

Coding Tip: DIAGNOSIS CODE SELECTION

Frequently, patient documentation will state, "Patient has a history of _____." However, in ICD-10-CM diagnosis coding for pregnancy, the code selection is completely different if the patient's condition is in the current pregnancy, or if it predated the current pregnancy.

For example, the patient who is has a history of chronic hypertension and who is not pregnant would be reported with **I10**. The patient who is pregnant with a history of chronic hypertension would be reported with **O10.01-**. Similarly, if a non-pregnant patient has a urinary tract infection (UTI), the diagnosis code is **N39.0**. If a pregnant patient has a UTI, the correct diagnosis is **O23.4-**. If the patient does not currently has a UTI but report a history of UTI, the correct diagnosis is **Z87.440**.

The chart below illustrates some of the differences that are based on the patient's current pregnancy status:

Condition	Diagnosis in Current Pregnancy	Diagnosis in Previous Pregnancy	Diagnosis Outside Pregnancy
Asthma	O99.51-	Z87.09	J45.90-
Bariatric surgery	O99.84-	Z98.84	Z98.84
Gestational diabetes	O24.4-	Z86.32	Z86.32
Chronic Hypertension	O10.0-	Z87.59	I10-
Malignant neoplasm (genitourinary)	O9A.11-	Z85.4-	C50-C57
Migraine	O99.35-	Z86.69	G43.9-
Preterm labor	O60.0-	O09.21-	Z87.51
Previous Cesarean delivery	O34.21-	Z98.891	Z98.891
Previous fetal demise	O09.29-	Z87.59	Z87.59
Previous myomectomy	O34.29	Z98.891	Z98.891
Pulmonary embolism	O88.21-	Z86.711	I26.99
STI	O98.31-	Z87.42	Various
Urinary Tract Infection	O23.4-	Z87.440	N39.0
Vulvar abscess	O99.71-	Z87.2	L02.215

Clarity in documentation is essential so that the timing of the condition can be fully understood to facilitate the assignment of the correct code. The choice of diagnosis code(s) can have a significant impact on whether a claim for services will be reimbursed by third party payers.

