

Health classifications and coding bulletin

Effective 1 July 2020

Coding and casemix classifications

ICD-10-AM/ACHI/ACS Edition for 1 July 2020

All separations occurring on or after 1 July 2020 must be coded using:

- ICD-10-AM/ACHI Eleventh Edition (and relevant errata) in accordance with the Eleventh Edition Australian Coding Standards
- Victorian Additions to the Australian Coding Standards 2020-21
 https://www.bettersafercare.vic.gov.au/our-work/information-management-and-standards/clinical-coding-and-classifications/additions
- Relevant education and feature articles published on the Clinical coding and classifications education web page https://www.bettersafercare.vic.gov.au/our-work/information-management-and-standards/clinical-coding-and-classifications/education
- Information contained in the VICC queries database
 https://www.bettersafercare.vic.gov.au/our-work/information-management-and-standards/clinical-coding-and-classifications/queries-database
- National classification advice https://ace.ihpa.gov.au/

This requirement applies to all Victorian public and private hospitals and registered day procedure centres reporting data to the Victorian Admitted Episodes Dataset (VAED).

Queries regarding the application of codes and standards are submitted to the Victorian ICD Coding Committee (VICC) via the online query submission form at: https://bettersafercare.vic.gov.au/resources/clinical-coding-and-classifications/vic-icd-coding-committee/query-form

The online query form supports attachments.

ICD-10-AM/ACHI Library file 2020-21

The ICD-10-AM/ACHI library file 2020–21 contains all ICD-10-AM Eleventh Edition diagnosis and morphology codes, and Australian Classification for Health Interventions (ACHI) codes. It includes abbreviated and full code descriptions, procedure block numbers, validations applicable to each code, and logical one to one mapping to previous editions of ICD-10-AM/ACHI. For 2020-21 the OP_Room column in the file has been updated to align with AR-DRG Version 10.0.

The 2020-21 Library file is available to Victorian hospitals and software suppliers working with Victorian hospitals for the purpose of submitting data to the VAED. Requests for obtaining the file can be made via the HDSS Helpdesk at: <a href="https://doi.org/10.2016/nd



All other interested parties not authorised to access the Library file should refer to the AR-DRG classification system product sales page of the Independent Hospital Pricing Authority (IHPA) website at: https://www.ihpa.gov.au/what-we-do/products/admitted-acute-care-products-and-licences

National ICD-10-AM/ACHI/ACS advice

The Independent Hospital Pricing Authority (IHPA) publishes ICD-10-AM/ACHI/ACS Coding Rules on a quarterly basis.

The Coding Rules can be accessed on the IHPA Australian Classification Exchange (ACE) at: https://ace.ihpa.gov.au/

The IHPA also has an ICD-10-AM/ACHI/ACS public submission process to provide users of the classification an avenue to suggest updates to ICD-10-AM, ACHI and ACS. More information of the ICD 10-AM/ACHI/ACS public submission process is available at: https://ace.ihpa.gov.au/Submissions.aspx?page=2

Acute admitted services funding for 2020-21

Separations occurring on or after 1 July 2020 will be grouped in PRS/2 using AR-DRG Version 10.0.

The Australian Refined Diagnosis Related Groups Version 10.0 Definitions Manual is available for purchase from the IHPA. Refer to the AR-DRG classification system product sales page on the IHPA website at: http://ar-drg.laneprint.com.au/

2020-21 acute admitted episodes will be funded under the Victorian WIES model - WIES 27.

The Victorian health policy and funding guidelines 2020-21 provide further details about the funding model for Victorian public hospitals.

The 2020-21 guidelines when available will be published at: https://www.dhhs.vic.gov.au/publications/policy-and-funding-guidelines-health-and-human-services

Notification of grouper anomalies

The IHPA has a public submission process for notification of grouper anomalies and proposed modifications to AR-DRGs. Details can be found at: https://ace.ihpa.gov.au/Submissions.aspx?page=3

Anomalies identified in AR-DRG Version 10.0 should also be notified to the Victorian ICD Coding Committee (VICC), as the State can, in many instances, influence a faster resolution of problems or make local adjustments to grouper software as required.

AR-DRG queries can be submitted to VICC via the online query form available at: https://bettersafercare.vic.gov.au/resources/clinical-coding-and-classifications/vic-icd-coding-committee/query-form

Calendar of grouper versions and coding editions

The calendar of grouper versions and coding editions updated for 2020-21 is available at: https://www.bettersafercare.vic.gov.au/our-work/information-management-and-standards/clinical-coding-and-classifications/admitted-care-classifications

This calendar provides information regarding the release dates and implementation dates for the classifications in use in Victoria.

Victorian amendments to the health classifications

Victorian additions to the Australian Coding Standards

The 2020-21 Victorian additions to the Australian Coding Standards must be used in conjunction with the Australian Coding Standards for the Eleventh Edition of ICD-10-AM/ACHI. They are available at: https://www.bettersafercare.vic.gov.au/our-work/information-management-and-standards/clinical-coding-and-classifications/additions

There are no changes to the Victorian additions to the Australian Coding Standards for 2020-21.

Victorian modifications to the AR-DRGs

In 2020-21 hospitals will assign diagnosis and procedure codes using the Eleventh Edition of the ICD-10-AM/ACHI classifications. For funding purposes, these codes are grouped to AR-DRG version 10.0 (AR-DRG10.0).

As in previous years, some Victorian-specific adjustments will be made to the original AR-DRG10.0 grouping to produce the Victorian modified VIC-DRG10.0. The calculation of WIES27 is based on VIC-DRG10.0 groupings. The VIC-DRG10.0 for Radiotherapy (R64Z) and Endovascular Clot Retrieval (B02Y) remain for WIES27 (Box 3.2 and Box 3.3). In addition, the following new VIC-DRG10.0 modification will be created under WIES27:

L42Z Lithotripsy is removed from AR-DRG version 10.0, however Box 3.1 outlines special
funding conditions for lithotripsy. Box 3.4 sets out a new Victorian modification to allow the
special funding conditions for L42Z to continue under WIES27.

Under WIES27, diagnosis codes are not removed for the purpose of grouping to VIC-DRG10.0. The department will continue to review the impact of implementation of VIC-DRG10.0 taking into account anomalous growth in coding volumes.

Box 3.1: Episodes eligible for WIES27 funding

All episodes in the VAED with a care type of:

• 4 – Other care (Acute), including qualified newborns.

Except for:

- · Private hospital separations.
- Incomplete or uncoded episodes, or episodes coded to a problem VIC-DRG 10.0 (zero weight) including VIC-DRG 10.0 960Z (Ungroupable), 961Z (Unacceptable Principal Diagnosis) and 963Z (Neonatal Diagnosis Not Consistent W Age/Weight).
- Episodes with an account class on separation of NT (Newborn Unqualified, not birth episode), WC (Victorian WorkCover Authority), XX (Ineligible non-Australian residents not exempted from fees), AS (Armed Services), CL (Common Law Recoveries), OO (Other compensable), SS (Seamen).
- Episodes where the contract role is B (service provider hospital).
- Episodes from hospitals not eligible for WIES funding.
- Episodes that have been coded as follows as this activity has been funded through specified grants:
 - include an electroconvulsive therapy code [1422400-1422406] and

- care type 4 (Acute) and
- separated from The Royal Melbourne Hospital (campus code 1334) and
- funding arrangement 2 (Hub and Spoke) and
- contract/spoke identifier in (0010, 0011, 0012).
- Episodes with the Victorian modification L42Z (see Box 3.4) unless the episode is reported by St Vincent's Health, Ballarat Health Services, Bendigo Health, Barwon Health, Goulburn Valley Health, The Royal Children's Hospital, Mildura Base Hospital, Western Health or Mercy Health (Werribee campus only).

While contracted patients are allocated a WIES score they are not eligible for WIES funding.

Box 3.2: Radiotherapy

The Australian Coding Standard (ACS) 0229 Radiotherapy instructs coders to assign a code for the malignancy as the principal diagnosis in multi-day episodes for radiotherapy. This results in episodes grouping to a wide range of AR-DRG 10.0s. To maintain funding equity, a VIC-DRG 10.0 of R64Z Radiotherapy will be assigned for:

- i. non-same-day non-general-intervention episodes that include a radiation oncology procedure from ACHI blocks [1786] to [1792], [1794] or [1795] for treatment of a neoplastic condition (at least one code from the ICD-10-AM range C00-D48), except for episodes with the following adjacent AR-DRG10.0s: A40, B82, B83, W60, and W61
- ii. same-day episodes initially grouped to the adjacent AR-DRG10.0 R62 Other Neoplastic Disorders that have an ICD-10-AM eleventh edition principal diagnosis code of Z51.0 (Radiotherapy session).

Box 3.3: Endovascular Clot Retrieval

Endovascular clot retrieval is a highly specialised procedure and requires a well-organised system to identify suitable candidates for therapy and to rapidly transport them to a capable centre. To support the provision of the service and ensure funding equity, a VIC-DRG10.0 of B02Y Endovascular Clot Retrieval will be assigned for episodes that:

Originally group to the adjacent AR-DRG10.0 of B02 Cranial Procedures

AND

Include an eleventh edition ICD-10-AM principal or secondary diagnosis code of I63.x, I64, I65.x or I66.x AND an ACHI eleventh edition procedure code of 35414-00 Embolectomy or thrombectomy of intracranial artery.

Box 3.4: Lithotripsy

Except for episodes with the following adjacent AR_DRG10.0s: L02, L03, L04, L05, L06, L07, L08, L09, L10, 801 then L42Z is assigned under the following conditions:

The principal diagnosis code is in the following list: N130, N131, N132, N133, N134, N200, N201, N202, N209, N210, N211, N218, N219, N23

AND

The ESWL procedure code 3654600 is in the procedure array.

Data quality tools

2020-21 VAED criteria for reporting

The 2020-21 VAED criteria for reporting document and accompanying procedure code lists are available on the HDSS website at:

https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems/data-collections/vaed

Only episodes meeting a Criterion for Admission, as set out in this document, may be reported to the VAED. This applies to VAED reporting for all Victorian public and private hospitals and registered day procedure centres.

There are no changes to the Victorian Admitted Episodes Dataset: Criteria for Reporting document for 1 July 2020.

Performance Indicators for Coding Quality (PICQ®)

VAHI holds a statewide licence with Pavilion Health to provide PICQ® monthly numerator to public hospitals. Public hospitals access monthly numerator via the

Provision of numerator PICQ reports is via the PICQ® 8 portal for registered public hospital users.

Contact details

The Health Classifications and Coding unit is part of the Information Management and Standards branch of the Victorian Agency for Health Information.

The Health classifications and coding bulletin is produced to inform Health Information Managers, Clinical Coders and other interested parties of changes to health classifications and coding applicable to admitted episodes separated on or from 1 July 2020.

Better Safer Care website	https://bettersafercare.vic.gov.au/
HDSS website	https://www2.health.vic.gov.au/hospitals-and-health-services/data-reporting/health-data-standards-systems
Data requests	https://www.bettersafercare.vic.gov.au/our-work/performance-and-safety-reporting/HOSdata