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May 5, 2020

VIA ELECTRONIC MAIL

The Honorable Thomas J. Engels
Administrator
Health Resources and Services Administration
U.S. Department of Health and Human Services
5600 Fishers Lane
Rockville, Maryland 20857

RE: ICD-10-CM Coding Requirements for the HRSA COVID-19 Uninsured Program

Dear Administrator Engels:

The American Health Information Management Association (AHIMA) respectfully submits the following comments and recommendations regarding proper ICD-10-CM coding and reporting under the Health Resources and Services Administration (HRSA) COVID-19 Uninsured Program.

AHIMA is a global nonprofit association of health information management (HIM) professionals. AHIMA represents professionals who work with health data for more than one billion patient visits each year. AHIMA's mission of empowering people to impact health drives our members and credentialed HIM professionals to ensure that health information is accurate, complete, and available to patients and providers. Our leaders work at the intersection of healthcare, technology, and business, and are found in data integrity and information privacy job functions worldwide.

We urge HRSA to state that providers may use the COVID-19 ICD-10-CM diagnosis codes in both the primary and secondary diagnosis fields on the reimbursement claim. We believe the HRSA [guidance](#) and [frequently asked questions](#) misstate the appropriate reporting of COVID-19 diagnosis codes by stating that reimbursement will be made for testing and services "with a primary COVID-19 diagnosis." There are a number of situations in which it would not be appropriate for the COVID-19 diagnosis code to be reported as the primary diagnosis, according to the ICD-10-CM Official Guidelines for Coding and Reporting:

- For all COVID-19 discharges on or before March 31, 2020, ICD-10-CM code B97.29, Other coronavirus as the cause of diseases classified elsewhere, is assigned for COVID-19, per the [Supplement](#) to the ICD-10-CM Official Guidelines for Coding and Reporting. Code B97.29 is precluded from being reported as the primary (principal) diagnosis by the ICD-10-CM Tabular instructions and the ICD-10-CM Official Guidelines for Coding and Reporting, which are part of the HIPAA code set standard. Therefore, for COVID-19

discharges prior to April 1, the respiratory manifestation (such as pneumonia) would be reported as the primary diagnosis, and code B97.29 would be reported as a secondary diagnosis.

- While a unique ICD-10-CM code for COVID-19 (code U07.1) went into effect for discharges on or after April 1, 2020, and this code is allowed to be reported as the primary diagnosis, there are situations when this code would be a secondary diagnosis code, or a different ICD-10-CM code would be more accurately reported in the primary diagnosis field. For example, for a patient admitted with sepsis due to COVID-19, or for an obstetrics patient with COVID-19, the [Official Coding Guidelines](#) instruct that code U07.1, COVID-19, would be a secondary diagnosis and not the primary diagnosis.
- For testing-related visits—including specimen collection, diagnostic and antibody testing—if the results are negative, inconclusive, or not available at the time of testing, they would not be assigned a primary diagnosis of U07.1, COVID-19 diagnosis code. Instead, any one of the following codes would be the correct diagnosis code, depending on the circumstances:
 - Z01.84, Encounter for antibody response examination
 - Z03.818, Encounter for observation for suspected exposure to other biological agents ruled out
 - Z11.59, Encounter for screening for other viral diseases
 - Z20.828, Contact with and (suspected) exposure to other viral communicable diseases
 - Z86.19, Personal history of other infectious and parasitic diseases

For additional examples on the usage of ICD-10-CM coding for COVID-19, you may wish to refer to the [Frequently Asked Questions](#) jointly developed by AHIMA and the American Hospital Association, the two non-federal members of the Cooperating Parties responsible for the development of the Official Coding Guidelines.

Thank you for your consideration of our comments. If you have any questions, please feel free to contact Sue Bowman, AHIMA's senior director of coding policy and compliance, at (312) 233-1115 or sue.bowman@ahima.org.

Sincerely,



Dr. Wylecia Wiggs Harris, PhD, CAE
Chief Executive Officer