

ICD-10-CM Interim Coding Guidance for COVID-19 (February 20, 2020-March 31, 2020)

Note: Diagnosis code B34.2, Coronavirus infection, unspecified, would in general not be appropriate for the COVID-19, because the cases have universally been respiratory in nature, so the site would not be "unspecified." If the provider documents "suspected", "possible" or "probable" COVID-19, do not assign code B97.29. Assign a code(s) explaining the reason for encounter (such as fever, or Z20.828).

This coding guidance has been developed by CDC and approved by the four organizations that make up the Cooperating Parties: the National Center for Health Statistics, the American Health Information Management Association, the American Hospital Association, and the Centers for Medicare & Medicaid Services.

COVID-10 clinical presentation:

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/official-criteria.html>

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Billing for COVID-19 Evaluation and Testing

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This document applies to Medicaid Fee For Service only

Provider One will be updated to accept the new code developed by CMS for testing of the novel coronavirus, COVID-19

Billing for COVID-19 Testing

The following codes have been created to bill for testing for COVID-19. The codes will take effect by April 1, however retroactive claims will be accepted from dated from February 4th forward.

- U0001- for CDC testing laboratories to test patients for SARS-CoV-2
- U0002 non-CDC laboratory tests for SARS-CoV-2/2019-nCoV (COVID-19)

Billing for COVID-19 Related Services

Currently, there are no specific ICD-10 codes to use when billing for services related to COVID-19. The CDC has provided the following coding guidelines for COVID-19.

Condition Related to COVID-19	Associated ICD-10 code	Condition Related to COVID-19	Associated ICD-10 code
Pneumonia confirmed as due to COVID-19	J12.89 Other viral pneumonia AND B97.29 Other coronavirus as the cause of diseases classified elsewhere.	Acute bronchitis confirmed as due to COVID-19	J20.8 Acute bronchitis due to other specified organisms AND B97.29, Other coronavirus as the cause of diseases classified elsewhere
Lower respiratory infection, not otherwise specified (NOS), or an acute respiratory infection	This should be assigned with code J22, Unspecified acute lower respiratory infection AND B97.29 Other coronavirus as the cause of diseases classified elsewhere	Bronchitis not otherwise specified (NOS) confirmed as due to COVID-19	J40 Bronchitis, not specified as acute or chronic AND B97.29, Other coronavirus as the cause of diseases classified elsewhere.
If the COVID-19 is documented as being associated with a respiratory infection, NOS	J98.8, Other specified respiratory disorders, AND B97.29, Other coronavirus as the cause of diseases classified elsewhere.	Cases with ARDS due to COVID-19	J80, Acute respiratory distress syndrome AND B97.29, Other coronavirus as the cause of diseases classified elsewhere
Possible exposure to COVID-19, but this is ruled out after evaluation	Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out.	Actual exposure to someone who is confirmed to have COVID-19	Z20.828, Contact with and (suspected) exposure to other viral communicable diseases.

signs/symptoms (such as fever, etc.) and where a definitive diagnosis has not been established	R05 Cough • R06.02 Shortness of breath • R50.9 Fever, unspecified		
<p>Diagnosis code B34.2, Coronavirus infection, unspecified, would in general not be appropriate for the COVID-19, because the cases have universally been respiratory in nature, so the site would not be "unspecified"</p> <p>If the provider documents "suspected", "possible" or "probable" COVID-19, do not assign code B97.29. Assign a code(s) explaining the reason for encounter (such as fever, or Z20.828)</p>			
<p>This coding guidance has been developed by CDC and approved by the four organizations that make up the Cooperating Parties: the National Center for Health Statistics, the American Health Information Management Association, the American Hospital Association, and the Centers for Medicare & Medicaid Services.</p>			

<https://www.cdc.gov/nchs/data/icd/icd-10-CM-Official-Coding-Guidance-Interim-Advice-coronavirus-feb-20-2020.pdf>

ICD-10-CM Coding Guidelines for Encounters Related to 2019 Coronavirus Disease (COVID-19)

Based on CDC Guidance (effective February 20, 2020): <https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Guidance-Interim-Advice-coronavirus-feb-20-2020.pdf>

Confirmed Case of COVID-19:

- Assign ICD-10 code **B97.29, Other coronavirus as the cause of diseases classified elsewhere**
- **AND** assign ICD-10 code for the respiratory disease confirmed as due to COVID-19:
 - Pneumonia: J12.89, Other viral pneumonia
 - Bronchitis:
 - Acute Bronchitis: J20.8, Acute bronchitis due to other specified organisms
 - Bronchitis, not otherwise specified (NOS): J40, Bronchitis, not specified as acute or chronic
 - Lower Respiratory Infection:
 - Lower respiratory infection, NOS: J22, Unspecified acute lower respiratory infection
 - Acute respiratory infection, NOS: J22, Unspecified acute lower respiratory infection
 - Respiratory infection, NOS: J98.8, Other specified respiratory disorders
 - Acute Respiratory Distress Syndrome (ARDS): J80, Acute respiratory distress syndrome

Suspected/Possible/Probable (with no COVID-19 Confirmed Diagnosis):

- Assign ICD-10 codes for each of the presenting signs and symptoms, such as:
 - Cough: R05, Cough
 - Shortness of Breath: R06.02, Shortness of breath
 - Fever: R50.9, Fever, unspecified

Exposure to COVID-19:

- Assign ICD-10 code for the exposure type (suspected or ruled out):
 - Exposure to someone who is confirmed to have COVID-19: Z20.828, Contact with and (suspected) exposure to other viral communicable diseases
 - Concern about possible exposure, but this is ruled out after evaluation: Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out

Note: DO NOT assign ICD-10 code B34.2, Coronavirus infection, unspecified. COVID-19 cases have universally been respiratory in nature, so the site is not "unspecified."

ICD-10-CM Coding Guidelines for Encounters Related to 2019 Coronavirus Disease (COVID-19)

Confirmed COVID-19 Case:

Assign B97.29 and the ICD-10 code for the respiratory disease confirmed as due to COVID-19

Viral Agent: COVID-19	Respiratory Disease
B97.29 Other coronavirus as the cause of disease classified elsewhere	Pneumonia bronchitis Acute bronchitis bronchitis, not otherwise specified (J05) J06, bronchitis, not specified as acute or chronic Lower respiratory infection Lower resp system infection NOS Acute respiratory tract inf. ICD-10 Respiratory infection ICD-10 Acute respiratory distress syndrome J69, Acute respiratory distress syndrome
AND	Respiratory Disease J12.8X, Other viral pneumonia J20.8, Acute bronchitis due to other spec. find organisms J06, Bronchitis, not specified as acute or chronic J22, Unspec. 'ed acute lower resp tract infection J21, Unspecified acute lower resp tract infection J28.8, Other specified ac resp tract infections J69, Acute respiratory distress syndrome

Suspected/Possible/Probable:

Assign ICD-10 codes for each of the presenting signs and symptoms

Respiratory Signs and Symptoms, such as:	Cough Other types of cough Fever Runny nose Sore throat Shortness of breath Hoarseness Wheezing Stridor
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Exposure:

Assign ICD-10 code for the exposure type (suspected or ruled out)

Exposure Type	Exposure to someone who is confirmed to have COVID-19 Exposure about possible exposure, but requires additional other evaluation Z20.81X, Contact with and (suspected) exposure to other viral common-law diseases Z20.81X, Encounter for consultation to suspected exposure to other biological agents ruled out
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Note: DO NOT assign ICD-10 code Z44.2, Coronavirus infection unspecified (ICD-10 code Z44.2 exists but has not been updated to include COVID-19)

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About Audrey Howard

Coding for COVID-19: Latest guidelines

February 26th, 2020 / By Audrey Howard

Since my last blog, the novel coronavirus continues to be a daily top story from all news sources. The World Health Organization (WHO) has declared it to be a public health emergency of international concern. According to the Centers for Disease Control and Prevention (CDC), the virus has been named "SARS-CoV-2" and the disease it causes has been officially named "coronavirus disease 2019" with an abbreviation of "COVID-19."

Because of the declared public health emergency, the WHO created an emergency ICD-10 code to identify this new coronavirus. Code U07.1, 2019-nCoV acute respiratory disease, will be implemented into ICD-10-CM with the update effective October 1, 2020. Since the effective date of the new code is over seven months away, the National Center for Health Statistics (NCHS) developed interim coding advice in a supplement to the ICD-10-CM Official Coding Guidelines effective February 20, 2020. The interim coding advice states to assign the following ICD-10-CM codes for confirmed cases related to COVID-19:

- Pneumonia due to COVID-19: J12.B9 (Other viral pneumonia) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Acute bronchitis due to COVID-19: J20.8 (Acute bronchitis due to other specified organisms) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Bronchitis not otherwise specified (NOS) due to COVID-19: J40 (Bronchitis, not specified as acute or chronic) and B97.29 (Other coronavirus as the cause of diseases classified elsewhere)
- Lower respiratory infection NOS or acute respiratory infection NOS due to COVID-19: J22 (Unspecified acute





Audrey Howard, RHIA, is a Senior Outsourcing Services Consultant with 3M Health

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For possible exposure to COVID-19 that is ruled out after evaluation, assign code Z03.818 (Encounter for observation for suspected exposure to other biological agents ruled out). If a patient was exposed to someone with a confirmed case of COVID-19, assign code Z20.828 (Contact with and (suspected) exposure to other viral communicable diseases).

If a patient presents with signs or symptoms without an established definitive diagnosis, assign codes for each of the presenting signs and symptoms such as:

- Cough (R05)
- Shortness of breath (R06.02)
- Fever, unspecified (R50.9)

Of special note, it typically would not be appropriate to assign code B34.2, Coronavirus infection, unspecified, for COVID-19 since this code is for unspecified sites and COVID-19 cases have usually been respiratory in nature.

Do not assign code B97.29 for cases documented as "possible," "probable" or "suspected." Instead, assign codes for the signs or symptoms present or exposure to the virus.

These guidelines may be updated if new clinical information becomes available. Visit the NCHS website to find information related to the coding of COVID-19.

Audrey Howard, RHIA, is a senior outsourcing services consultant with 3M Health Information Systems.

Sources:

cdc.gov: Coronavirus Disease 2019 (COVID-19)

World Health Organization, Coronavirus disease 2019 (COVID-19) Situation Report – 34. https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200223-sitrep-34-covid-19.pdf?sfvrsn=44f8fd3_2

cdc.gov/nchs: <https://www.cdc.gov/nchs/data/icd/Announcement-New-ICD-code-for-coronavirus-2-20-2020.pdf>; <https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Guidance-Interim-Advice-coronavirus-feb-20-2020.pdf>

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(20 April 2020)

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