

OVERVIEW: ICD-10-CM CODING FOR SCHOOL-BASED OCCUPATIONAL THERAPISTS AND PHYSICAL THERAPISTS

Introductions and instruction

These instructions are for Occupational Therapists and Physical Therapists, engaged in Minnesota school-based practice, to support compliance with requirements for reporting ICD-10-CM (International Classification of Disorders and Diseases, version 10, Clinical Manifestations) codes when billing Minnesota Healthcare Programs (MHCP) for Individualized Education Program (IEP) health-related services.

Be aware of these important points:

- Schools are required to bill health insurers for health-related, medically necessary services included in a child's IEP. See the Minnesota Department of Human Services (DHS) resources for schools at the [DHS IEP Services webpage](#). Note that the Provider Manual includes the criteria and instructions for each service.
- Review the requirements for all health providers in identifying ICD-10-CM codes for children receiving IEP health-related services in order to bill for health-related services. Minnesota Department of Human Services (DHS) and Education (MDE) joint guidance and resources are located at [DHS IEP Services webpage](#).
- **Professional Scope and Standards of Practice:** Occupational Therapists and Physical Therapists adhere to professional standards of practice set forth by [AOTA](#) and [APTA](#), and in accordance with state licensure statutes governing their professional scope of practice.

[Occupational Therapy: Scope of Practice \(M.S. 148.6404\)](#)

[Occupational Therapy Standards of Practice](#)

[Physical Therapy: Definitions \(M.S. 148.65\) and Scope of Practice](#)

[Physical Therapy Standards of Practice](#)

Authority and responsibility for assessment of children and youth, identifying health conditions and development of intervention or treatment plans to remove or reduce the problem or to mitigate the impact of the problem in an individual's life, must:

- align with the scope and standards of practice established for the OT and PT professions, and
- comply with special education Due Process procedures set forth by MDE.

Professional Definitions: 2015 Minnesota Statutes

Occupational therapy (M.S.148.6402, Subd.15) means the use of purposeful activity to maximize the independence and the maintenance of health of an individual who is limited by a physical injury or illness, a cognitive impairment, a psychosocial dysfunction, a mental illness, a developmental or learning disability, or an adverse environmental condition. The practice encompasses evaluation, assessment, treatment, and consultation. Occupational therapy services may be provided individually, in groups, or through social systems.

Physical therapy (M.S.148.65, Sub.1) means the evaluation or treatment or both of any person by the employment of physical measures and the use of therapeutic exercises and rehabilitative procedures, with or without assistive devices, for the purpose of preventing, correcting, or alleviating a physical or mental disability. Physical measures shall include but shall not be limited to heat or cold, air, light, water, electricity and sound. Physical therapy includes evaluation other than medical diagnosis, treatment planning, treatment, documentation, performance of appropriate tests and measurement, interpretation of orders or referrals, instruction, consultative services, and supervision of supportive personnel.

- ICD-10-CM codes for an extensive array of health conditions addressed by Occupational Therapists and Physical Therapists serving pediatric populations, are published by AOTA and APTA, and can be accessed through these links:
 - Occupational Therapy pediatric codes (adapted from the AOTA ICD-10 to ICD-9 Crosswalk for Pediatric Codes member document) can be accessed through this [link](#).
 - [Physical Therapy pediatric codes](#)
- Commonly used ICD-10-CM codes compiled from Occupational Therapists and Physical Therapists working in Minnesota schools is provided as a separate document accessed through this [link](#).

Source and Definitions of ICD-10-CM Codes

- The federal Centers for Medicaid and Medicare Services (CMS) is the source for billable codes for IEP Health-related Services. A use-friendly website for searching codes found at this link: <http://www.icd10data.com/>.

- ICD-10 codes consist of a single letter followed by 3 or more digits, with a decimal point between the second and third (e.g. K35.1, "Acute Appendicitis with peritoneal abscess"). The diagnoses are presented in code order (i.e. rather than by the diagnosis name).

The list of ICD-10 chapters in the table below, (and the subsequent range of code subsets offered) should help you locate the particular diagnosis code for which you are searching, or the code associated with the signs, symptoms or conditions to which your service/intervention is aligned if a medical diagnosis is not available.

Codes associated with the more frequent types of medical diagnoses, or the types of symptoms/signs/conditions often seen in school aged children, (who require services from a school OT and/or PT) are noted below with yellow highlight. [Codes Source](http://www.icd10data.com) (<http://www.icd10data.com>)

| Chapter: | Description: |
|-----------------|--|
| A and B | Certain infectious and parasitic diseases. |
| C00 to D48 | Neoplasms. |
| D50 to D89 | Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism. |
| E | Endocrine, nutritional and metabolic diseases. |
| F | Mental, behavioral and neurodevelopmental disorders. |
| F | Mental and behavioral disorders. |
| G | Diseases of the nervous system. |
| H00 to H59 | Diseases of the eye and adnexa. |
| H60 to H95 | Diseases of the ear and mastoid process. |
| I | Diseases of the circulatory system. |
| J | Diseases of the respiratory system. |
| K | Diseases of the digestive system. |
| L | Diseases of the skin and subcutaneous tissue. |
| M | Diseases of the musculoskeletal system and connective tissue. |
| N | Diseases of the genitourinary system. |
| O | Pregnancy, childbirth and the puerperium. |
| P | Certain conditions originating in the perinatal period. |
| Q | Congenital malformations, deformations and chromosomal abnormalities. |
| R | Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified. |
| S and T | Injury, poisoning and certain other consequences of external causes. |
| U | This letter is currently left vacant. |
| V, W, X and Y | External causes of morbidity and mortality. |
| Z | Factors influencing health status and contact with health services. |

The five chapters/descriptions highlighted above, and the associated code sets for those chapters, is illustrated below. The following code ranges that are again highlighted, represent the more frequently occurring categories of medical diagnoses, or the types of symptoms/signs/conditions often seen in school aged children:

Mental, behavioral and neurodevelopmental disorders by types of conditions:

| | |
|---------|---|
| F00-F09 | Organic, including symptomatic, mental disorders. |
| F10-F19 | Mental and behavioral disorders due to psychoactive substance abuse. |
| F20-F29 | Schizophrenia, schizotypal and delusional disorders. |
| F30-F39 | Mood (affective) disorders. |
| F40-F48 | Neurotic, stress-related and somatoform disorders. |
| F50-F59 | Behavioral syndromes associated with physiological disturbances and physical factors |
| F60-F69 | Disorders of adult personality and behavior |
| F70-F79 | Mental retardation |
| F80-F89 | Disorders of psychological development |
| F90-F98 | Behavioral emotional disorders with onset usually occurring in childhood or adolescence |

Diseases of the nervous system by types of conditions:

| | |
|---------|---|
| G00-G09 | Inflammatory diseases of the central nervous system |
| G10-G14 | Systemic atrophies primarily affecting the central nervous system |
| G20-G26 | Extrapyramidal and movement disorders |
| G30-G32 | Other degenerative diseases of the nervous system |
| G35-G37 | Demyelinating diseases of the central nervous system |
| G40-G47 | Episodic and paroxysmal disorders |
| G50-G59 | Nerve, nerve root and plexus disorders |
| G60-G65 | Polyneuropathies and other disorders of the peripheral nervous system |
| G70-G73 | Diseases of myoneural junction and muscle |
| G80-G83 | Cerebral palsy and other paralytic syndromes |
| G89-G99 | Other disorders of the nervous system |

Diseases of the musculoskeletal system and connective tissue:

| | |
|---------|---|
| M00-M02 | Infectious arthropathies |
| M05-M14 | Inflammatory polyarthropathies |
| M15-M19 | Osteoarthritis |
| M20-M25 | Other joint disorders |
| M26-M27 | Dentofacial anomalies [including malocclusion] and other disorders of jaw |
| M30-M36 | Systemic connective tissue disorders |
| M40-M43 | Deforming dorsopathies |
| M45-M49 | Spondylopathies |
| M50-M54 | Other dorsopathies |
| M60-M63 | Disorders of muscles |
| M65-M67 | Disorders of synovium and tendon |
| M70-M79 | Other soft tissue disorders |

| | |
|---------|---|
| M80-M85 | Disorders of bone density and structure |
| M86-M90 | Other osteopathies |
| M91-M94 | Chondropathies |
| M95-M95 | Other disorders of the musculoskeletal system and connective tissue |
| M96-M96 | Intraoperative and postprocedural complications and disorders of musculoskeletal system, not elsewhere classified |
| M99-M99 | Biomechanical lesions, not elsewhere classified |

Congenital malformations, deformations and chromosomal abnormalities:

| | |
|----------------|--|
| Q00-Q07 | Congenital malformations of the nervous system |
| Q10-Q18 | Congenital malformations of eye, ear, face and neck |
| Q20-Q28 | Congenital malformations of the circulatory system |
| Q30-Q34 | Congenital malformations of the respiratory system |
| Q35-Q37 | Cleft lip and cleft palate |
| Q38-Q45 | Other congenital malformations of the digestive system |
| Q50-Q56 | Congenital malformations of genital organs |
| Q60-Q64 | Congenital malformations of the urinary system |
| Q65-Q79 | Congenital malformations and deformations of the musculoskeletal system |
| Q80-Q89 | Other congenital malformations |
| Q90-Q99 | Chromosomal abnormalities, not elsewhere classified |

Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified:

| | |
|----------------|--|
| R00-R09 | Symptoms and signs involving the circulatory and respiratory systems |
| R10-R19 | Symptoms and signs involving the digestive system and abdomen |
| R20-R23 | Symptoms and signs involving the skin and subcutaneous tissue |
| R25-R29 | Symptoms and signs involving the nervous and musculoskeletal systems |
| R30-R39 | Symptoms and signs involving the genitourinary system |
| R40-R46 | Symptoms and signs involving cognition, perception, emotional state and behavior |
| R47-R49 | Symptoms and signs involving speech and voice |
| R50-R69 | General symptoms and signs |
| R70-R79 | Abnormal findings on examination of blood, without diagnosis |
| R80-R82 | Abnormal findings on examination of urine, without diagnosis |
| R83-R89 | Abnormal findings on examination of other body fluids, substances and tissues, without diagnosis |
| R90-R94 | Abnormal findings on diagnostic imaging and in function studies, without diagnosis |
| R97-R97 | Abnormal tumor markers |
| R99-R99 | Ill-defined and unknown cause of mortality |

Within each chapter code range, further classification detail is represented numerically following the decimal point. For example, the code for a student with a diagnosis of athetoid cerebral palsy can be found in the G chapter, within the G80-83 code set, and further classified as G80.3.

As noted previously, commonly used ICD-10-CM codes compiled from Occupational Therapists and Physical Therapists working in Minnesota schools is provided as a separate document accessed through this [link](#).

Reporting ICD-10-CM Codes

- When a child has been **diagnosed** with a **disease or disorder** from a primary care provider, report that diagnosis code as the **Primary diagnosis** for all claims for the child.
- When providing health-related services for a **sign, symptom, or condition** resulting from the disease or disorder, report that code as **Secondary, Tertiary** and so on.
- When **no** medical disease or disorder has been identified, report the **sign, symptom or condition code** that identifies the IEP health-related service that is being provided as the **Primary diagnosis code**.
- For clarification regarding the impact of ICD-10-CM code assignment relative to an occupational therapist's scope of practice and licensure status, please refer to the January 19, 2016 MDH response to Ruth Ellen Luehr at this [link](#).

Watch for ICD-10-CM Code Notations

Whether using an online resource or purchase an ICD-10-CM guide, read and understand the guidelines and exceptions for selecting ICD-10-CM codes.

- Select codes that are valid and billable
- Watch for code notations and rules

The ICD-10-CM code must:

- Clearly represent the child's medical need as identified in the child's IEP / IFSP
- Logically relate to the IEP provider/service
- Watch for codes that are specific to the child's needs
- Relate to the activities / tasks provided
- Select medically necessary codes, not education codes

Special Education Disability Categories

To qualify for Special Education a child must be eligible for services in one of the following Educational Disability categories:

- Speech/Language Impaired
- Developmental Cognitive disability – mild to moderate
- Developmental Cognitive disability – severe to profound

- Physically Impaired
- Visually Impaired
- Specific Learning disability
- Emotional/Behavioral Disorders (EDB)
- Deaf-Blind
- Other Health Disabilities
- Autism Spectrum Disorder
- Developmental Delay
- Traumatic Brain Injury Disabled
- Severely Multiply Impaired

School Sources for Medical Diagnoses

- A medical diagnoses is a criteria for eligibility for these Special Education Disability Categories: Other Health Disabilities, Physical Impairments and Traumatic Brain Injury
- Speech/language pathologists and audiologists determine the diagnoses for Speech/Language Impairments
- Mental Health Professionals provide DSM 5/ICD-10-CM diagnoses when CTSS is included in the child's IEP needs and plan.
- Annually, medical orders are required for students needing medication or certain treatments provided by the school nurse, so this is an opportunity to get ICD-10-CM code for the medical condition being treated.

Special Education Needs Align with ICD-10-CM

- **IEP Evaluation Report:**
 - Summarizes health/medical status and associated needs
 - States health-related services are required during school day
- **IEP Document:**
 - PLEP areas - describes how health/medical problems, or signs/symptoms/condition impact the child in school.
 - Service Description (in Adaptations or other narrative text section) and Service Type/Frequency/Duration Details: describes what services/interventions are necessary and why, and provides details of when, by whom, how often the service will occur. This information will comprise a service Plan of Care/Treatment Plan.

Documenting ICD-10-CM Codes

- ICD-10-CM codes are not recorded on the child's on the **IEP document**. ICD-10-CM codes may be recorded in the child's special education file.
- Follow your school district procedures to document ICD-10-CM codes for billing purposes (some schools will have electronic documentation procedures).

Online Resources for ICD-10-CM Reporting and Coding

Visit the following websites for additional guidance:

[Center for Medicare & Medicaid Services \(CMS\) – ICD-10](#): Provides history, requirements, and coding sources

[Centers for Disease Control and Prevention \(CDC\) – ICD-10](#): Provides history, requirements, and coding sources

Example of a commercial website that can be used to find appropriate ICD-10-CM codes: [ICD10Data.com](#)

Coding Rules Tab [link](#)

[MHCP Enrolled Providers – ICD-10](#), Minnesota DHS webpage: Provides periodic updates about ICD-10-CM Implementation

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ICD-10-CM Reporting for Schools - Training Resources, sources of support and other pertinent Information

Source: MDE Third Party Reimbursement SharePoint website

- DHS and MDE are assisting IEP health-related services personnel in complying with the requirement to identify ICD-10-CM codes for third party billing through the Guidance and training videos posted on the DHS IEP Services website at [IEP Videos, Tutorials and Guidance Documents](#).

- The power points are available on the MDE TPR SharePoint under *DOCUMENTS, ICD-10-CM Resources, ICD-10-CM Training for Schools – Information*. To access this site, first request set up and account at this [link](#).
- IEP health-related service professionals are invited to share commonly used codes by posting them on the MDE TPR SharePoint under *DOCUMENTS, ICD-10-CM Resources*. A folder has been set up for each IEP health-related service discipline. The purpose for sharing codes is to compare codes to form a wider circle of consensus on the commonly used codes by discipline, to short-cut the work of colleagues and to take credit for your work. Your work will not be judged. All work is appreciated – short or long. In this first year of use of the codes, we are all learners.
- Use of commonly used codes does not negate the responsibility of the professional to assign the most appropriate code for an individual child or youth. Therefore, codes in lists should be hyperlinked to their codes at <http://www.ICD10data.com> so the information can be verified. Just the code and name of the code are not sufficient to determine if the code is correct. Once the professional is familiar with the definition and clinical information for a code, he/she may be able to readily assign the code without double-checking.

Common Questions & Answers:

ICD-10-CM codes for School-Based Occupational Therapists and School Physical Therapists

The following will provide helpful, general information to Occupational Therapists and Physical Therapists working in school settings. The answers provided are based on authority of the Minnesota Department of Human Services (DHS) and Minnesota Department of Education (MDE) joint guidance and resources that are located at the [DHS IEP Services webpage](#).

Use this [link](#) to access a separate Q&A document.

As is customary, if you have legal questions, consult your school district attorney.

Question 1: What is ICD-10?

Answer: ICD-10 is the 10th revision of the International Statistical Classification of Diseases and Related Health Problems (ICD), a medical classification list by the World Health Organization (WHO). It contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases. The ICD-10-CM is the version used in the United States.

Question 2: What are the ICD-10-CM codes sets?

Answer: Code sets include:

- Signs and symptoms
- Abnormal findings
- Complaints
- Social circumstances
- External causes of injury or diseases
- Medical diagnoses

Question 3: What does this mean for school OTs & PTs?

Answer: School OTs & PTs must identify an ICD-10-CM code for each billable IEP health-related service that they provide (e.g. face to face activities, evaluation).

Question 4: Are school districts required to seek reimbursement and bill health insurers for health-related services?

Answer: Yes, school districts are required to bill health-related, medically necessary services included in a child's IEP/IFSP according to federal and state law. The ICD-10-CM codes are required of all health care providers in any setting when billing Minnesota Health Care Programs (MHCP) which includes Medical Assistance (MA) and MinnesotaCare.

Question 5: For school OT & PT services, who determines the ICD-10-CM codes?

Answer: School OTs & PTs may determine the ICD-10-CM code for an IEP health-related service provided by themselves, and their assistants, COTAs and PTAs. If an OT and/or PT is functioning (within their professional scope of practice) as the "qualified professional" responsible for supervising paraprofessionals providing Personal Care Assistance (PCA services), the code used for billing the PCA service may be the same one used by the OT and/or PT. Similarly, a billing code used by the school OT and/or PT, may be applicable for claims involving Special Transportation Services and Assistive Technology Devices.

Question 6: What are the regulations regarding the supervision of therapy assistants, and how does this affect ICD-10-CM coding practice for third party billing?

Answer: Professional supervision requirements for an Occupational Therapy assistant or a Physical Therapist assistant are defined by Minnesota practice statutes for each therapy profession as follows:

Occupational Therapy - M.S.148.642, Subd. 2 & 3

Physical Therapy - M.S.148.706, Subd. 1, 2, & 3. Supervision of a physical therapy aide is more restrictive and is defined in M.S.148.706, Subd. 4.

These statutes set the minimal legal requirements for supervision of therapy assistants (and physical therapy aides). These statutes must be followed in order for therapists to maintain their professional practice license.

Answer: Health-related services provided to a student in a face-to-face manner by an Occupational Therapy assistant or a Physical Therapist assistant, may be billed using an ICD-10-CM code assigned by the supervising therapist. When the

supervising therapist is present during the treatment/intervention session, and interacts in a face-to-face fashion with the therapy assistant and student (i.e. observes/instructs/directs the treatment procedures used by the assistant), the service time of both the supervising therapist and therapy assistant may be considered billable, and each provider may use the same ICD-10-CM code for their service encounter.

Other activities involving supervision of the therapy assistant, that occur without the presence of the student, are not considered covered/billable, and would therefore not require ICD-10-CM coding.

Services provided by a physical therapy aide are not defined by Minnesota Health Care Programs (MHCP) as covered/billable and would therefore not require ICD-10-CM coding.

Question 7: When does ICD-10 become effective and do I need to use all the codes in ICD-10?

Answer: The compliance date for ICD-10 was **October 1, 2015**. As of the compliance date, CMS and other payers will only accept claims billed with ICD-10 codes.

Answer: No, health care providers will only use a **subset of codes based on their specialty** for coding. School providers use only codes relevant to children and non-emergency situations.

Question 8: What is the difference between ICD-10-CM and ICD-10-PCS?

Answer: The ICD-10-CM code set is designed to be used by health care providers for health conditions or problems coding. The ICD-10-PCS code set is only used for hospital reporting of inpatient services

Question 9: Are codes with unspecified in the description be allowed?

Answer: Yes, a codes with *unspecified* in the description should be used when it are most accurately reflects what is known about the student's condition.

Question 10: How can I obtain a list of ICD-10-CM codes?

Answer: A list of ICD-10-CM codes is available free of charge on the CMS ICD-10 website. A more user friendly site is www.ICD10data.com, a commercial site that contains advertisements.

6/1/2016: By Metro ECSU agreement with MDE to develop resources to support OT/PT professionals in identifying ICD-10- CM codes to be used in billing MHCP for IEP health-related services.