

Understanding the Health Language SNOMED CT® to ICD-10 Maps

THE PROBLEM: SNOMED CT® / ICD-10-CM MAPS

As specified by Meaningful Use Stage 2, the 2014 edition of EHR certification will require problem list entries to have SNOMED CT encoding. Since October 1, 2014, diagnoses must be encoded in ICD-10-CM for billing. After that time personnel and systems will need to convert problem list entries (in SNOMED CT) to billing diagnoses (in ICD-10-CM). Sophisticated SNOMED CT / ICD-10-CM mapping is required to allow this task to be done efficiently and accurately.

THE NLM MAPS

To meet this need, the NLM (National Library of Medicine) has released maps from over 35,000 SNOMED CT concepts to ICD-10-CM concepts (for details, see www.nlm.nih.gov/research/umls/mapping_projects/snomedct_to_icd10cm.html).

These are rules-based maps that allow algorithmic derivation of an ICD-10-CM target from a given SNOMED CT source concept.

However, in many cases SNOMED CT source concepts do not provide the details needed to determine a billable ICD-10-CM target. Some of these details include laterality

(right or left), encounter type (initial or subsequent), and trimester. In these cases, the NLM provides a truncated ICD-10-CM code including a question mark character, with no billable targets explicitly identified.

THE HEALTH LANGUAGE SNOMED CT TO ICD-10 MAPS: PROVIDING BILLABLE TARGETS

Health Language has built a set of custom maps that provide a set of appropriate billable targets to choose from for the given SNOMED CT source concept. Rather than simply supplying a general range of targets (as the NLM does by using the question mark character), the Health Language maps present a set of specific ICD-10-CM concepts matching the SNOMED CT source concept. In combination with Health Language coding attribute content, the Health Language maps make it quick and easy for a provider to select the most appropriate ICD-10-CM code for billing.

The Health Language maps also benefit from built-in logic that ensures that relevant information in the SNOMED CT source concept (for instance, whether a fracture is closed or open) is taken into account in the set of target ICD-10-CM codes.

AN EXAMPLE

For the SNOMED CT concept 9468002 Closed fracture carpal bone, the NLM maps supply the ICD-10-CM target *S62.109? Fracture of unspecified carpal bone, unspecified wrist*. This target indicates that the laterality is “unspecified” and does not guide the user to the encounter-specific information required to obtain the most appropriate ICD-10-CM code for billing.

In contrast, the Health Language maps provide the specific ICD-10-CM codes shown in the following table, as well as the attributes associated with those codes. Note that these include *S62.102?* and *S62.101?* codes, as well as the NLM-specified *S62.109?* codes. Health Language coding personnel have identified these as additional valid mapping choices for this SNOMED CT concept.

With the Health Language maps, in two or three clicks the user can find the one most appropriate code:

- Choose Laterality (Right, Left, Unspecified).
- Choose Encounter type (Initial, Subsequent, Sequela).
- If Encounter type is Subsequent, choose Healing Type (Routine, Delayed, Nonunion, Malunion).

(Because the SNOMED CT concept indicated a closed fracture, only closed fractures are presented.)

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ICD-10-CM code	Fracture type	Laterality	Encounter type	Healing type
S62.101A	Closed	Right	Initial	
S62.101D	Closed	Right	Subsequent	Routine
S62.101G	Closed	Right	Subsequent	Delayed
S62.101K	Closed	Right	Subsequent	Nonunion
S62.101P	Closed	Right	Subsequent	Malunion
S62.101S	Closed	Right	Sequela	
S62.102A	Closed	Left	Initial	
S62.102D	Closed	Left	Subsequent	Routine
S62.102G	Closed	Left	Subsequent	Delayed
S62.102K	Closed	Left	Subsequent	Nonunion
S62.102P	Closed	Left	Subsequent	Malunion
S62.102S	Closed	Left	Sequela	
S62.109A	Closed	Unspecified	Initial	
S62.109D	Closed	Unspecified	Subsequent	Routine
S62.109G	Closed	Unspecified	Subsequent	Delayed
S62.109K	Closed	Unspecified	Subsequent	Nonunion
S62.109P	Closed	Unspecified	Subsequent	Malunion
S62.109S	Closed	Unspecified	Sequela	

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