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COVID-19 Novel Coronavirus: Documentation and Coding Tips

For discharges occurring prior to 4-1-2020 to report COVID-19, use code

B97.29 - Other coronavirus as the cause of diseases classified elsewhere

For discharges occurring on or after 4-1-2020 to report COVID-19, use **NEW** code

U07.1 - COVID-19 (announced by CDC; not intended to be a secondary diagnosis)

- **Excludes1** B34.2 - Coronavirus infection, unspecified site

Regardless of discharge date, also code (if clinically relevant):

- with Pneumonia: add J12.81 - Pneumonia due to SARS associated coronavirus
- with Bronchitis: add J20.8 - Acute bronchitis due to other specified organisms
- with ARDS: add J80 - Acute respiratory distress syndrome
- with SARS: add B97.21 - SARS associated coronavirus as the cause of diseases classified elsewhere
- with Sepsis: add A41.9 - Sepsis, unspecified organism
- with Septic Shock: add R65.21 - Severe sepsis with septic shock
- with Acute Respiratory Failure: add J96.00 - Acute respiratory failure, unspecified whether with hypoxia or hypercapnia
- with Acute Kidney Injury: add N17.9 - Acute kidney failure, unspecified
- with Type 2 MI: add I21.A1 - Myocardial infarction type 2

For patients discharged prior to testing results, we recommend documenting ***suspected* COVID-19**. A query can clarify if testing results change after discharge.

<https://www.cdc.gov/nchs/data/icd/ICD-10-CM-Official-Coding-Gudance-Interim-Advice-coronavirus-feb-20-2020.pdf>