COVID-19: New diagnosis code effective April 1, 2020



ARTICLE 03.31.20 DEAN DORTON

Physicians and hospitals should prepare to use recent coding guidance directed from the Centers for Disease Control (CDC) for exposure to the novel 2019 coronavirus.

Effective April 1, 2020, a new ICD-10-CM code U07.1 should be used to report a patient who has tested positive for COVID-19.

The following guidance still applies after the diagnosis code takes effect:

- *For suspected COVID-19, not confirmed or ruled out at the encounter*, report codes for the presenting signs and symptoms. Do not report a code for coronavirus when this diagnosis is not stated in the medical record.
- *For known exposure to COVID-19 (without diagnosis of COVID-19)*, report Z20.828, “Contact with and (suspected) exposure to other viral communicable diseases.”
- *For suspected exposure to COVID-19 that is ruled out after evaluation,* report Z03.818, “Encounter for observation for suspected exposure to other biological agents ruled out.”

CPT Code 87635 was previously created and implemented on March 13, 2020 to help report and track testing services related to COVID-19.

The Centers for Medicare & Medicaid Services (CMS) has also published Medicare Severity Diagnosis Related Group (MS-DRG) information related to COVID-19. Effective April 1, 2020, the diagnosis will be a Major Complication Comorbidity (MCC) and grouping will be dependent on the Major Diagnostic Category (MDC).

For inpatient cases related to COVID-19, potential MS-DRG classifications may include any of the following:

PHRhYmxlIHN0eWxlPSJib3JkZXI6IG5vbmU7d2lkdGg6MTAwLjAlOyI+CiAgPHRib2R5PgogICAgPHRyPgogICAgICA8dGQgc
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