

Updated Interim ICD-10-CM Coding Guidance: Recommended Coding for COVID-19 and pregnancy

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The SMFM Coding Committee previously published interim coding guidance for encounters related to the 2019 novel coronavirus disease (COVID-19) for maternal-fetal medicine subspecialists (https://s3.amazonaws.com/cdn.smfm.org/media/2265/SMFM Coding Tip 2 March 2020.pdf).

Since our last publication, in an unprecedent exception, the WHO and CDC have announced approval of a new emergency code for COVID-19 in the US: U07.1 (COVID-19; 2019-nCoV acute respiratory disease) (https://www.cdc.gov/nchs/icd/icd10cm.htm). This code would replace use of code B97.29, which is not exclusive to the 2019-nCoV virus responsible for the COVID-19 pandemic and does not distinguish the more than 30 varieties of coronaviruses. Due to the urgent need to uniquely identify COVID-19, the new emergency U07.1 code was approved. This code will be added to the US ICD-10-CM list effective April 1, 2020 (instead of the usual October cycle).

Starting April 1, U07.1 should be used to report a patient that has tested positive as confirmed by laboratory testing for COVID-19. This code is not be used retrospectively for cases prior to April 1. Until then and for all cases prior to April 1, coding guidance from the earlier SMFM Coding Committee document and CDC should be applied.

Here we summarize proper use of the U07.1 ICD-10-CM code in the MFM setting. As information about COVID-19 is rapidly evolving, coding guidance may change as new clinical information and guidelines become available.

Maternal Exposure/Symptoms/Confirmed Cases

In the setting of pregnancy, codes from ICD-10-CM Chapter 15 (Pregnancy, Childbirth, and Puerperium) should be sequenced first before codes from other ICD-10-CM chapters. COVID-19 infections can cause a range of maternal illness, from no symptoms to severe illness and death. For E/M encounters, the following code combinations are recommended.

U07.1 should be used to report a patient who has confirmed/tested positive for COVID-19. Do not report a code of coronavirus when the diagnosis is not confirmed or stated in the medical record.

Exposure

- Exposure to someone confirmed to have COVID-19: O99.89, Z20.828
- Possible exposure to COVID-19, ruled out after evaluation: Z03.818, Z3A. (0-42 weeks)

Signs and Symptoms without definitive diagnosis

• Use O99.89 + appropriate code for each presenting sign and symptom: R05 Cough, R06.02 Shortness of breath, R50.9 Fever

Confirmed COVID-19 infection

- Confirmed COVID-19 without symptoms: O98.51, U07.1 (*Last character denotes trimester)
- Lower respiratory infection: O98.51, U07.1, O99.51, J22

- Acute bronchitis: O98.51, U07.1, O99.51, J20.8
- Bronchitis not otherwise specified (as acute or chronic): O98.51_, U07.1, O99.51_, J40
- Viral Pneumonia: O98.51_, UO7.1, O99.51_, (*Note: Due to Exclude 1 rule, J12.81 pneumonia code may not be used with U07.1).
- Respiratory failure with hypoxia: O98.51, U07.1, O99.51, J96.01
- ARDS: O98.51, U07.1, O99.51, J80
- Respiratory infection, not otherwise specified (other respiratory disorders): O98.51 , U07.1, O99.51 , J98.8

Fetal Ultrasound

To code for fetal ultrasound procedures in cases of confirmed COVID-19 infection as indicated in accordance with current SMFM recommendations, we recommend utilizing the following coding sequence:

- Detailed mid-trimester anatomy ultrasound: 035.3XX#, O98.51, U07.1
- Third trimester fetal growth ultrasound: O36.59 #, O98.51 , U07.1

Case Examples:

- 1. 13 weeks, singleton, confirmed COVID-19 infection with pneumonia. Seen for inpatient E/M visit. Recommended coding: O98.511, U07.1, 099.511, Z3A.13
- 2. Same patient is seen at 20 weeks for detailed ultrasound. Recommended coding: O35.3XX0, O98.512, U07.1, Z3A.20
- 3. 32 weeks, singleton, confirmed COVID-19 infection with respiratory failure. Seen for inpatient E/M visit. Recommend coding: O98.513, U07.1, O99.513, J96.01, Z3A.32
- 4. Same patient is seen for fetal growth ultrasound at 35 weeks. Recommended coding: O36.5930, O98.513, U07.1, Z3A.35

Select Key:

U07.1 COVID-19

O99.89 Other specified diseases and conditions complicating pregnancy, childbirth, and the puerperium

O99.51 Diseases of the respiratory system complicating pregnancy

O98.51 Other viral disease complicating pregnancy

O35.3 Maternal care for (suspected) damage to fetus from viral disease in mother

O36.59 Maternal care for other known or suspected poor fetal growth

Please submit any questions you may have to the SMFM Coding Committee Ask a Coding Question website (https://www.smfm.org/coding/questions/new). Additional information and resources are also available on our coding website. Thank you very much.