Admissions "Solely for . . ."

During data collection for the 2015–2016 Discharge Abstract Database (DAD) Reabstraction Study and a more recent data mining exercise, it was noted that ICD-10-CA codes such as **Z51.0** *Radiotherapy session* and **Z51.1** *Chemotherapy session for neoplasm* are being assigned inappropriately.

This Tip for Coders provides direction on the correct use of the "admission for . . ." codes. Let's take a closer look at these codes.

Notes in ICD-10-CA

The note at the block **Persons encountering health services for specific procedures and health care (Z40–Z54)** outlines the circumstances under which a code from the block **Z40–Z54** is assigned, as follows:

"Categories (Z40–Z54) are intended for use to indicate a reason for care. They may be used for patients who have already been treated for a disease or injury, but who are receiving follow-up or prophylactic care, convalescent care, or care to consolidate the treatment, to deal with residual states, to ensure that the condition has not recurred, or to prevent recurrence."

Directive statements from the *Canadian Coding Standards for ICD-10-CA and CCI*

The directive statements from the coding standard *Admission for Administration of Chemotherapy, Pharmacotherapy and Radiation Therapy* are clear when an "admission for . . ." code is the most responsible diagnosis (MRDx)/main problem:

- When a patient previously diagnosed with a malignancy has an encounter solely for the administration of radiation therapy, assign **Z51.0** *Radiotherapy session* as the MRDx/main problem.
- When a patient previously diagnosed with a malignancy has an encounter solely for the administration of chemotherapy to treat the malignancy or neoplasm-related conditions, assign **Z51.1** *Chemotherapy session for neoplasm* as the MRDx/main problem.

However, what about other diagnosis types for an "admission for . . ." code?

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Tip for Coders

Direction on diagnosis typing

An “admission for . . .” code is

- The MRDx when a patient previously diagnosed with a condition has an encounter solely for a specific purpose (e.g., admission for administration of chemotherapy, admission for insertion of vascular access device, admission for dialysis).
- A diagnosis type (1) only when a patient previously diagnosed with a condition has an encounter solely for a specific purpose (e.g., admission for administration of chemotherapy, admission for insertion of vascular access device, admission for dialysis) and, during that encounter, another condition (e.g., chemotherapy-induced febrile neutropenia) meets the criteria for MRDx.
- Never a diagnosis type (2).
- Never a diagnosis type (3).

Data quality check

Identify cases when ICD-10-CA codes **Z51.0**, **Z51.1** and **Z51.2** are assigned as a diagnosis type other than the MRDx. Review the assigned codes to determine whether or not there are potential errors.

Can you identify the discrepancies?

1. **C18.9** (M) *Malignant neoplasm colon, unspecified* and **Z51.1** (1) *Chemotherapy session for neoplasm*

2. **D70.0** (M) *Neutropenia*, **D70.0** (2) *Neutropenia*, **Y43.3** (9) *Other antineoplastic drugs, causing adverse effects in therapeutic use* and **Z51.1** (1) *Chemotherapy session for neoplasm*

3. **C34.99** (M) *Malignant neoplasm bronchus or lung, unspecified, unspecified side*, **C79.3** (1) *Secondary malignant neoplasm of brain and cerebral meninges*, **C78.7** (1) *Secondary malignant neoplasm of liver and intrahepatic bile duct* and **Z51.1** (1) *Chemotherapy session for neoplasm*

4. **Z51.5** (M) *Palliative care*, **Z51.1** (1) *Chemotherapy session for neoplasm* and **C85.9** (3) *Non-Hodgkin lymphoma, unspecified*

Tip for Coders

Answers

While it isn't always possible to identify an error in a data set unless you have access to the source document, 1 and 3 potentially have errors. It appears that these patients were diagnosed with a malignant neoplasm and received chemotherapy during the same episode of care. **Z51.1** is assigned when the encounter is solely for the administration of chemotherapy to treat the malignancy and not to identify that chemotherapy was administered during an episode of care. Administration of chemotherapy is captured with a CCI (intervention) code.

For 2, it is possible that this patient was admitted solely for the administration of chemotherapy and that during the episode of care he developed neutropenia (which then met the criteria for the most responsible diagnosis).

For 4, it is possible that this patient was admitted solely for the administration of chemotherapy but was then deemed palliative care.