

Provider Bulletin

Molina Healthcare of California

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April 10, 2024

- Imperial
- Riverside
- San Bernardino
- Los Angeles
- Orange
- Sacramento
- San Diego

Principal Diagnosis Codes

This is an advisory notification to Molina Healthcare of California (MHC) network providers applicable to all lines of business.

What you need to know:

According to ICD-10-CM guidelines, the following coding rules and sequencing criteria are the correct “Not a Principal Diagnosis” designations for diagnosis codes. For more information, please refer to the Centers for Medicare and Medicaid Services Code Set Overview: cms.gov/priorities/key-initiatives/burden-reduction/administrative-simplification/code-sets.

Etiology/manifestation codes

- The "in diseases classified elsewhere" code title
 - Is a component of the etiology/manifestation convention.
 - Indicates that it is a manifestation code.
 - Is never permitted to be used as first listed or as a principal diagnosis code.
 - Must be used in conjunction with an underlying condition code and must be listed following the underlying condition.
 - See category F02 [Dementia in other diseases classified elsewhere] for an example of this convention.
- There are manifestation codes that do not have "in diseases classified elsewhere" in the title.
 - These codes feature a "use additional code" note at the etiology code and a "code first" note at the manifestation code.
- “Code first” and “use additional code” notes are also used as sequencing rules in the classification for certain codes that are not part of an etiology/manifestation

Provider Action

There is no provider action required.



- The American Hospital Association (AHA) Coding Clinic 1st quarter 2016 article guidelines state that the “code first” note means code first if present.
 - This instructional note is intended for conditions with both an underlying etiology and manifestation. It indicates the proper sequencing order: etiology first, followed by manifestation.
 - However, this instructional note is only applied when the underlying conditions listed in the note are present. If these conditions are not present, the code first note is not applicable.

Code(s) that are not allowed for reporting alone or as a primary diagnosis

- Examples can be found throughout the ICD-10-CM Official Guidelines for Coding and Reporting:
 - “For underdosing, assign the code from categories T36-T50 (fifth or sixth character '6').”
 - "Codes for underdosing should never be assigned as principal or first-listed codes."

Sequela codes

- Sequela codes are considered secondary-only codes per the clarification from the AHA Coding Clinic Advisor.
 - The specific type of sequela is sequenced first, followed by the injury code, with the 7th character "S" to indicate a sequela.
 - The "S" value identifies the injury responsible for the sequela.
 - The injury code with the 7th character "S" should not be reported alone or sequenced first.
 - If provider documentation is missing or unclear regarding the sequela, it is appropriate to query the provider for clarification.

External causes of morbidity codes (V00-Y99)

- The ICD-10-CM Chapter 20 guidelines state, "The external causes of morbidity codes should never be sequenced as the first-listed or principal diagnosis."
- Codes from category Z15 should not be used as principal or first-listed codes.
 - If the patient is susceptible to a condition and that condition is the reason for the encounter, the code for the current condition should be sequenced first.
- Code Z33.1 [Pregnant state, incidental] is a secondary code only used when the pregnancy is in no way complicating the reason for the visit.
 - If pregnancy is a factor, then a code from the obstetric chapter is required.

Edit Rationale Statement (ERS)

- An individual ERS often addresses multiple edits.
 - Each of those edits is sourced to at least one national industry source.
 - There may be multiple national industry sources involved across the whole set of edits that are addressed by a given ERS.
 - Therefore, a specific source may apply to only a subset of the edits addressed by a given ERS.
 - The specific sourcing that supports an individual edit may be viewed at the edit level in the application or in the Edit Rationale Module.

- Example 1: R50.81 [Fever presenting with conditions classified elsewhere]
 - Has a code first note.
 - Per ICD-10 guidelines, the underlying condition should be coded as the primary diagnosis.
- Example 2: Z15.89 [Genetic susceptibility to other disease]
 - Codes from category Z15 should not be used as principal or first-listed codes.
 - If the patient is susceptible to a condition and that condition is the reason for the encounter, the code for the current condition should be sequenced first.
 - If the patient is being seen for a follow-up after completing treatment for this condition, and the condition no longer exists, a follow-up code should be sequenced first, followed by the appropriate personal history and genetic susceptibility codes.

What if you need assistance?

If you have any questions regarding the notification, please contact your Molina Provider Relations Representative below.

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