April 7, 2021

VIA ELECTRONIC MAIL

Donna Pickett, MPH, RHIA
ICD-10 Coordination and Maintenance Committee
National Center for Health Statistics
3311 Toledo Road
Hyattsville, Maryland 20782

Dear Ms. Pickett:

The American Health Information Management Association (AHIMA) respectfully submits the following comments on the proposed ICD-10-CM code modifications presented at the September ICD-10 Coordination and Maintenance (C&M) Committee meeting and being considered for October 1, 2021, implementation.

AHIMA is a global nonprofit association of health information (HI) 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 HI 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.

**Post COVID-19 Condition**

AHIMA fully supports implementation of a new code for post COVID-19 condition on October 1, 2021.

We offer the following recommendations for consideration:

- Revise the “Use additional code, if applicable” note under code M35.81, Multisystem inflammatory syndrome, for “sequelae of COVID-19 (B94.8)” to reflect the new code for post COVID-19 condition.

- Add multisystem inflammatory syndrome to the “Code first” note under the new code for post COVID-19 condition.

- Add an Excludes1 note for “active COVID-19 infection (U07.1)” under the new code.

While a note has been proposed that states “This code is not to be used in cases that still are presenting COVID-19,” we believe it would be clearer to specify the proper code assignment for an active COVID-19 infection.
• Add an Excludes1 note for “personal history of COVID-19 (Z86.16)” under the new code.

• Add “sequelae of COVID-19” as an inclusion term under the new code for post COVID-19 condition.

• The proposed Excludes2 note for “post COVID-19 condition” under category B94, Sequelae of other and unspecified infectious and parasitic diseases should be located under code B94.8, Sequelae of other specified infectious and parasitic diseases, rather than at the category level.

**Social Determinants of Health**

AHIMA strongly recommends that the proposed new codes for social determinants of health (SDOH) be implemented on October 1, 2021. It has been two years since an expanded set of SDOH ICD-10-CM codes was first proposed, and implementation of these codes is long overdue. Recognition of the impact of SDOHs on health outcomes and risks, as well as interest in leveraging SDOH data to improve health outcomes and address health inequities, have continued to grow. The COVID-19 pandemic has further highlighted the importance of SDOHs and accelerated the demand for collection of better SDOH data.

A typographical error in the title of proposed new sub-subcategory Z91.19 needs to be corrected. “Nonadherence to medical treatment” appears at the end of the code title, but it should be an inclusion term rather than part of the code title.

We recommend that the existing Excludes1 note for effects of hunger (T73.0), inappropriate diet or eating habits (Z72.4), and malnutrition (E40-E46) under subcategory Z59.4 be changed to an Excludes2 note so that these distinct concepts can be coded in conjunction with codes for lack of adequate food and food insecurity when appropriate.

We also recommend adding a section to the ICD-10-CM Official Guidelines for Coding and Reporting to provide guidance on the use of the new SDOH codes.

Thank you for the opportunity to comment on the proposed ICD-10-CM codes being considered for October 1, 2021, implementation. If you have any questions, please feel free to contact Sue Bowman, 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