Immunodeficiency and Immune Disorders

A PREMERA DOCUMENTATION AND CODING SERIES FOR PROVIDERS

Overview

Patients who are immunocompromised pose increased risks and challenges when treating, highlighting the importance of accurately identifying patients with this status. Immunocompromised states can be caused by underlying conditions or through intentional suppression via medication therapy. Patients that are afflicted with chronic conditions such as AIDS and cancer are often in an immunocompromised state. Additionally, patients can be immunocompromised resulting from immunosuppressant drug therapy used to suppress the immune system to keep certain disease processes under control, such as lupus, Crohn's disease, rheumatoid arthritis, and rejection treatment for organ transplant status. Disorders involving the immune mechanism and immunodeficiency are frequently miscoded when the cause of the immunocompromised state is medication therapy or an underlying chronic condition.

Accurate Code Assignment

Effective October 1, 2020 new codes were created to report the specific causes for a patient's immunocompromised state[i].

ICD-10 Code	ICD-10 Description	Assign when immunodeficiency is due to:
D84.821	Immunodeficiency due to drugs	Medications that interfere with the immune system. These medications include immunosuppressants, corticosteroids, and chemotherapy.
D84.822	Immunodeficiency due to external causes	Caused by external factors such as exposure to radiation therapy or due to transplant status.
D84.81	Immunodeficiency due to conditions classified elsewhere	Due to a specific medical condition such as HIV, AIDS, cancers, and genetic disorders
D84.89	Other immunodeficiencies	Due to any other cause that does not fit within the other immunodeficiency cause codes

To accurately assign the ICD-10 code *D89.9, disorder involving the immune mechanism unspecified*, or *D84.9, immunodeficiency unspecified*, the patient's immunocompromised state should <u>not</u> be attributed to a chronic condition or a prescribed medication therapy.

Example 1: Patient is being admitted for cellulitis of three fingers on her right hand. Once admitted, intravenous antibiotics will be started due to the patient having an immunocompromised state caused by immunosuppressant medication that she takes for systemic lupus erythematosus.

ICD-10 Code	ICD-10 Description
L03.011	Cellulitis of right finger
M32.9	Systemic lupus erythematosus, unspecified
D84.821	Immunodeficiency due to drugs
Z79.899	Other long-term (current) drug therapy

> Even though ICD-10-CM does not provide a specific code for immunosuppressants, Z79.899 is used to identify the immunosuppressant therapy.

Example 2: Patient with multiple myeloma is being seen for an ear infection in the left ear. They are currently being treated with chemotherapy which has caused the patient to be immunosuppressed.

ICD-10 Code	ICD-10 Description
H66.92	Otitis media, unspecified, left ear
C90.00	Multiple myeloma not having achieved remission
D84.821	Immunodeficiency due to drugs
T45.1X5A	Adverse effect of antineoplastic and immunosuppressive drugs, initial encounter
Z79.899	Other long term (current) drug therapy

> When immune suppression is not part of the intended effect of the drugs (i.e.; antineoplastic), it is appropriate to code that as an adverse effect.

Example 3: Patient is here for follow-up. He is immunocompromised and after testing, we are unable to determine the cause of his immunocompromised state.

ICD-10 Code	ICD-10 Description
D89.9	Disorder involving the immune mechanism, unspecified

Impact of Coding Errors

Inaccurate coding of immune disorders not only impacts clinical continuity of care, but also impacts the accuracy of the risk of your patient panel. Disorder of the immune mechanism falls into both commercial and Medicare risk adjustment models (HHS-HCC 74 and CMS-HCC 47, respectively). By documenting and coding the correct immune scenario, you can ensure that an accurate risk score is calculated, and the precise patient health history is on record for continuity of care.

For more information about documentation and coding of immune mechanism disorders and any other chronic or complex condition, email your provider clinical consultant at ProviderClinicalConsulting@premera.com.

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[i] Coding Clinic 2020 Q4 V7 N4