



CODEWRITE

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The Coding and Quality Measures Brief

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This brief identifies the technical specifications of Perinatal Care Measure PC-06 Unexpected Complications in Term Newborns. PC-06 is one of The Joint Commission’s (TJC) National Quality Measures. This brief will analyze the impact of coding on the results for this measure, highlighting relevant coding guidelines and conventions that relate to accurate code results for this measure.

PC-06 is a new measure that was added to five Perinatal Care (PC) performance measures already in existence. Data collection for PC-06 went into effect January 1, 2019. The PC measure set contains two distinct patient populations within the measure set, mothers and newborns. Three of the measures pertain to the mother. Those measures are PC-01 - Elective Delivery, PC-02 - Cesarean Birth, and PC-03 - Antenatal Steroids. The three measures that pertain to newborns are PC-04 - Health Care-Associated Bloodstream Infections in Newborns, PC-05 - Exclusive Breast Milk Feeding, and PC-06 Unexpected Complications in Term Newborns.

The following data elements are used to measure PC-06: admission date, discharge date, discharge disposition, ICD-10-CM codes, ICD-10-PCS codes, birth weight, birthdate, and term newborn. These data elements are defined in the Specifications Manual for Joint Commission National Quality Measures.

The PC-06 measure attempts to quantify the percent of complications in newborns who are not expected to have complications. Newborns who are not expected to have complications are defined in this measure, as those newborns without preexisting conditions (no premature newborns, multiple gestations, birth defects or other fetal conditions) and who are normally grown and were not exposed to maternal drug use.

<p>Key Quality Metric: PC-06 Unexpected Complications in Term Newborns</p> <p>Applies to: Acute Care Inpatient Newborn Admissions The Joint Commission National Quality Measures</p>	
<p>Measure Definition: The percent of infants with unexpected newborn complications among full term newborns with no preexisting conditions</p>	
<p>Some Measure Exclusions</p>	<p>The Coding Opportunities</p>
<ul style="list-style-type: none"> Patients who are not born in the hospital or are part of multiple gestation pregnancies, with no ICD-10-CM Principal Diagnosis Code for single liveborn newborn 	<ul style="list-style-type: none"> The Specifications Manual for Joint Commission National Quality Measures lists the specific principal diagnosis codes that are not excluded. See Appendix A, Table 11.20.1: Single Liveborn Newborn. Follow and apply all ICD-10-CM Official Guidelines for Coding and Reporting in the reporting of codes from ICD-10-CM category Z38 (guideline I.C.16). Do not assign ICD-10-CM code Z38.00 or Z38.01 if the newborn was born outside the hospital or if the newborn was a part of a multiple gestation. Other codes from ICD-10-CM category Z38 exist for those scenarios. Be mindful of the note at the beginning of ICD-10-CM category Z38 which states, “This category is for use as the principal code on the initial record of a newborn baby. It is to be used for the

	initial birth record only. It is not to be used on the mother's record."
<ul style="list-style-type: none"> Maternal drug use exposure in-utero 	<ul style="list-style-type: none"> The Specifications Manual for Joint Commission National Quality Measures lists the specific diagnosis codes for this category. See Appendix A, Table 11.32 Maternal Drug Use. Newborn affected by noxious substances transmitted via placenta or breast milk is reported with code(s) from ICD-10-CM category P04. Coding Clinic articles which should be considered include advice published Fourth Quarter 2018 (pp. 24-25) and Fourth Quarter 2016 (pp. 54-55). Consider also reviewing articles related to ICD-9-CM codes for relevance such as First Quarter 2010 (pp. 14-15) and Third Quarter 1991 (p. 21).
<ul style="list-style-type: none"> Congenital malformations, genetic diseases, and pre-existing conditions 	<ul style="list-style-type: none"> The Specifications Manual for Joint Commission National Quality Measures lists the specific diagnosis codes for these categories. See Appendix A, Table 11.30 Congenital Malformations and Table 11.31 Fetal Conditions. Follow and apply all ICD-10-CM Official Guidelines for Coding and Reporting in the reporting of all clinically significant conditions in newborns (guideline I.C.16.a.6). The perinatal guidelines for significant conditions are the same as the general coding guidelines for "additional diagnoses" except for one additional criterion regarding implications for future health care needs.
<ul style="list-style-type: none"> Birthweight less than 2500 grams 	<ul style="list-style-type: none"> The Specifications Manual for Joint Commission National Quality Measures lists the specific diagnosis codes for these categories. See Appendix A, Tables 11.12, 11.13, 11.14, 11.15, 11.16, and 11.20. Follow and apply all ICD-10-CM Official Guidelines for Coding and Reporting in the reporting prematurity and low birth weight (guidelines I.C.16.d and I.C.16.e)
References and Links	
<p>Specifications Manual for Joint Commission National Quality Measures, Version 2019A https://manual.jointcommission.org/releases/TJC2019A/</p> <p>Specifications Manual for Joint Commission National Quality Measures, Version 2019A, Appendix A – Code Tables https://manual.jointcommission.org/releases/TJC2019A/AppendixATJC.html</p> <p>ICD-10-CM Official Guidelines for Coding and Reporting FY 2019 https://www.cdc.gov/nchs/icd/data/10cmguidelines-FY2019-final.pdf</p>	

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