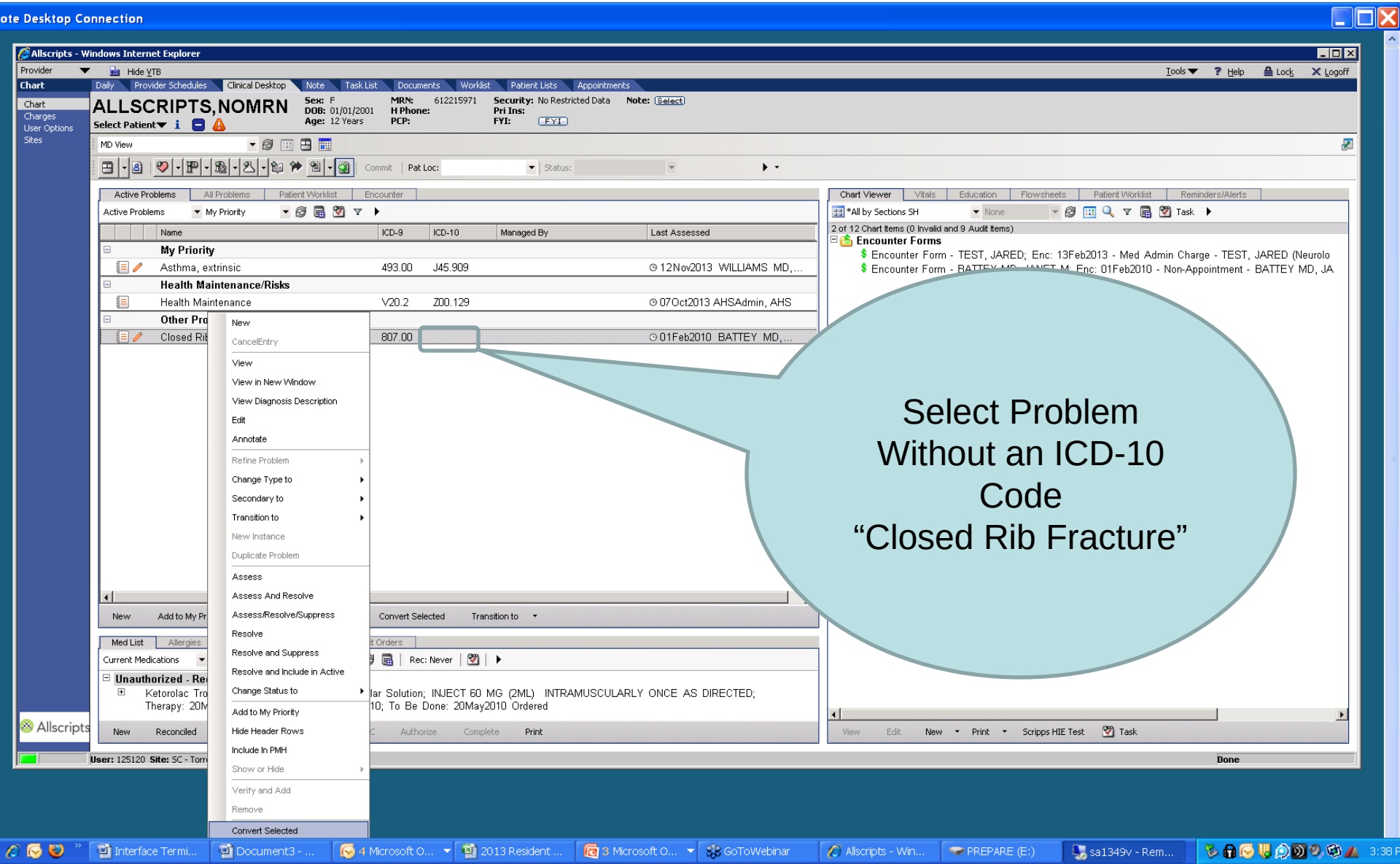
  - *Rare problems (only one instance in the data base) are not mapped

Problem Conversion (up to 7 days)

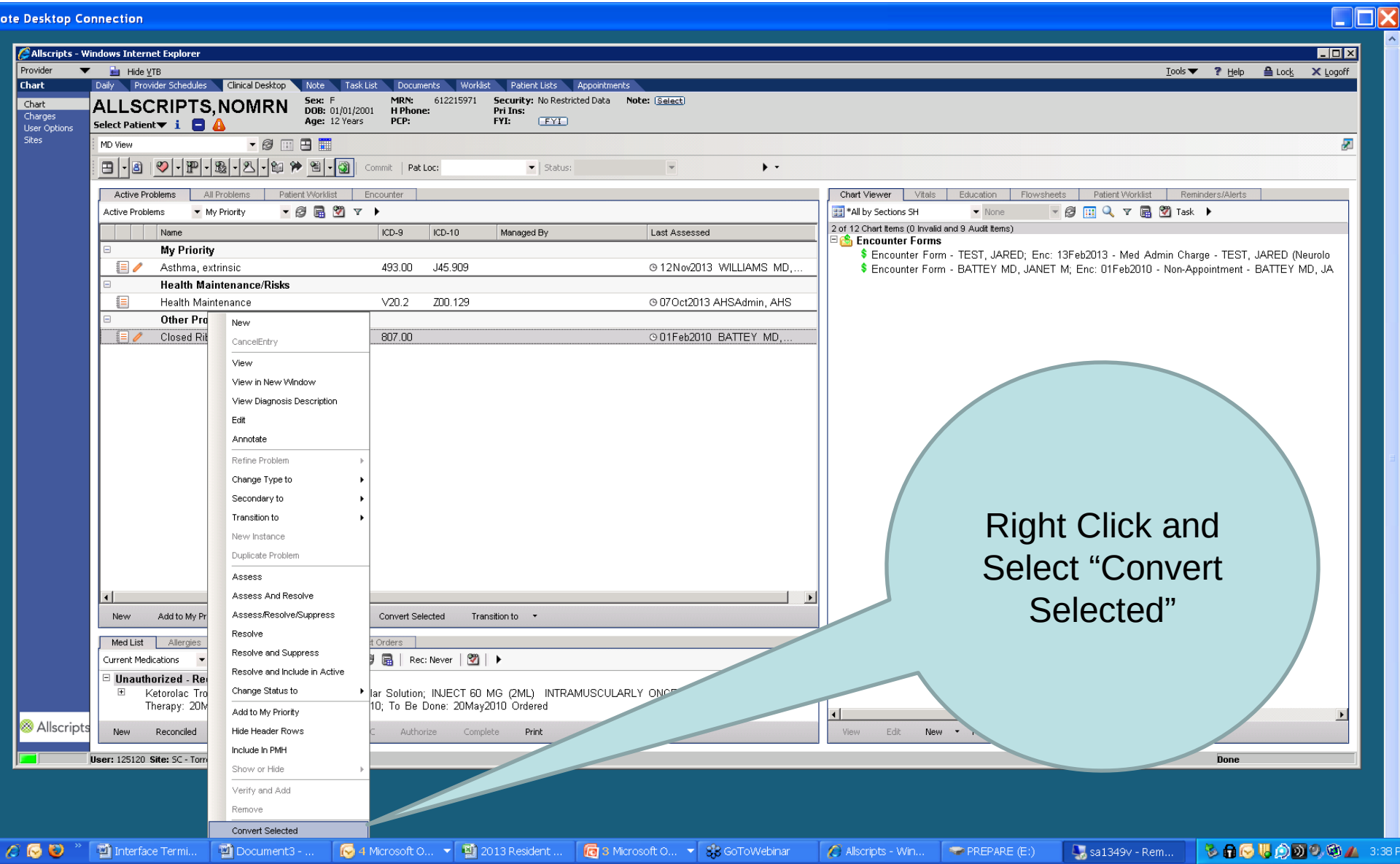
Time to complete the CONVERSION of all MAPPED problems in ~400,000 charts)

- IMPACT
  - Urgent Care (and any other add-on/unscheduled appointment)
  - Patient May Present with an “Unconverted” Problem
- OPTIONS
  - Right Click Add New (Rib Fracture) will display ICD-9 and ICD-10 Codes
  - Select an Unconverted Problem on the Patient’s Current Problem List
  - We will need to convert the problem (if we are billing for it)
  - *Rare problems (only one instance in the data base) are not mapped

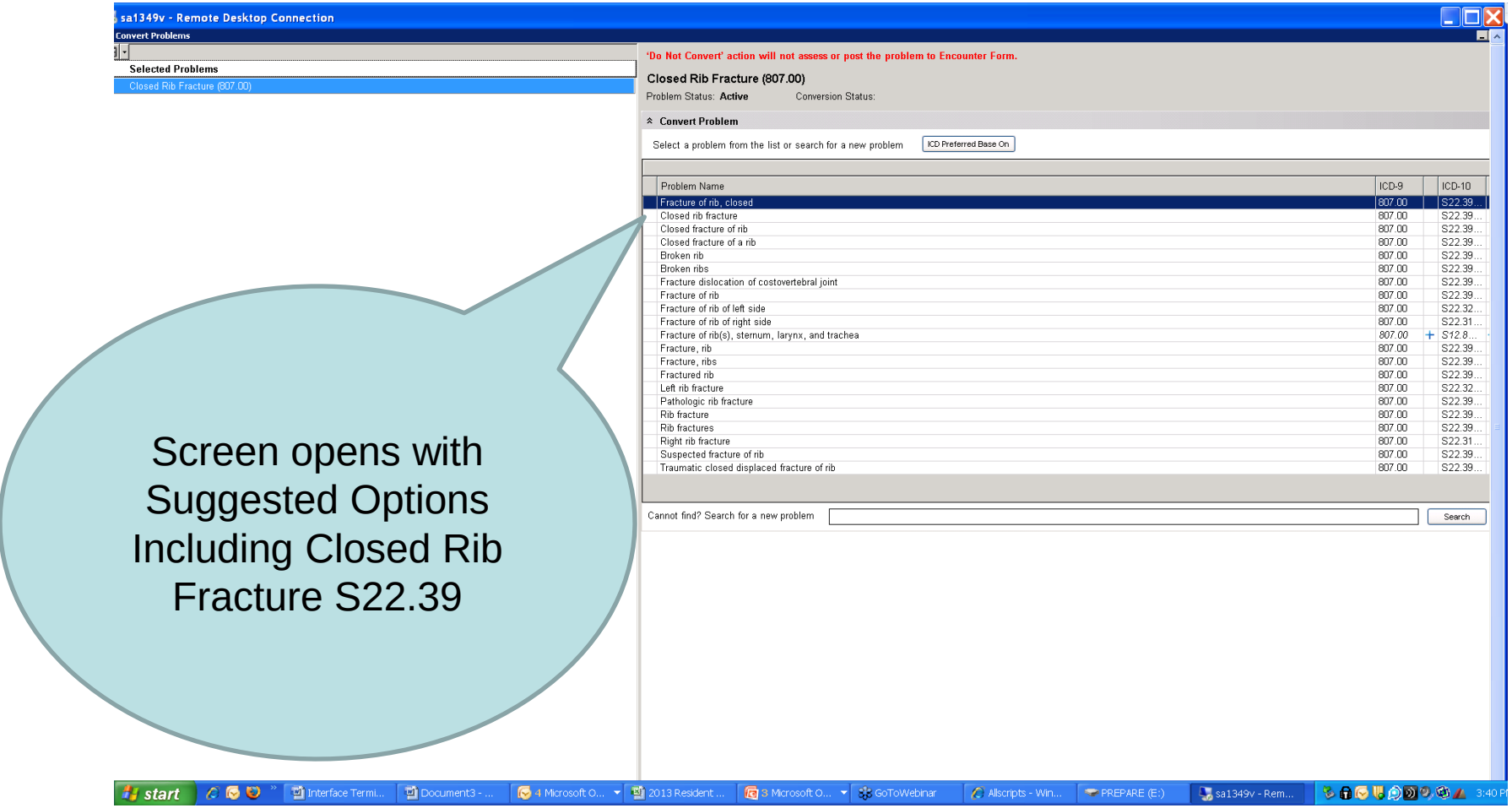
CONVERT SELECTED PROBLEM



CONVERT SELECTED PROBLEM

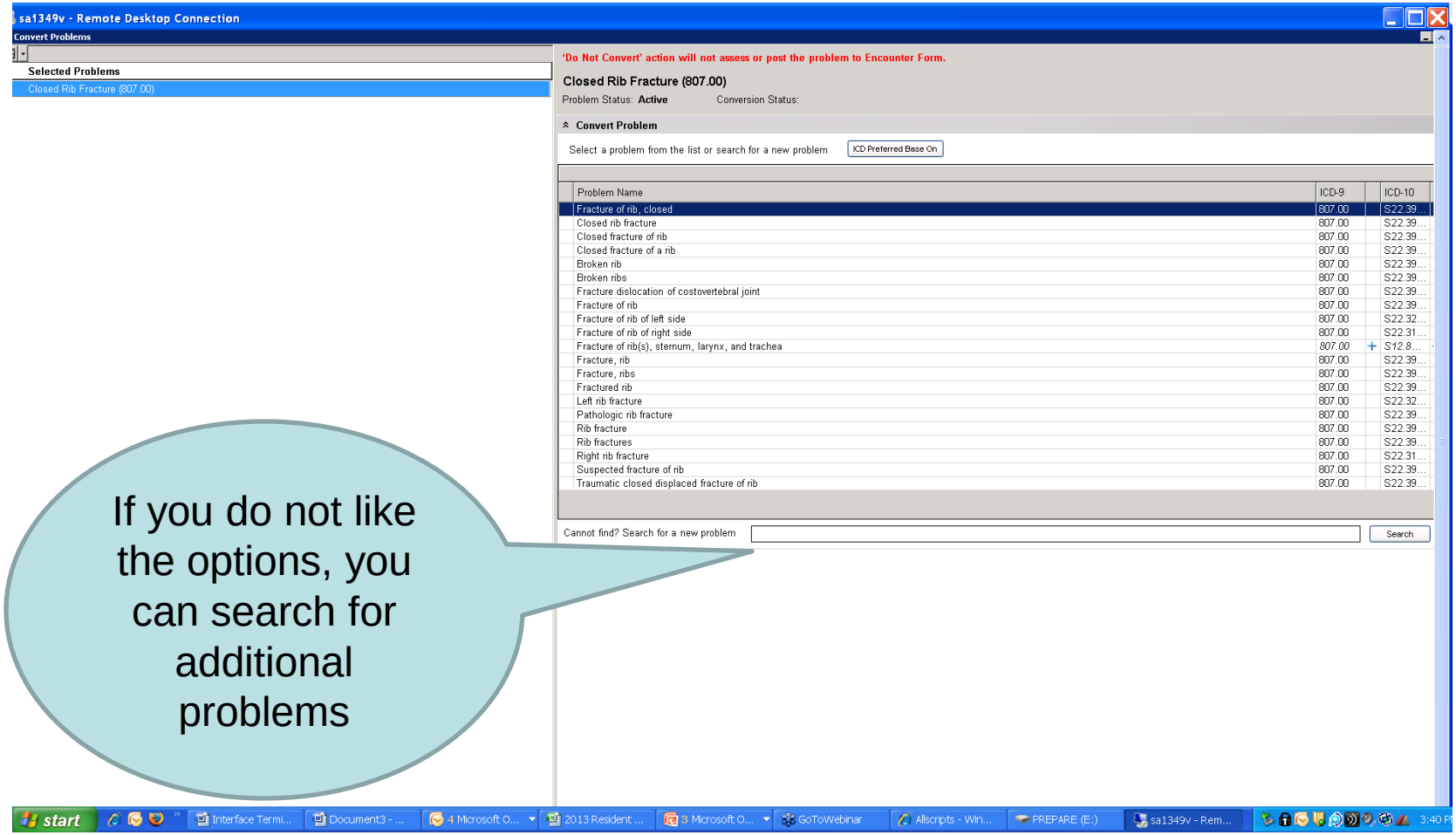


CONVERT PROBLEM OPTIONS

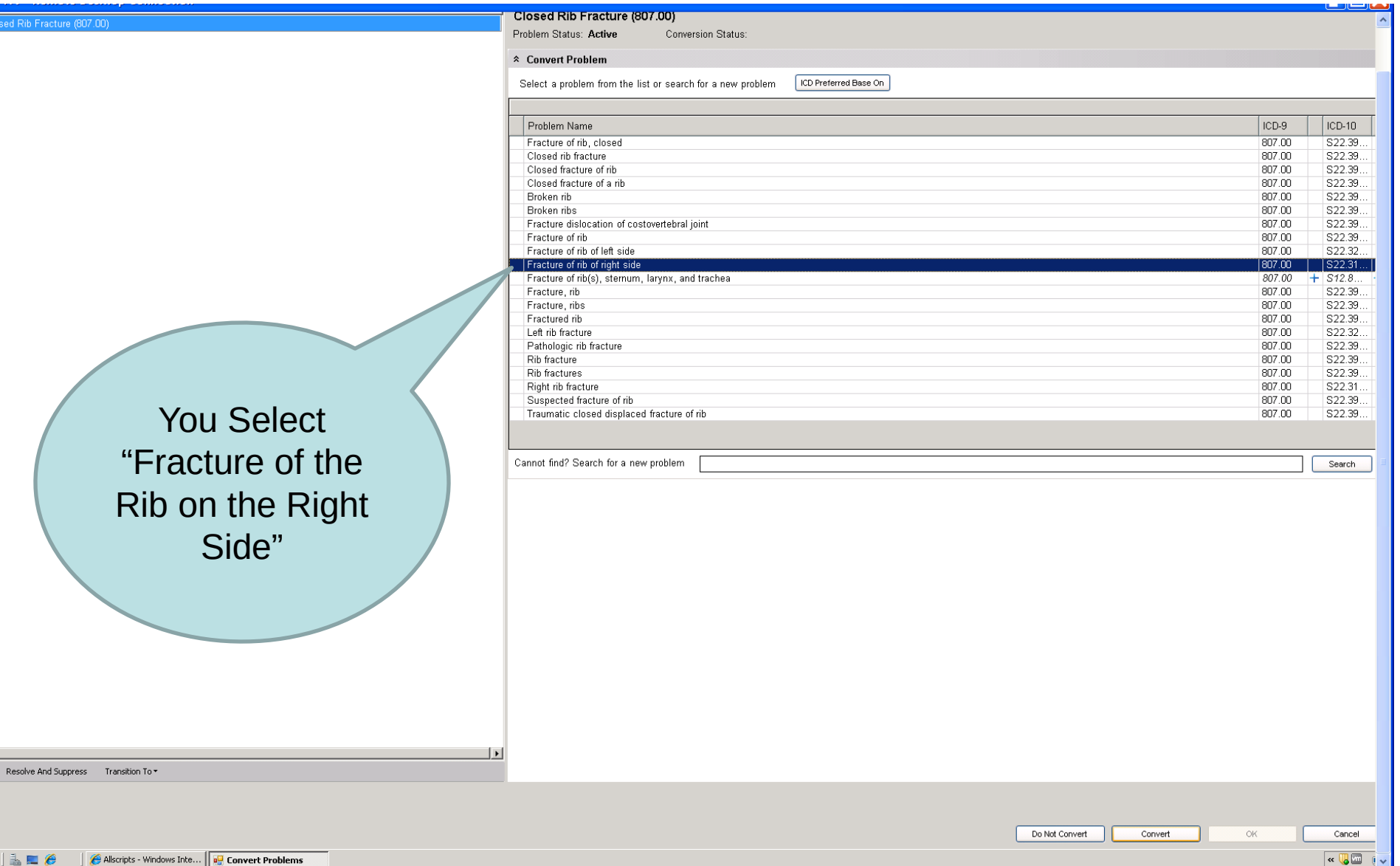


Screen opens with Suggested Options Including Closed Rib Fracture S22.39

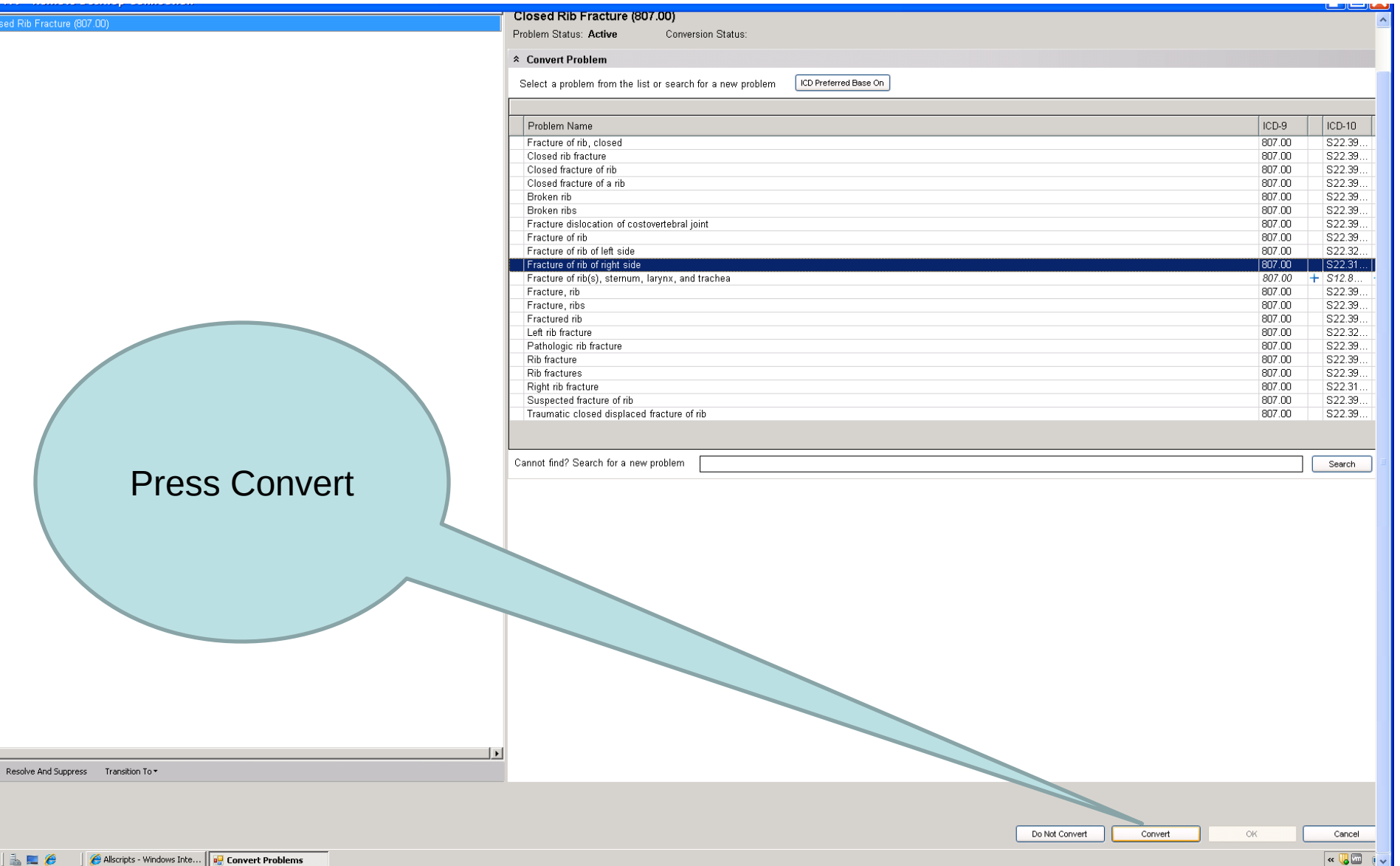
CONVERT PROBLEM OPTIONS



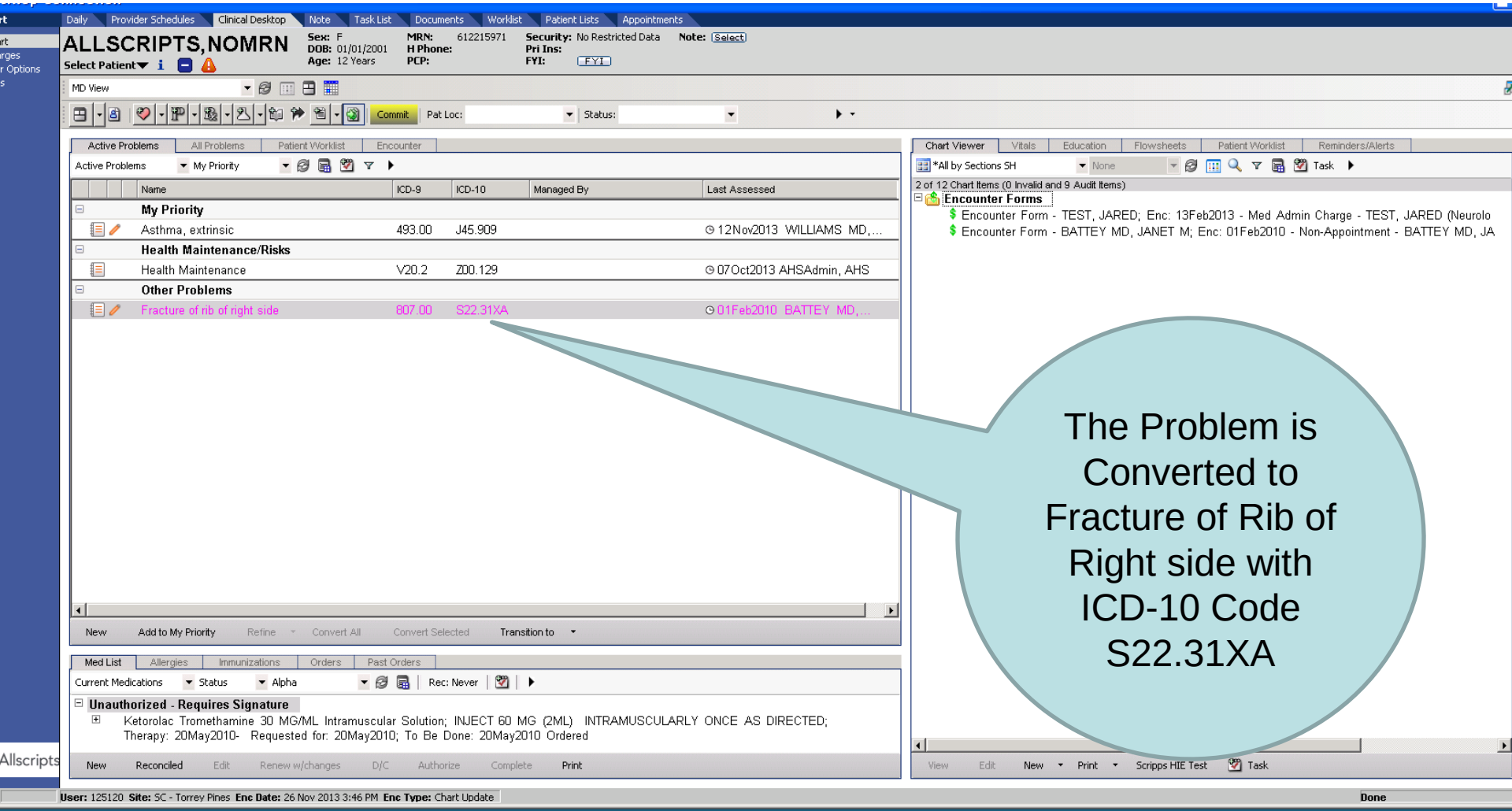
Select Choice for Problem Conversion

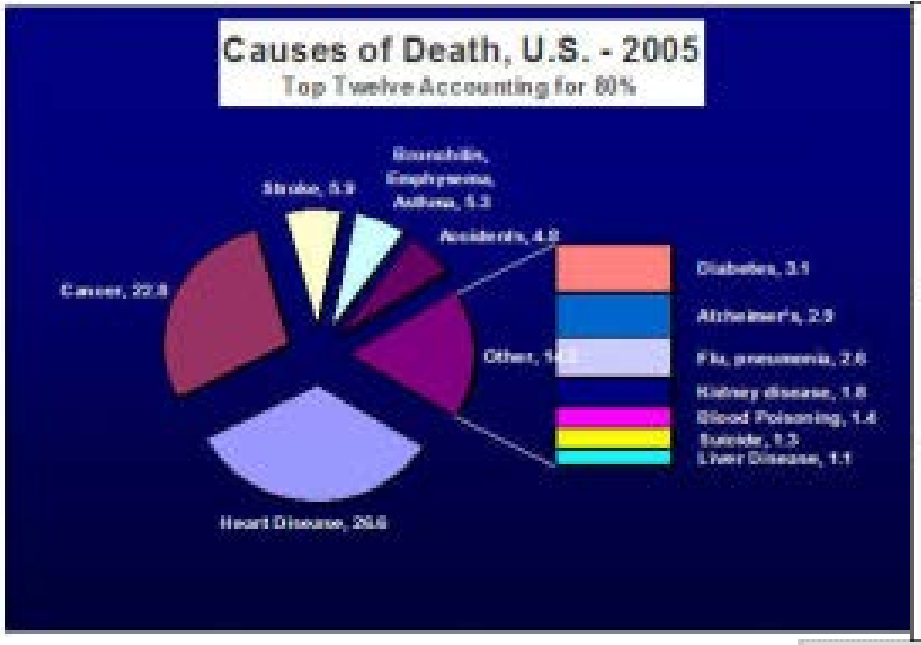


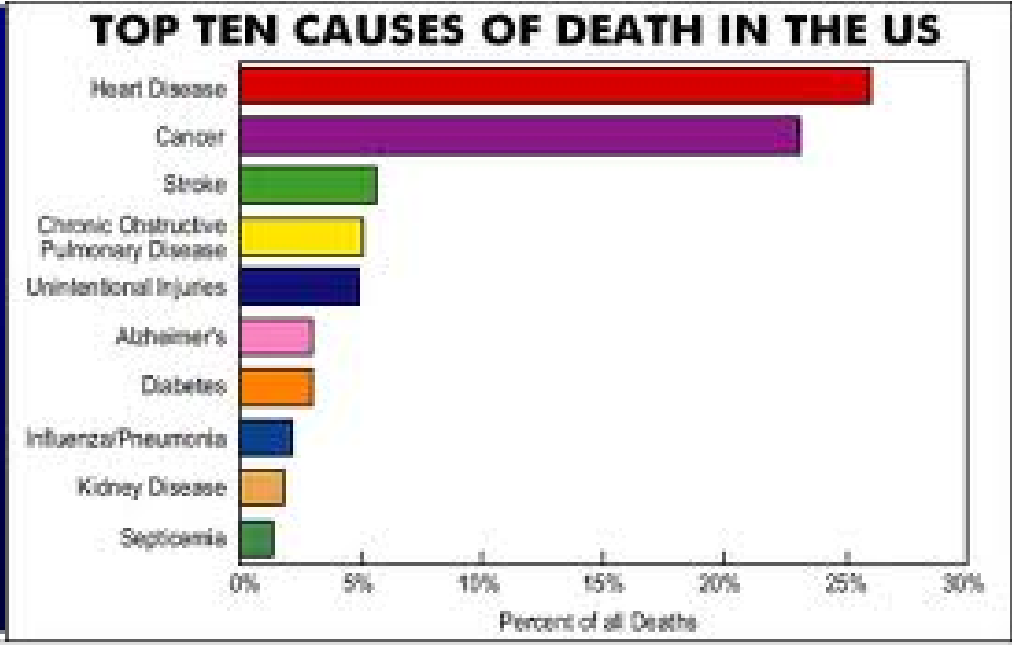
Select Choice for Problem Conversion

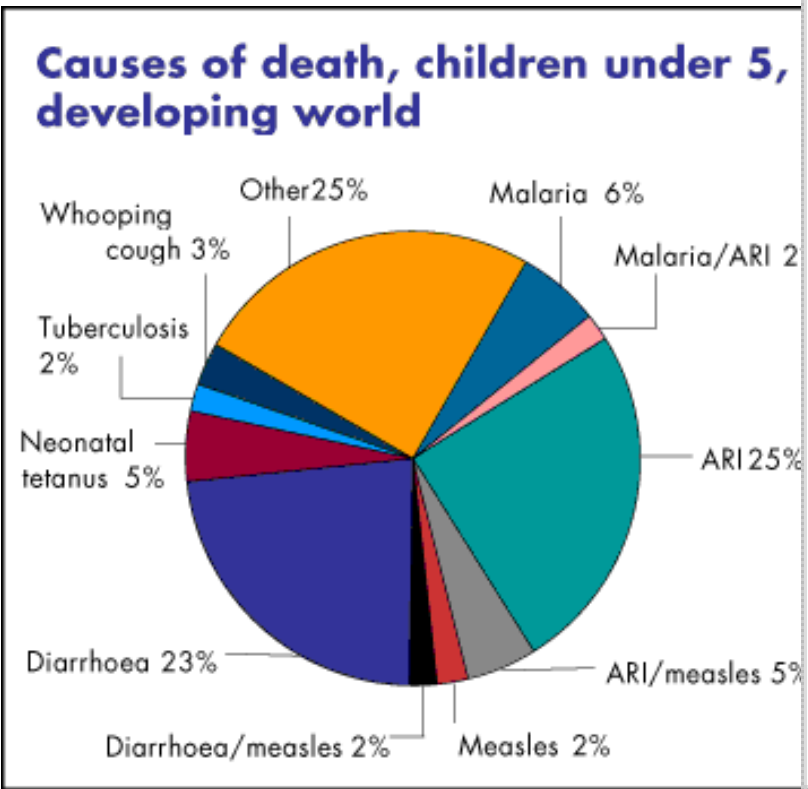


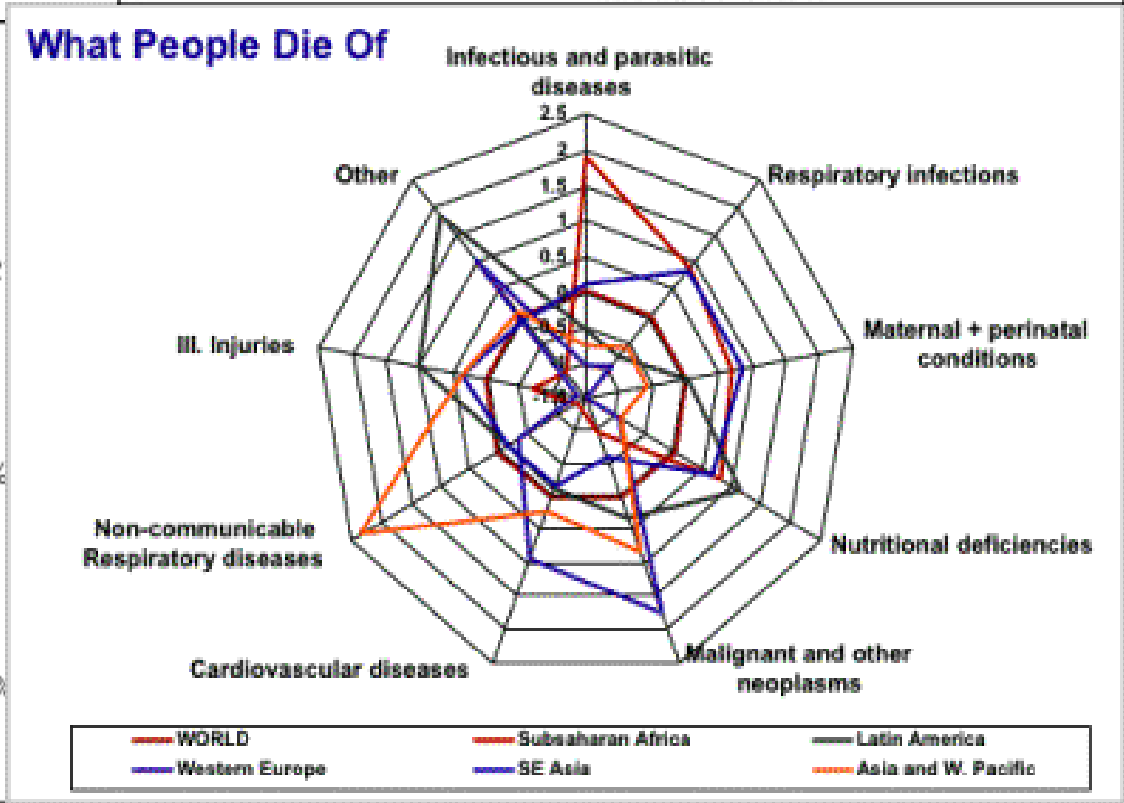
Problem Converted to Selected ICD-10



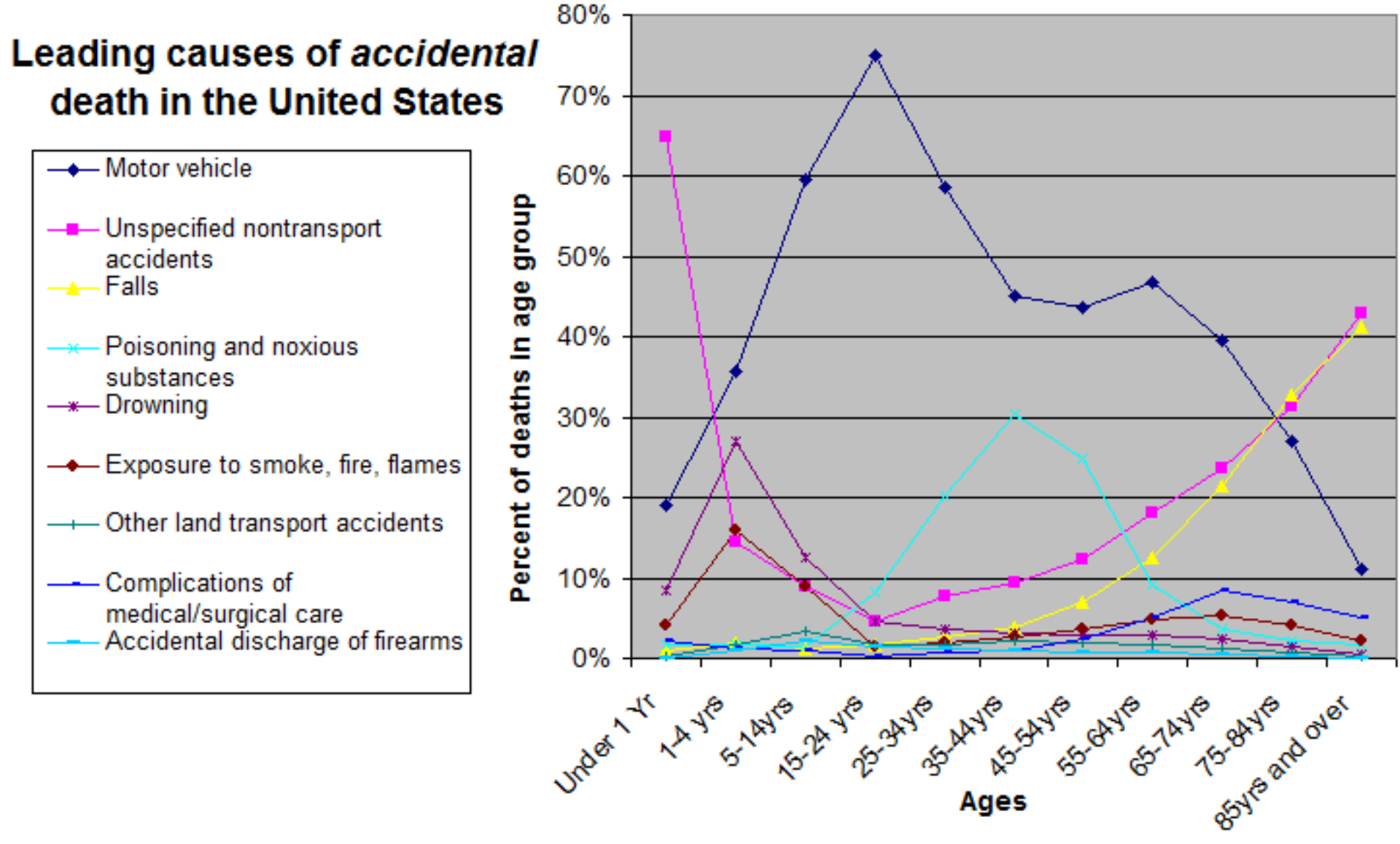

Causes of Death, U.S. - 2005
Top Twelve Accounting for 80%
Stroke, 5.9
Bronchitis, Emphysema, Asthma, 5.3
Accidents, 4.9
Cancer, 22.8
Diabetes, 3.1
Alzheimer's, 2.9
Other, 14
Flu, pneumonia, 2.6
Kidney disease, 1.8
Blood Poisoning, 1.4
Suicide, 1.3
Liver Disease, 1.1
Heart Disease, 26.6


TOP TEN CAUSES OF DEATH IN THE US
Heart Disease
Cancer
Stroke
Chronic Obstructive Pulmonary Disease
Unintentional Injuries
Alzheimer's
Diabetes
Influenza/Pneumonia
Kidney Disease
Septicemia
0%
5%
10%
15%
20%
25%
30%
Percent of all Deaths

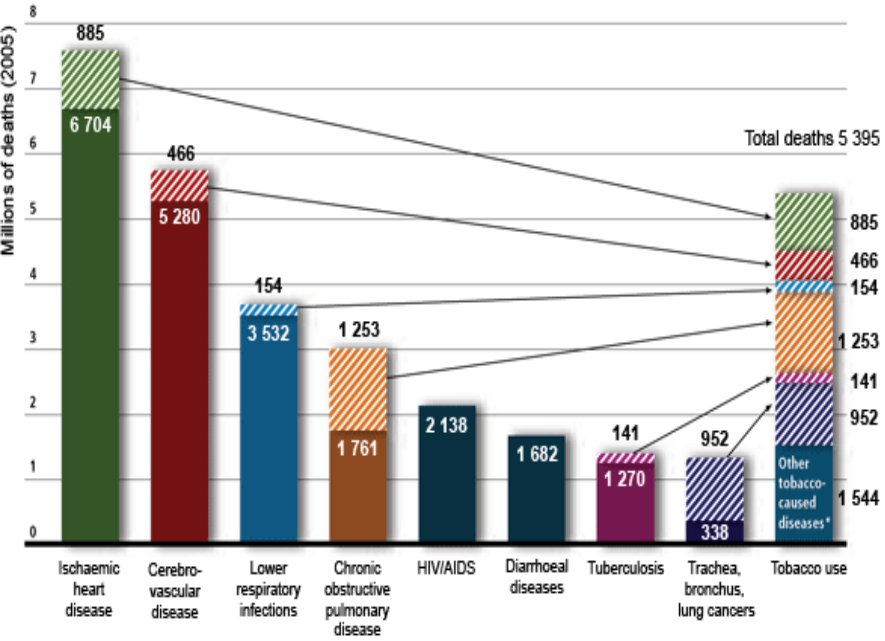

Causes of death, children under 5, developing world
Other25%
Malaria 6%
Whooping cough 3%
Malaria/ARI 2
Tuberculosis 2%
Neonatal tetanus 5%
ARI 25%
Diarrhoea 23%
ARI/measles 5%
Diarrhoea/measles 2%
Measles 2%


What People Die Of
Infectious and parasitic diseases
Other
Respiratory infections
Ill. Injuries
Maternal + perinatal conditions
Non-communicable Respiratory diseases
Nutritional deficiencies
Cardiovascular diseases
Malignant and other neoplasms
WORLD
Subsaharan Africa
Latin America
Western Europe
SE Asia
Asia and W. Pacific

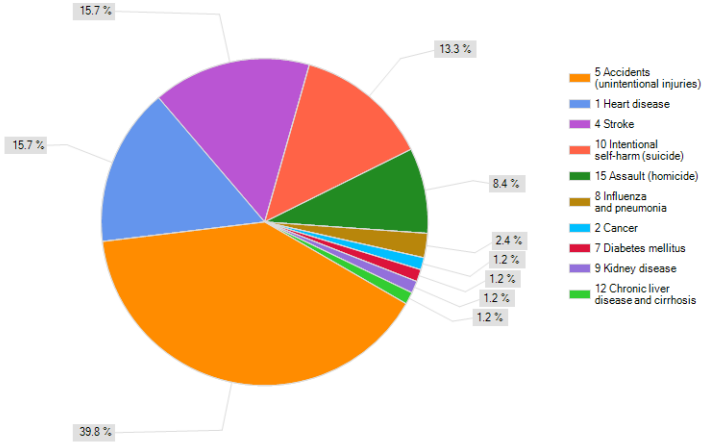
Accidental Death



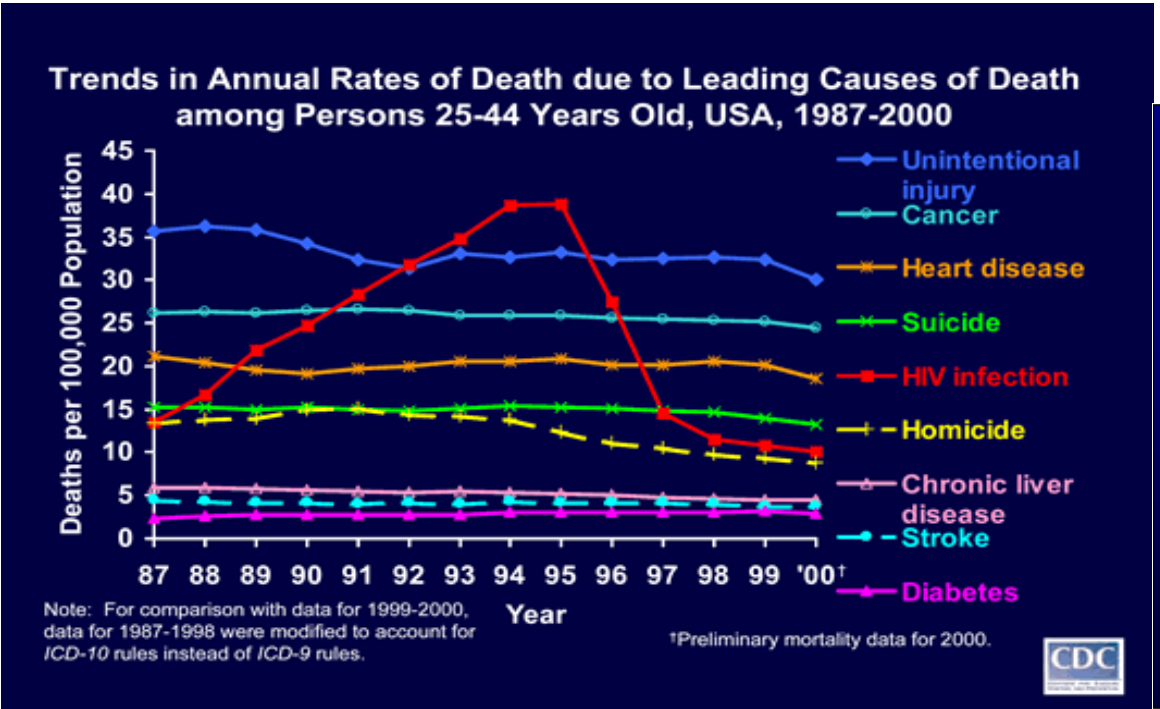
TOBACCO USE IS A RISK FACTOR FOR SIX OF THE EIGHT LEADING CAUSES Of DEATH IN THE WORLD



Out of the top 15 causes of death, if you could control your mortality, which cause would you choose for your own death? (From 2009 National Vital Statistics Report)

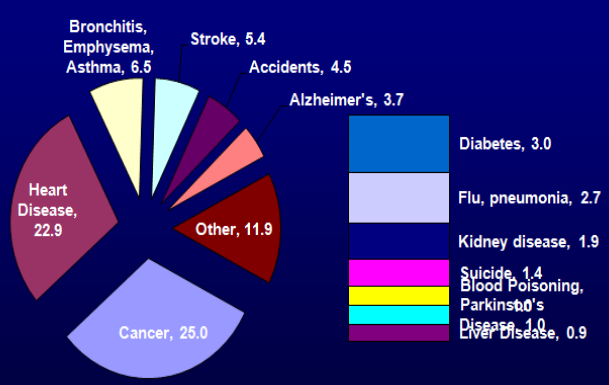


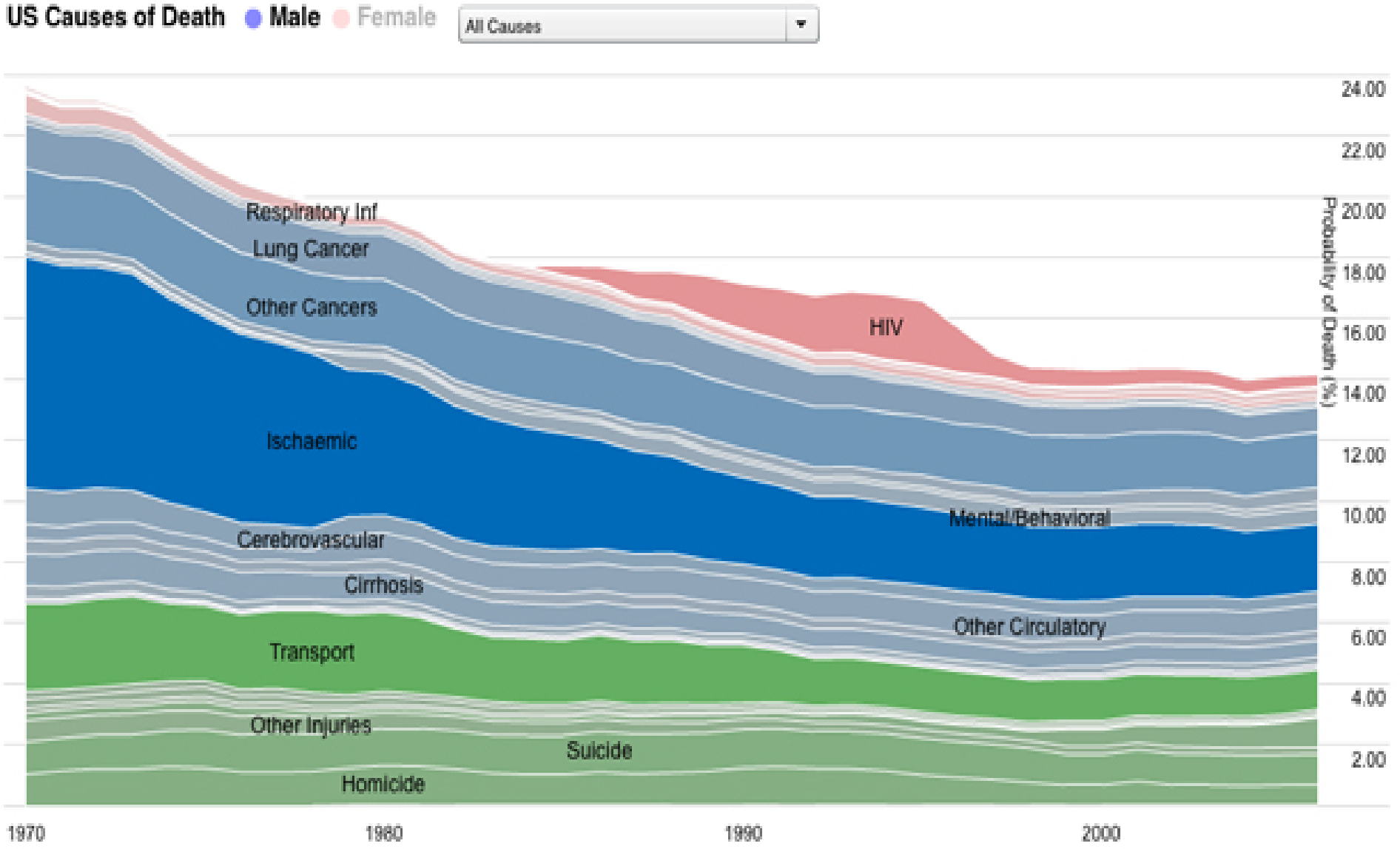
Trends in Annual Rates of Death due to Leading Causes of Death among Persons 25-44 Years Old, USA, 1987-2000



Causes of Death, Maine - 2005

Top Thirteen, Accounting for 80%




US Causes of Death
Male
Female
All Causes
Respiratory Inf
Lung Cancer
Other Cancers
Ischaemic
Cerebrovascular
Cirrhosis
Transport
Other Injuries
Homicide
Suicide
HIV
Mental/Behavioral
Other Circulatory
24.00
22.00
20.00
18.00
16.00
14.00
12.00
10.00
8.00
6.00
4.00
2.00
Probability of Death (%)
1970
1980
1990
2000

ICD-11 Development Underway

- The 11th version, ICD-11, is being prepared. The development phase will continue for three years and ICD-11 will be finalized in 2015 (Release in 2020?).
- For the first time, through advances in information technology, public health users, stakeholders and others interested can provide input to the beta version of ICD-11 using an online revision process.
- Peer-reviewed comments and input will be added through the revision period.
- When finalized, ICD-11 will be ready to use with electronic health records and information systems.
- WHO encourages broad participation in the 11th revision so that the final classification meets the needs of health information users and is more comprehensive.

THANK YOU

Questions?