

## ICD-10-CM Editing – Unacceptable Principal Diagnosis

The following edit will be implemented for the payers listed below and will begin with the acceptance of ICD-10 CM coding on 10/1/2015.

- Blue Cross Blue Shield of Kansas (47163)
- HealthNow New York (55204)
- BlueCross BlueShield of Western New York (00301 or 00801)
- BlueShield of Northeastern New York (00800)

**PURPOSE:** An EDI front end edit for Institutional Inpatient claims will be implemented to encourage providers to document and specify the most appropriate code related to a condition. There are selected codes that describe a circumstance which influences an individual's health status but not a current illness or injury, or codes that are specific manifestations but may be due to an underlying cause. These codes are considered unacceptable as a principal diagnosis.

The following is a link to documentation regarding the codes identified as unacceptable when entered as a principal diagnosis:  
<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2018-IPPS-Final-Rule-Home-Page-Items/FY2018-IPPS-Final-Rule-Data-Files.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=ascending> Under Downloads – Definition of Medicare Code Edits v35, unzip file and open ICD-10 Definitions of Medicare Code Edits\_v35.0.pdf, search for Unacceptable Principal Diagnosis)

Claim Type	Edit Logic	Edit Code
Institutional (837I)	Does HI01-1 = ABK (ICD-10 Principal Diagnosis)? If yes, is HI01-2 (diagnosis code) valid on the ICD10 table? If yes, is the 2300 CLM05-1 (Facility Type Code) equal to 11,18, 21,28, 41, 65, 66 or 86 (Inpatient)? If yes, is value in 2300 HI01-2 (diagnosis code) identified as an Unacceptable Principal Diagnosis (if applicable)? If yes, reject.	A3:732/A3:254 Helpful Hint: Unacceptable Principal Diagnosis code per CMS billing guidelines.