

ICS 22X2: Novel Coronavirus (COVID-19) – Effective from 1st April 2020

Please see Coding Rules below published by the Independent Hospital Pricing Authority (IHPA) which incorporates guidance from the WHO regarding the HIPE coding of Novel Coronavirus (COVID-19). This advice supersedes the advice previously published.

A further supplementary guidance document (V1.2) is provided in addition to the classification advice below to provide further detail and scenarios for clinical coders.

Australian Classification Exchange



Coding Rule

Ref No: TN1530 | Published On: 07-Feb-2020 | Status: Current

SUBJECT: Coronavirus disease 2019 (COVID-19)

**Effective from 1 January 2020* (Updated 27/03/20)*

Novel coronavirus (COVID-19) is a new (or ‘novel’) strain of coronavirus not previously identified in humans before the outbreak in Wuhan, Hubei Province, China.

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV).

Common signs of COVID-19 infection include respiratory symptoms such as cough, shortness of breath, breathing difficulties and fever. In severe cases, the infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and death.

The World Health Organization (WHO) have advised the following;

- U07.1 Emergency use of U07.1 (COVID-19, virus identified) is to be assigned when COVID-19 has been documented as confirmed by laboratory testing
- U07.2 Emergency use of U07.2 (COVID-19, virus not identified) is to be assigned when COVID-19 has been documented as clinically diagnosed COVID-19, including evidence supported by radiological imaging (i.e. where a clinical determination of COVID-19 is made but laboratory testing is inconclusive, not available or unspecified)

IHPA also advise that Emergency use of U06.0 Emergency use of U06.0 (COVID-19, ruled out) is to be assigned when laboratory testing for COVID-19 has been performed, but ruled out (i.e. negative test result)

References:

- Australian Government Department of Health 2020, *Novel coronavirus (2019-nCoV)*, DOH, Canberra, viewed 4 February 2020, <https://www.health.gov.au/health-topics/novel-coronavirus-2019-ncov> .
- Centers for Disease Control and Prevention 2020, *2019 Novel coronavirus*, US Department of Health and Human Services, viewed 4 February 2020, <https://www.cdc.gov/coronavirus/index.html> .
- World Health Organization 2020a, *Coronavirus*, viewed 4 February 2020, <https://www.who.int/health-topics/coronavirus> .
- World Health Organization 2020b, *Q&A on coronavirus*, viewed 4 February 2020, <https://www.who.int/news-room/q-a-detail/q-a-coronaviruses> .

Initially published by IHPA on 07 February 2020, for implementation 01 January 2020. Updated by IHPA 27 March 2020.

CLASSIFICATION

Laboratory Confirmed cases of COVID 19

Laboratory confirmed COVID-19: An individual with a laboratory confirmation of infection with COVID-19, irrespective of clinical signs and symptoms. Use U07.1 Emergency use of U07.1 [COVID-19, virus identified] when COVID-19 has been confirmed by laboratory testing irrespective of severity of clinical signs or symptoms.

Where documentation indicates confirmed COVID-19 with symptoms, assign:

Principal Diagnosis: A code for the symptom (s) or condition (s) as per the guidelines in ACS 0001 *Principal diagnosis*

Additional Diagnoses: *B97.2 Coronavirus as the cause of diseases classified to other chapters* to identify the infectious agent
and
U07.1 Emergency use of U07.1 (COVID-19, virus identified)

Where laboratory confirmed COVID-19 is documented **without symptoms**, assign:

Principal Diagnosis: *B34.2 Coronavirus infection, unspecified site*

Additional Diagnosis: *U07.1 Emergency use of, as an additional diagnosis U07.1* (COVID-19, virus identified)

Note:

- DO NOT assign *U07.1 Emergency use of, as an additional diagnosis U07.1* (COVID-19, virus identified) to episodes where novel coronavirus is only suspected/clinically diagnosed.
- Where COVID 19 is acquired during an episode of care the codes above can be assigned as additional diagnosis with the HADX flag(s) assigned as appropriate.

Clinically diagnosed or probable COVID-19

Clinically diagnosed or probable COVID-19: An individual who is suspected of having COVID-19 but laboratory testing for COVID-19 is inconclusive or not available but in whom a clinical determination of COVID-19 has been made. Use U07.2 Emergency use of U07.2 [COVID-19, virus not identified] when COVID-19 is diagnosed clinically but laboratory testing is inconclusive, not available, or unspecified.

Where clinically diagnosed or probable COVID-19 is documented **with symptoms**, assign:

Principal Diagnosis: A code for the symptom (s) or condition (s) as per the guidelines in ACS 0001 *Principal diagnosis*

Additional Diagnoses: *B97.2 Coronavirus as the cause of diseases classified to other chapters* to identify the infectious agent
and
U07.2 Emergency use of U07.2 (COVID-19, virus not identified) to identify cases documented as clinically diagnosed COVID-19 but laboratory testing is inconclusive, not available or unspecified.

Where clinically diagnosed or probable COVID-19 is documented **without symptoms**, assign:

Principal Diagnosis: *B34.2 Coronavirus infection, unspecified site*

Additional Diagnosis: *U07.2 Emergency use of U07.2*, (COVID-19, virus not identified) to identify cases documented as clinically diagnosed COVID-19 but laboratory testing is inconclusive, not available or unspecified.

Please Note:

- Do not use *U07.2 Emergency use of U07.2*, (COVID-19, virus not identified) where test results are pending.

COVID-19 complicating pregnancy

Where laboratory confirmed or clinically diagnosed COVID-19 is documented as complicating pregnancy, the correct obstetric chapter code is *O98.5 Other viral diseases in pregnancy, childbirth and the puerperium* which is followed by the guidelines in this standard ICS 22X2.

Code the remainder of the episode in accordance with ACS 1521 *Conditions and injuries in pregnancy* and ACS 1500 *Diagnosis sequencing on obstetric episodes of care*.

Suspected COVID-19, ruled out

Suspected COVID-19, ruled out: An individual suspected of having COVID-19 but COVID-19 has subsequently been excluded on laboratory testing and in whom a clinical diagnosis of COVID-19 has not been made. In this circumstance assign U06.0 *Emergency use of U06.0 [COVID-19, ruled out]*.

Where suspected COVID-19 is documented **with symptoms, but is ruled out**, assign:

Principal Diagnosis: A code for the symptom(s) or condition(s) as per guidelines in ACS 0001 Principal diagnosis

Additional Diagnosis: Either *Z03.8 Observation for other suspected diseases and conditions*

Or

Z03.71 Observation of newborn for suspected infectious condition

And also assign

U06.0 Emergency use of U06.0 (COVID-19, ruled out) to identify suspected but ruled out COVID-19

Please Note:

- For cases where COVID 19 has been ruled out a further additional code *Z20.8 Contact with and exposure to other communicable diseases* can be coded as appropriate and only as determined and documented by a clinician.
- Please refer to the supplementary guidance document for further case scenarios for suspected COVID 19, ruled out.

Isolation:

Where isolation is documented, assign *Z29.0 Isolation* as an additional diagnosis.

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Standard Updated: 1st April 2020 to include updated advice from IHPA & WHO
Update effective from: 1st April 2020

See Also: Supplementary Guidance for Classifying COVID 19 (V1.2)

Supplementary guidelines for classifying COVID-19 scenarios in admitted patient care* (V1.2)
May 2020

Presentation scenarios	Laboratory confirmed cases ¹ Tested positive	Clinically diagnosed or probable cases ² Testing is inconclusive, unavailable or not specified	Ruled out cases ³ Tested negative
Patient exhibiting symptoms (Symptoms) = Yes Exposure to confirmed case (Exposure ⁴) = Yes	Principal diagnosis: Symptom(s) or condition(s) Additional diagnoses: B97.2 <i>Coronavirus as the cause of diseases classified to other chapters</i> U07.1 <i>Emergency use of U07.1 [COVID-19, virus identified]</i> ¹	Principal diagnosis: Symptom(s) or condition(s) Additional diagnoses: B97.2 <i>Coronavirus as the cause of diseases classified to other chapters</i> U07.2 <i>Emergency use of U07.2 [COVID-19, virus not identified]</i> ²	Principal diagnosis: Symptom(s) or condition(s) Additional diagnoses: Z20.8 <i>Contact with and exposure to other communicable diseases</i> Z03.8 <i>Observation for other suspected diseases and conditions</i> ⁵ - Or Z03.71 <i>Observation of newborn for suspected infectious condition for neonates</i> U06.0 <i>Emergency use of U06.0 [COVID-19, ruled out]</i> ³
Symptoms = Yes Exposure ⁴ = No	Principal diagnosis: Symptom(s) or condition(s) Additional diagnoses: B97.2 <i>Coronavirus as the cause of diseases classified to other chapters</i> U07.1 <i>Emergency use of U07.1 [COVID-19, virus identified]</i> ¹	Principal diagnosis: Symptom(s) or condition(s) Additional diagnoses: B97.2 <i>Coronavirus as the cause of diseases classified to other chapters</i> U07.2 <i>Emergency use of U07.2 [COVID-19, virus not identified]</i> ²	Principal diagnosis: Symptom(s) or condition(s) Additional diagnoses: Z03.8 <i>Observation for other suspected diseases and conditions</i> ⁵ U06.0 <i>Emergency use of U06.0 [COVID-19, ruled out]</i> ³
Symptoms = No Exposure ⁴ = Yes	Principal diagnosis: B34.2 <i>Coronavirus infection, unspecified site</i> Additional diagnoses: U07.1 <i>Emergency use of U07.1 [COVID-19, virus identified]</i> ¹	Principal diagnosis: B34.2 <i>Coronavirus infection, unspecified site</i> Additional diagnoses: U07.2 <i>Emergency use of U07.2 [COVID-19, virus not identified]</i> ²	Principal diagnosis: Z20.8 <i>Contact with and exposure to other communicable diseases</i> Additional diagnoses: U06.0 <i>Emergency use of U06.0 [COVID-19, ruled out]</i> ³
Pregnancy complicated by COVID-19 /other condition (as per ACS 1521 <i>Conditions and injuries in pregnancy</i>)	Code first: O98.5 <i>Other viral diseases complicating pregnancy, childbirth and the puerperium</i> Additional diagnoses: As per advice above	Code first: O98.5 <i>Other viral diseases complicating pregnancy, childbirth and the puerperium</i> Additional diagnoses: As per advice above	For pregnant patients with COVID 19 ruled out please follow the advice above depending on the circumstances ⁶ .

1 Laboratory confirmed COVID-19 An individual with a laboratory confirmation of infection with COVID-19, irrespective of clinical signs and symptoms. Use U07.1 *Emergency use of U07.1 [COVID-19, virus identified]* when COVID-19 has been confirmed by laboratory testing irrespective of severity of clinical signs or symptoms.

2 Clinically diagnosed or probable COVID-19 An individual who is suspected of having COVID-19 but laboratory testing for COVID-19 is inconclusive or not available but in whom a clinical determination of COVID-19 has been made. Use U07.2 *Emergency use of U07.2 [COVID-19, virus not identified]* when COVID-19 is diagnosed clinically but laboratory testing is inconclusive, not available, or unspecified.

3 Ruled out COVID-19 An individual suspected of having COVID-19 but COVID-19 has subsequently been excluded on laboratory testing and in whom a clinical diagnosis of COVID-19 has not been made. In this circumstance assign U06.0 *Emergency use of U06.0 [COVID-19, ruled out]*.

4 This refers to exposure as determined and documented by a clinician, as opposed to patient-reported exposure to COVID-19 alone.

5 From 1 January 2020, an exception has been made to ACS 0012 *Suspected conditions* for coding of symptomatic presentations with suspected COVID-19, ruled out. For newborn cases (infants less than 28 days old) assign Z03.71 *Observation of newborn for suspected infectious condition*.

6 Updated advice from IHPA 9th April 2020 regarding ruled out COVID 19 in pregnancy

Note 1: Where isolation (as opposed to quarantined) is documented, assign Z29.0 *Isolation* as an additional diagnosis.

* Source: Independent Hospital Pricing Authority, March 2020, updated by IHPA 9th April 2020 – adapted for implementation in Ireland
<https://www.ihsa.gov.au/what-we-do/how-classify-covid-19>