

ICD-10 Use: Frequently Asked Questions

Q: When I look up a diagnosis or condition in the Alphabetic Index, I notice that some of the codes have a hyphen or dash at the end of them. For example: S90.41- (abrasion, toe). What does the hyphen or dash represent?

A: The hyphen or dash (-) at the end of an Alphabetic Index code indicates that additional characters are required on the code (it is not complete). To find the most specific code with additional characters, the coder would look up the more specific complete Alphabetic Index code in the Tabular Listing.

Q: When I am referred to the Tabular Listing with an Alphabetic Index code ending in a hyphen (-), I find there is a red box with either a 4+, 5+, 6+, or 7+ in front of the ICD-10 code. What does the red box with a number and a plus mean?

A: The APMA Coding Resource Center built-in a guide for coders to assist them in choosing the most specific code to use. The red box is an indicator that additional characters are minimally needed in order to qualify the code as the “ultimate” specific code to bill. When, for example, a coder looks up “abrasion of ankle” in the Alphabetic Index, they will see

Abrami's disease [D59.8](#)
Abramov-Fiedler myocarditis (acute isolated myocarditis) [I40.1](#)
Abrasion [T14.8](#)
 abdomen, abdominal (wall) [S30.811](#)
 alveolar process [S00.512](#)
 ankle [S90.51-](#)
 antecubital space see Abrasion, elbow
 anus [S90.817](#)
 arm (upper) [S40.81-](#)

The hyphen at the end of the code indicates that S90.51 is not the end-all code, and the final diagnosis (or condition) code will need additional characters found in the Tabular Listing

In the Tabular Listing, looking up S90.51, you will find

5+ **S90.5** Other superficial injuries of ankle
 6+ **S90.51** Abrasion of ankle
 7+ **S90.511** Abrasion, right ankle
 7+ **S90.512** Abrasion, left ankle
 7+ **S90.519** Abrasion, unspecified ankle

The **6+** indicates that the 5 character code, S90.51, requires a 6th character. Your only 6 character code options in this case are: S90.511, S90.512, and S90.519. Presuming the patient has a left ankle abrasion, your code selection would be S90.512 - abrasion, left ankle. BUT you will notice that there is a **7+** in front of S90.512 indicating that you can't stop with the 6 character S90.512. You need a 7th character. Coding ICD-10 correctly requires you to code to the greatest specificity. If you decided to stop at 6 characters when the coding demands a 7th character, for example, you will in all likelihood be denied

reimbursement.

Q: I see that there are some codes (specifically injury diagnoses) that require a 7th character (7+ in front of the code in the Tabular Listing), but there are no codes or 7th character examples listed

5+ S90.5 Other superficial injuries of ankle
6+ S90.51 Abrasion of ankle
7+ S90.511 Abrasion, right ankle
7+ S90.512 Abrasion, left ankle
7+ S90.519 Abrasion, unspecified ankle

just the 6 character code. Where do I find the 7th character options?

A: When you see an indicator for a 7th character (7+), you will need to look to the root code in the conditional category. In the example above, the root code would be S90. If you scrolled up to S90, you will see

4+ S90 Superficial injury of ankle, foot and toes

The appropriate 7th character is to be added to each code from category S90
A initial encounter
D subsequent encounter
S sequela

There are the - in this case - three 7th character options: A, D, S. Pick the one that best fits the encounter.

Q: When looking over the 7th character options, I see three: initial encounter (A), subsequent encounter (D), and sequel (S). Do I use (A) when this is a new patient with a problem or when this is either a new patient or established patient with a new problem? When is (S) sequel used?

A: First, don't always assume that there will only be 3 choices: A, D, and S. Some conditions like an ankle fracture include: A, B, C, D, E, F, G, H, J, K, M, N, P, Q, R, S - each of which represents encounter condition information. That is why you must look to the 7th character legend below the conditional root code when determining what 7th character to select.

Initial encounter (A) represents the initial encounter for a new diagnosis, condition, or problem regardless of whether the patient is new or established.

A sequel, according to the official ICD-10 guidelines is "the residual effect (condition produced) after the acute phase of an illness or injury has terminated. There is no time limit on when a sequela code can be used. The residual may be apparent early or it may occur months or years later, such as that due to a previous injury. Coding of sequela generally requires two codes sequenced in the following order: The condition or nature of the sequela is sequenced first. The sequela code is sequenced second.

An exception to the above guidelines are those instances where the code for the sequela is followed by a manifestation code identified in the Tabular List and title, or the sequela code has been expanded (at the fourth, fifth or sixth character levels) to include the manifestation(s). The code for the acute phase of an illness or injury that led to the sequela is never used with a code for the late effect.”