

The Future of 2022 ICD-10-CM/PCS has Arrived: Insight into the 2022 ICD-10 Code Sets

September 29, 2021 Webinar FAQ Document

1. **Question** – Is there guidance for choosing acute, subacute, or chronic cough? Are there specific lengths of time for each cough code? Where can we locate this information?

Answer – A cough lasting less than 3 weeks should be coded with *R05.1, Acute cough*. A cough lasting between 3-8 weeks should be coded with *R05.2, Subacute cough*. Finally, a cough lasting greater than 8 weeks should be coded with code *R05.3, Chronic cough*. This information was obtained through a webinar presented by the American Hospital Association and AHA Coding Clinic titled "[FY 2022 Updates Part 1: ICD-10-CM Codes and Official Guidelines for Coding and Reporting](#)".

2. **Question** – What does MCC and CC mean?

Answer – MCC stands for major complications or comorbidities and CC stands for complications or comorbidities. The Centers for Medicare & Medicaid Services (CMS) identifies diagnoses whose presence as a secondary diagnosis leads to substantially increased hospital resource use. They then categorize this list into two different levels of severity as follows: MCCs reflect the highest level of severity, and CCs represent the next level of severity. Some MCCs and CCs are excluded because they are too closely related to the principal diagnoses.

3. **Question** – What is considered “nonsuicidal self-harm” (referencing code Z91.52)?

Answer – Nonsuicidal self-harm is the act of deliberately harming oneself without the intent to commit suicide.

4. **Question** – In reference to the biannual ICD-10 updates, does this mean that code books will need to be purchased twice a year?

Answer – At the CMS ICD-10 Coordination and Maintenance Committee Meeting, this concern was discussed. CMS stated “Some commenters expressed concerns about increased costs related to the production and purchase of additional code books or software; however, we do not believe there is a specific need for publishers to produce new code books. We have stated that our intent is to utilize a phased in approach with limited code updates.” The meeting documents can be found [here](#), with discussion about this particular topic located on page 51.

5. **Question** – Can you provide a link to the official notification about biannual ICD-10 updates?

Answer – This information was obtained through a webinar presented by the American Hospital Association and AHA Coding Clinic called [FY 2022 Updates Part 1: ICD-10-CM Codes and Official Guidelines for Coding and Reporting](#).

This was also discussed at the CMS ICD-10 Coordination and Maintenance Committee meeting. Those documents can be found [here](#), with discussion about this particular topic found on page 51.

6. **Question** – Can a blood alcohol level be coded from a lab report or a nursing note?

Answer – The blood alcohol level cannot be coded from a lab report. It must be documented by a clinician in the medical record. The 2017-Q1 issue of *AHA Coding Clinic for ICD-10* states that diagnoses should be not assigned based on lab results alone without an indication as to the clinical significance of the results. Since a lab report does not have a physician interpretation, it cannot be coded. It could be coded from a nursing note since a nurse is considered a clinician.