

## ICD-9-CM to ICD-10-CM Code Translation and the Use of Combination Codes in the IRF PPS

Both ICD-9-CM and ICD-10-CM contain diagnosis codes called combination codes, meaning that one code contains two or more diagnoses. One diagnosis in the combination code is typically a chronic disease such as diabetes and the other diagnosis is an associated manifestation or complication of the disease, for example diabetic nephropathy.

ICD-9-CM has combination codes with diagnosis terminology that was revised or deleted from ICD-10-CM, with the result that the same condition coded with one ICD-9-CM code requires more than one ICD-10-CM code to record a comparable level of detail.

The following ICD-10-CM code lists contain combination codes:

ICD-10-CM Codes That Meet Presumptive Compliance Criteria  
Impairment Group Codes That Meet Presumptive Compliance Criteria  
Tier Comorbidities

For these lists, where combination codes are listed, one code from each choice (e.g., A, B) in a combination is required for an equivalent, correctly coded translation. For example, in order to correctly code the equivalent of ICD-9-CM code 800.10, “Closed fracture of vault of skull with cerebral laceration and contusion, unspecified state of consciousness” in ICD-10-CM, two codes must be entered on the inpatient rehabilitation facility patient assessment instrument (IRF-PAI). Code S02.0XXA, “Fracture of vault of skull, initial encounter for closed fracture” (choice A), and code S06.330A, “Contusion and laceration of cerebrum, unspecified, without loss of consciousness, initial encounter” (choice B), must both be listed on the IRF-PAI to accurately reflect the same condition. Another example is the combination code for ICD-9-CM code 250.53, “Diabetes with ophthalmic manifestations, type I [juvenile type], uncontrolled.” Correctly coding the equivalent of this diagnosis in ICD-10-CM requires the following combination of ICD-10-CM codes to be entered on the IRF-PAI:

### **One of choice A—**

E10.311—Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema

E10.319—Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema

E10.36—Type 1 diabetes mellitus with diabetic cataract

E10.39—Type 1 diabetes mellitus with other diabetic ophthalmic complication

### **With choice B –**

E10.65—Type 1 diabetes mellitus with hyperglycemia

Most of the combination codes will require one selection from choice “A” and one selection from choice “B.” However, there is an ICD-10-CM combination code that may require more than 2 codes on the IRF-PAI. ICD-9-CM code 819.0, “Multiple closed fractures involving both upper limbs, and upper limb with rib(s) and sternum,” translates to the following ICD-10-CM combination codes:

If no rib and sternum fractures—

### **One of choice A—**

S42.91XA—Fracture of right shoulder girdle, part unspecified, initial encounter for closed fracture

S52.91XA—Unspecified fracture of right forearm, initial encounter for closed fracture

### **With one of choice B –**

S42.92XA—Fracture of left shoulder girdle, part unspecified, initial encounter for closed fracture

S52.92XA—Unspecified fracture of left forearm, initial encounter for closed fracture

If the patient's condition includes multiple closed fractures involving both upper limbs with rib(s) and sternum fractures--

**One of choice A—**

S42.90XA—Fracture of unspecified shoulder girdle, part unspecified, initial encounter for closed fracture

S52.90XA—Unspecified fracture of unspecified forearm, initial encounter for closed fracture

**With choice B —**

S22.20XA—Unspecified fracture of sternum, initial encounter for closed fracture

**With choice C —**

S22.49XA—Multiple fractures of ribs, unspecified side, initial encounter for closed fractures