



THE OFFICIAL NEWSMAGAZINE OF THE AMERICAN ACADEMY OF PEDIATRICS

AAP News

New ICD-10-CM guidance addresses coding for MIS-C, COVID, influenza

by from the AAP Division of Health Care Finance



International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) guidance continues to be updated. Among the changes that affect pediatrics is new guidance for multisystem inflammatory syndrome in children (MIS-C) due to COVID-19, which is effective now. In addition, new guidance on coding for influenza will take effect on Oct. 1.

Q: What is the ICD-10-CM diagnosis code(s) for a child admitted to the hospital for documented MIS-C due to COVID-19?

A: For MIS-C due to COVID-19, use the following codes:

U07.1 COVID-19 (principal diagnosis)

M35.8 Other specified systemic involvement of connective tissue (secondary diagnosis)

MIS-C is a manifestation of the COVID-19 infection. Per the instructional note under code U07.1, COVID-19 should be sequenced as the principal diagnosis, and additional codes should be assigned for the manifestations. However, if the documentation is not clear regarding whether the physician considers a condition to be an acute manifestation of a current COVID-19 infection vs. a residual effect from a previous COVID-19 infection, ask the provider for clarification.

Q: A child diagnosed with COVID-19 several weeks ago is admitted to the hospital with MIS-C due to COVID-19. The patient no longer has COVID-19. How should this be coded?

A: Use the following codes:

M35.8 Other specified systemic involvement of connective tissue (principal diagnosis) for the MIS-C

B94.8 Sequelae of other specified infectious and parasitic diseases (secondary diagnosis) for the sequelae of a COVID-19 infection.

Q: What is the ICD-10-CM code for running a COVID test for "screening" purposes?



A: The 2021 ICD-10-CM guidelines were updated to state: "During the COVID-19 pandemic, a screening code is generally not appropriate. For encounters for COVID-19 testing, including preoperative testing, code as exposure to COVID-19."

Therefore, use code **Z20.828** Contact with and (suspected) exposure to other viral communicable diseases. Note this is a change from previous guidance.

Update to ICD-10-CM guidelines regarding influenza

Previous version

A parenthetical excluded the reporting of influenza with many acute upper respiratory conditions including strep throat:

Acute upper respiratory infections (J00-J06)

Excludes1: influenza virus with other respiratory manifestations (J09.X2, J10.1, J11.1)

This caused problems for AAP members who needed to report both illnesses to support the medical necessity for various treatments.

Current version effective on Oct. 1

The parenthetical was deleted under the block J00-J06 and placed more appropriately under conditions that are inherent to influenza. Therefore, if the excludes 1 note does not appear under the category or code you are looking to report in addition to the influenza diagnosis, it is allowed.

Excludes1: influenza virus with other respiratory manifestations (J09.X2, J10.1, J11.1) will be located only under the following:

J00 Acute nasopharyngitis [common cold]

J02.9 Acute pharyngitis, unspecified

J03.9 Acute tonsillitis, unspecified

J06 Acute upper respiratory infections of multiple and unspecified sites

In addition, a code also note was added to **J04** Acute laryngitis and tracheitis and **J05** Acute obstructive laryngitis [croup] and epiglottitis.

Code also influenza, if present, such as:

influenza due to identified novel influenza A virus with other respiratory manifestations (J09.X2)

influenza due to other identified influenza virus with other respiratory manifestations (J10.1)

influenza due to unidentified influenza virus with other respiratory manifestations (J11.1)

Lastly, a clarification note was added to assist coders in properly coding seasonal influenza, particularly under category J10. It also was clarified that influenza A is non-novel.



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J10 Influenza due to other identified influenza virus

Includes: influenza A (non-novel), influenza B, influenza C

Vignette

A patient presents with flu-like symptoms. During the exam, the physician observes swollen and red tonsils. The patient's mom believes strep was going around her child's classroom. The physician makes the determination to run both influenza A and B tests and a rapid strep test.

The patient's lab results indicate she is positive for strep and influenza A. The physician now can use diagnose codes to support both the strep and influenza infections. Since coding guidance does not indicate in what order they should be coded, the physician should designate the order.

J02.0 Streptococcal pharyngitis

J10.1 Influenza due to other identified influenza virus with other respiratory manifestations

Be sure to stay up to date on all pediatric-related changes to ICD-10-CM to prevent claim denials and payment delays.

Resources

- [Stay current with the ICD-10-CM changes that take effect on Oct. 1, 2020, with the AAP coding book Pediatric ICD-10-CM 2021, 6th Edition](#)
- [For all updates, visit the National Center for Health Statistics ICD-10-CM site.](#)
- [Submit coding questions to AAP staff through the new AAP Coding Hotline Form.](#)
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