October 13, 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 proposed ICD-10-CM code modifications presented at the September ICD-10 Coordination and Maintenance (C&M) Committee meeting and being considered for April 1, 2022 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.

**Underimmunization for COVID-19**

AHIMA supports the creation of new codes for unvaccinated for COVID-19 and partially vaccinated for COVID-19, with a few additional modifications.

We recommend that a third code be created for “underimmunization for COVID-19 status, unspecified” in proposed new sub-subcategory Z28.31, for instances when the medical record documentation is not clear as to whether an individual is unvaccinated or partially vaccinated.

We also recommend that guidance be provided, either in instructional notes or in the *ICD-10-CM Official Guidelines for Coding and Reporting*, to clarify that the proposed new codes should not be used for individuals who are not eligible for the COVID-19 vaccines. As stated during the C&M meeting, the underimmunization status subcategory is intended for use when patients have not received recommended vaccines.

Inclusion terms and instructional notes should be added under the proposed new code Z28.311, Partially vaccinated for COVID-19, to clarify when an individual is considered fully vaccinated. Now that booster shots are becoming available, there may be some confusion as to whether a vaccinated individual who has not received a booster is considered fully or partially vaccinated. The CDC website states that even though booster shots are available to specific groups of people,
everyone is still considered fully vaccinated two weeks after their second dose in a 2-shot series, or two weeks after a single-dose vaccine.

We also recommend adding “Code also” notes for other applicable codes that may be assigned in conjunction with one of the new codes, including personal history of COVID-19 (Z86.26) and immunization not carried out because of contraindication (Z28.0-), religious belief (Z28.1), or patient or caregiver refusal (Z28.21, Z28.82).

We support implementing new codes for underimmunization for COVID-19 status on April 1, 2022.

**Addenda**

Although not previously requested for April 1, 2022 implementation, AHIMA recommends that proposed Addenda changes representing corrections in code numbers or changes in type of instructional note (e.g., Excludes1 note changed to Excludes2 note) become effective with discharges and encounters on and after April 1, 2022. Implementation on April 1 would allow errors and problematic instructional notes to be corrected earlier than next October, thus improving the quality of healthcare data sooner.

Thank you for the opportunity to comment on the proposed ICD-10-CM modifications being considered for implementation on April 1, 2022. 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,

Wylecia Wiggs Harris, PhD, CAE
Chief Executive Officer