



CODEWRITE

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Jargon for Coding Professionals: Precoordination and Postcoordination

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The International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) contains many more codes than International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM). This is not news to anyone who experienced the transition from ICD-9-CM to ICD-10-CM and ICD-10-PCS. This allowed for increased specificity and detail. Concepts that required two or more codes in ICD-9-CM were combined into single codes in ICD-10-CM. This resulted in an explosion of unique codes for specific details.

For example, the ICD-10-CM codes for diabetes include the type of diabetes, the body system affected, and the complications or manifestations affecting the body system. If a patient was treated for Type 2 diabetes with diabetic nephropathy, then one code would be reported in ICD-10-CM. ICD-10-CM code E11.21, Type 2 diabetes mellitus with diabetic nephropathy, contains information on the type of diabetes, the body system affected, and the manifestation. Two codes would have been reported for this same condition in ICD-9-CM: 250.40 and 583.81. ICD-9-CM code 250.40, Diabetes mellitus with renal manifestations, type II or unspecified type, not stated as uncontrolled, would capture the etiology, type of diabetes, and body system affected. ICD-9-CM code 583.81, Nephritis and nephropathy, not specified as acute or chronic, in diseases classified elsewhere, would capture the manifestation.

The ICD-10-CM code in the above paragraph represents an example of precoordination. Precoordination means that the code contains all relevant information about the clinical concept in a pre-combined manner.

Coding professionals who work with Current Procedural Terminology (CPT®) and Healthcare Common Procedure Coding System (HCPCS) Level II codes are familiar with the use of modifiers. These modifiers are two alphanumeric characters in length and can be added to the CPT or HCPCS Level II code to provide additional information. If a physician provides diagnostic services only for a radiology examination, then the CPT code for the radiology examination would be reported with modifier 26 added to that CPT code to report that only the professional component was performed by the physician. Modifiers such as LT, RT, and 50 can be added to certain CPT and HCPCS Level II codes to specify that the procedure was performed on the left side, right side, or bilaterally. Many other CPT and HCPCS Level II modifiers exist.

When adding modifiers to CPT and HCPCS codes, the coding professional assembles the complete code, including modifiers, while performing the coding process. In a way, this can be thought of as postcoordination. Postcoordination means that multiple codes are linked together to fully describe a concept.

For those who work in informatics, precoordination and postcoordination are familiar terms. Clinical terminologies, such as SNOMED CT®, have mechanisms for expressing clinical phrases that use precoordination and postcoordination. Clinical information can be recorded using identifiers. Precoordinated expressions in SNOMED CT are predefined concepts. Each unique concept identifier in SNOMED CT has a formal logic definition that illustrates how the concept is related to other concepts in SNOMED CT. Postcoordinated expressions in SNOMED CT are expressions that contain two or more concept identifiers.

Why Does This Matter?

In May 2019, Member States of the World Health Assembly adopted ICD-11 with an effective date of January 1, 2022. In other words, countries will be able to use or transition to ICD-11 after this date. The implementation date of ICD-11 in the United States is not known at this time.

Precoordination and postcoordination are prominent features of ICD-11, so coding professionals will hear these terms often in the coming years. In ICD-11, precoordination means that the codes found in the tabular list contain all information about the diagnosis or other concept in a pre-combined fashion. Also, ICD-11 has a mechanism for linking multiple codes together to fully describe a diagnosis or other clinical concept. In ICD-11, this is known as postcoordination. Postcoordination will allow for increased specificity and detail without the need to create unique codes for each level of specificity and detail.

It should be emphasized that ICD-11 is not currently in use. The current released version of ICD-11 for Mortality and Morbidity Statistics (ICD-11 MMS) was made available by the World Health Organization (WHO) for Member States to use in preparing implementation. Countries that plan to make national modifications to the ICD-11 must make the necessary arrangements with WHO. If modifications to the ICD-11 are requested and approved, it remains to be seen

if this will impact the process of postcoordination. Even so, it is likely that coding professionals will hear a lot about precoordination and postcoordination in the coming years.

REFERENCES

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