Coding Notes





There is a new button on the Portal! The HIPE Coding Audit Toolkit has been updated to now form part of the HIPE Portal suite. With a complete overhaul of the software, a lot of work has gone into making this very user friendly. The programme allows users to create or open an existing project and to create extracts for auditing. It also includes options for printing list of charts & detailed reports on cases. There are four tabs in the main screen:

- 1. Identify episodes for audit
- 2. Key audited episodes
- 3. Review and analyse episodes
- 4. Project reporting

If you require this to be installed please contact HIPEIT@esri to set up access to HCAT. With the 'How To Use' document built into this easy to use software audit work will be much easier and accessible to more people. Some initial 2 hour training sessions are

planned for Wednesday 1st May & Thursday, 9th May and will be delivered both via WebEx and at the ESRI.

HIPE & NPRS Unit Health Research &

Information Division

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The ESRI will also use this same software to perform short audits and staff will be contacting hospitals to arrange these visits. Training in HCAT will also available as part of the audit visit. As part of the move to Money Follows The Patient, there will be an increased demand for coding audits and the ESRI plan to increase the numbers conducted.

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HIPE Training

With the increase in use of HIPE data, it is important that HIPE Coders of all levels of experience participate in ongoing training to ensure high quality data. To address the challenges that the system continues to encounter including staff shortages and restrictions on travel, initiatives have been put in place to deliver a flexible training schedule, with courses being held at the ESRI with the option to join via WebEx.

With the availability of intranet and teleconference facilities, training can be scheduled at short notice to address issues that require clarification, that are highlighted through data quality checks or at the request of HIPE staff. It allows for frequent shorter training sessions to be delivered throughout the year. Regional and hospital training is also delivered. Coding Notes continues to be a valuable training tool with the inclusion of coding guidelines and coding queries (see Cracking the Code) in each edition.

If you have any training requirements or suggestions for future training courses please let us know and we will endeavour to schedule appropriate training. The ESRI will train staff on the understanding that they will be coding in their hospitals on an ongoing basis in order to maximise the use of resources both at ESRI and hospital level.

Refresher and Specialty training sessions

When a refresher course or specialty workshop is scheduled please let us know in advance of any particular area that you would like addressed e.g. a specific disease or procedure, so that the necessary preparation can be done in order to optimise the benefits of the session. It is important that experienced coders participate in Refresher and Specialty training sessions to refresh their coding skills and keep up with changes within the HIPE system. If you are coding a specialty that is new to you please contact us so that we can provide appropriate training.

Training for new Coders

In addition to the courses that are advertised on the 2013 HIPE Training Calendar additional training for new coders can be scheduled subject to demand. If staff (or staff who received HIPE training in the past) from other areas of the HSE are redeployed to the HIPE Department of your hospital/region please contact us as soon as possible so that training can be scheduled.

New coding staff joining the hospital HIPE Department need:

- An initial minimum of 5.5 days training delivered by the ESRI
- ongoing attendance at coding courses
- ongoing mentoring within the HIPE Department of the Hospital
- to be trained over a period of time and mentored and monitored locally
- ongoing on the job experience.

For details of training delivered by the ESRI to Clinical Coders please refer to HRID website

http://www.esri.ie/health information/hipe/clinical coding/training/

Access to National HIPE Data

National HIPE data are available from the Health Research and Information Division, ESRI.

We handle requests from a wide variety of users, including	Home About ESRI People	Membership Ne	RCH INSTITUTE	rtunities FAQs	Contact Us and Map	Search	this Site	Go
hospitals, health	Research Publications Online Data Reporter	Home > Health Inform	mation > HIPE > HIPE Data >	Accessing HIPE Data	Request	TCD		
professionals, uni- versities, commer- cial companies, charities and jour- nalists.	HIPE HIPE Data Accessing HIPE Data Request Data Collected Notes on Interpreting	Request Next Step 1 of 6 (Please carefully read the notes on completing this form in the accompanying				panying docume	💌 📰	Ф
National HIPE data are published in the series of reports Activity in Acute Public Hospitals in Ireland as well as through the Online Data Reporter.	HIPE data Clinical Coding Data Dictionary NPRS HIPE & NPRS Reports Journal Articles Software Development Find it fast Latest news Useful Links Contacts	Contact Details Title: First Name: Last Name: Organisation Nar Address: Telephone: Fax: Email Address: Organisation Ty © Academic © Department of © Other Govern © Health Condo	Mr Mrs	© Ms [©] Dr [©] Prof				

When someone in your hospital requires HIPE data not locally available or available in our reports or online please advise them to contact us via the **Online Data Request Form**, with a clear specification of their data requirements. The **HIPE Instruction Manual** and **HIPE Data Dictionary** are very useful in providing background data on HIPE.

All requests provided by the HRID, ESRI must respect patient, consultant and hospital confidentiality.

Useful resources for sourcing National HIPE Data

Activity in acute Public Hospitals in Ireland

www.esri.ie/health_information/latest_hipe_nprs_reports/

Online Data Reporter

www.esri.ie/health_information/hipe_data_reporter/

Online Data Request Form

www.esri.ie/health_information/hipe/hipe_data/accessing_hipe_data/request/

HIPE Instruction Manual

http://www.esri.ie/health_information/hipe/hipe_data/data_elements_2/

HIPE Data Dictionary

http://www.esri.ie/health_information/hipe/hipe_data_dictionary/

Exporting Master Class



What is an Export?

An export file is a data archive file created by the HIPE portal which contains new and changed cases from the hospital. It will contain the following information:

- Any cases which have changed since the last export. These are referred to as <u>additions</u>.
- Any cases which were previously exported and have been subsequently deleted or changed. These are referred to as <u>deletions</u>.
- Any cases which are marked as <u>uncoded cases</u>
- Some additional information on queries, wards, codes etc.

When an export case is changed, a deleted case is exported to remove the previous case and an additional case is added with the changed version of the case.

How do I start the Export Process?

To start the export process and create an export, click on the Export Button



What are the steps for exporting?

- Start the export process by clicking on the export module.
- Make sure that all relevant years are ticked .
- 3. Click on *Export Selected Years*.
- The export is created on the HIPE portal and the screen below is shown5. In (step 1) check that the totals in the export are as expected.
- 6. In (step 2), use the

Save Export File To Desktop

to store a copy of the export on your local computer. This file will be encrypted.

button

7. In (step 3), use the button to create an email to send the export. Note that you will have to attach the export to the email. Alternatively, upload the export to the website by using the button.

> Send Export Using Email Send Export Using HIPE Website



When should an export be created?

Exports should be created at the very latest on the third working day of a new month. <u>The most important aspect to</u> <u>consider when deciding when an export is created is to ensure that the all data from the previous month are included.</u> This means that all cases from the previous month have to be downloaded. All batch coded cases from the previous month should be processed.

Exporting Master Class

Continued..

Should I export even if I have not coded or changed cases?

Yes, as you will have downloaded uncoded cases and these cases are included in the export. If you are unable to create an export on a particular month, please contact the HIPE unit in the ESRI.

Why is it important to create an export each month?

HIPE data (both coded and uncoded) is now being used for a number of programmes in the Department of Health and the Health Service Executive for performance monitoring and management. If your hospital does not submit an export, national reports for your hospital will be based on out-of-date and incorrect data.

What years should I export?

The open years available for export will always be shown in the HIPE portal. If there are no cases to be sent for a particular year, the year is still shown. Note that from time to time, the HIPE unit will re-open a closed year by adding a setting to the HIPE portal. In this case, the re-open years will also be shown.

It is important that only open years are exported as data for closed files are ignored.

Should I upload using the export upload facility or send by email?

We recommend that all hospitals use the export web upload facility.

Is the export encrypted when it is sent to the ESRI? Yes

Where should I save the export so that it can be sent to the ESRI?

When using the Save Export File To Desktop button, it is recommended to save the export on the <u>desktop</u> to make it easier to locate it for the upload facility. Please use the following notes to save the export on the desktop.

If you have using Firefox, you should tick the "always ask me where to save files" setting. This is found in the "downloads" section of the "general" settings. This setting will force Firefox to ask you for the location to store a file.

How do I find the address of the Upload Facility?

The best way to get the address for the upload facility is to use the buttons on the export screen. The



Send Export Using HIPE Website

button is shown on the main

export screen and the result export screen.

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How do I re-create an export?

Use the button to show previously created exports. The list of previous exports is shown with the latest shown on the top. Click on Recreate to re-create the re-

quired export. Once the export is re-created, the export result screen is shown.

Cracking the Code

A selection of ICD-10-AM Queries

Haemorrhagic brain metastases

Q. Please advise as to how best to code haemorrhagic metastases in the brain.

A. For this case where the brain is a secondary site of the neoplasm we advise coding;

Secondary neoplasm of brain – C79.3 *Secondary malignant neoplasm of brain and cerebral meninges* followed by I61.x *Intracerebral haemorrhage* – code to the site if specified or use .9 if not specified.

Code also the primary neoplasm and any other conditions that meet the criteria for coding as per ACS 0002. The sequencing of the codes will depend on the reason for admission. The American Hospital Association (AHA) ICD-9-CM Coding Clinic for haemorrhagic metastasis was referred to in answering this query.

Peri-Prosthetic Fracture

Q. What is the code assignment for peri-prosthetic fracture.

A. There are various scenarios that can lead to periprosthetic fractures and many factors that the coder needs to take into consideration.

<u>Site:</u>

When coding these types of fractures, the coder needs to look at the x-ray/documentation and see where the bone has actually fractured. The term "peri prosthetic" refers to a fracture near or around the prosthesis. This may be the shaft of the femur or it may be the proximal end of the femur or other parts of the femur so the code assignment will depend on the site of the fracture

Causes:

M96.6 Fracture of bone following insertion of orthopaedic implant, joint prosthesis, or bone plate should be assigned only when a fracture (and no other type of complication) is a result of the insertion or presence of these devices.

A code from 'T84 *Complications of internal orthopaedic prosthetic devices, implants and grafts* should be assigned when there is documentation of the following types of complications as being due to the specified orthopaedic device:

- mechanical complications (displacement, break down etc),

- infection or inflammatory reaction
- other complications, such as fibrosis, pain, haemorrhage etc

If it is documented that the patient had a fall resulting in a fracture then a code from Chapter 19 *Injury, poisoning and certain other consequences of external causes* will be assigned with an external cause code for the fall. The "degree" of fall is not relevant.

For a spontaneous fracture, follow the index for Fracture, spontaneous (cause unknown) (see also Fracture, pathological) M84.4- *Pathological fracture not elsewhere classified* (as always check the exclusion notes for this code) A peri-prosthetic fracture is a fracture that occurs around a joint prosthesis. Such documentation does not necessarily mean that the fracture resulted from the presence of the prosthesis.

Cystitis due to radiation

Q. How is cystitis due to radiation coded?

A. For cystitis due to radiation please assign the following codes:

N30.4 Irradiation cystitis Y84.2 Radiological procedure and radiotherapy Y92.22 Health Service area

In the alphabetic index look up this condition under Cystitis, Irradiation or Effect, Adverse, Radiotherapy, Cystitis.

Photodynamic Therapy for Bowen's Disease

Q. How is photodynamic therapy for Bowen's disease coded?

A. Photodynamic therapy involves the introduction of a photosensitizing agent into the body, which is retained preferentially by the tumour cells. Then, a light source is used to stimulate the photosensitizing agent, causing the release of toxins and leading to the destruction of the tumour. Topical 5-aminolevulinic acid (ALA) or methyl aminolevulinate (MAL) are the most commonly used photosensitizers (Source: <u>http://emedicine.medscape.com/article/1100113-</u> treatment).

Please assign the following procedure codes for Photodynamic therapy:

96205-00 [1920] Other administration of pharmacological agent, antineoplastic agent and

90677-00 [1611] Other phototherapy, skin

Cracking the Code

A selection of ICD-10-AM Queries

Angioplasty with rotablation

Q. Patient admitted for rotablation along with angioplasty and insertion of drug eluting coronary stent, what code is assigned for the rotablation?

A. The rotablation removes harder plaques within the artery before the stent is inserted. The code for the rotablation is inherent in certain coronary procedures including angioplasty.

Rotablation is included as a non essential modifier at the term Angioplasty

Angioplasty, transluminal balloon (rotablator)

- -Coronary artery
- with stenting see block [671]

So for this case assign a code from block [671] *Transluminal* coronary angioplasty with stenting

Also note for information that rotablation is included at the main term Athrectomy, coronary artery, - percutaneous transluminal rotational (by Rotablator) (PTCRA) –Block [669].

Sequencing of Stroke codes

Q. A patient was admitted with a stroke and right carotid stenosis 80-90% and also left carotid stenosis 90-99%. This patient was coded as having cerebral infarct due to occlusion of carotid arteries using code I63.2 *Cerebral infarction due to*

unspecified occlusion or stenosis of precerebral arteries and had a right carotid endarterectomy done. The patient was admitted electively a week later for a Left carotid endartectomy. How is the stroke code sequenced in the second admission?

A. For the second admission assign a code for the left carotid stenosis (reason for admission) as the principal diagnosis. Also code the previous CVA as an additional diagnosis if the patient has deficits or if it meets the criteria in ACS 0002 *Additional Diagnosis*. The stroke is not the reason for admission in this episode of care and therefore is not sequenced as the principal diagnosis

ACS 0604 Stroke states that "While the patient is receiving continuing treatment, regardless of the period of time elapsed since the stroke, assign a code from categories I60–I64 (cerebrovascular diseases) with any applicable deficit codes (eg hemiplegia)" so the stroke can be assigned as an additional diagnosis when it meets ACS 0002.

Lymphocytic Colitis

Q. What code is assigned for a diagnosis of 'lymphocytic colitis' on histology and also noted as a diagnosis in a patient's chart?

A. Please assign K52.8 *Other specified noninfective gastroenteritis and colitis* for lymphocytic colitis. This condition has been indexed to this code in a later edition of ICD-10-AM/ ACHI/ACS.



HIPE Data Quality Training Update

There are a number of Data Quality Sessions being held over the coming weeks. As the quality of HIPE data is of the highest priority it is important to be up to date with the tools available and updates in data quality work at national and hospital level.

Data Quality Session Wednesday 17th April 2013 11.00am-1.00pm (via WebEx) This session will focus on the new HCAT software and the data quality work currently underway at a national level.

Checker Training Tuesday 30th April 2013 11.00am -12.00pm (via WebEx) This session will demonstrate the Checker programme which is an important data quality tool. It is recommended that the Checker be run on HIPE data prior to export to the ESRI.

HCAT Training

HIPE Coding Audit Toolkit (HCAT) training sessions are being arranged and we will contact all hospitals with dates and full details. The session will demonstrate how to perform a HIPE coding audit using the HCAT from sample selection through to creating reports.

Upcoming Courses 2013 New Variables Anatomy & Physiology Date: Tuesday 9th April Introduction to Anatomy & Physiology Time: 11am - 12pm Location: ESRI & WebEx **This course is open to all HIPE coders**. More sessions will be planned to ensure every coder can attend. This course will be delivered by a specialist speaker **Introduction to HIPE** Date: Thursday 30th May WebEx Only **Time:** 11am – 1pm This is a general introduction to the variables collected by Location: ESRI & WebEx HIPE for new coders and others working in the HIPE system. Time: 2.00pm - 4.00pm **Date:** Tuesday 28th May **Data Quality Session** Time: 10.30am – 1pm Date: Wednesday 17th April Coding Skills I Time: 11am – 1pm ESRI Only Location: WebEx only This course is for new coders who have attended the Introduction to HIPE course. Note: This is an update on data quality activities and Date: Tuesday 11th & Wednesday 12th June tools including the Portal HCAT. This session will be repeated subject to demand Time: 10am – 5pm each day. Checker **Coding Skills III** Date: Tuesday 30th April **Time:** 11am – 12pm This course is for coders who have previously attended Coding Skills II. Experienced coders are welcome to attend this Location: WebEx only course for refresher training. **Portal HCAT Date:** Tuesday 21st – Thursday 23rd May 2hour session and will be delivered both via Time: 10am – 5pm each day WebEx and at the ESRI To apply for any of the advertised courses, Location: ESRI please complete the online training form at: Date: Wednesday 1st May Time: 11am – 1pm Location: WebEx and ESRI www.hipe.ie/training Date: Thursday, 9th May Time: 11am – 1pm Location: WebEx and ESRI What would you like to see in Coding Notes? No matter how long the winter, If you have any ideas for future topics, please let us know. spring is sure to follow. Thanks and keep in touch: hipe@esri.ie ~Proverb See the 'Find it Fast' section of the ESRI website for easy access. www.esri.ie/health_information/find_it_fast/

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