

June 12, 2019

### **Clinical Payment, Coding and Policy Changes**

We regularly augment our clinical, payment and coding policy positions as part of our ongoing policy review processes. In an effort to keep our providers informed, please see the below communication of upcoming new policies.

Effective for dates of service beginning October 1, 2019:

### **Diagnosis Code Guideline Policy – Laterality Policies**

**Diagnosis to Diagnosis Policy**-One of the unique attributes to the ICD-10-CM code set is that laterality has been built into code descriptions. Some ICD-10-CM codes specify whether the condition occurs on the left or right, or is bilateral. If no bilateral code is provided and the condition is bilateral, then codes for both left and right should be assigned. If the side is not identified in the medical record, then the unspecified code should be assigned.

**Diagnosis to Modifier Policy**-The Diagnosis-to-Modifier comparison assesses the lateral diagnosis associated to the claim line to determine if the procedure modifier matches the lateral diagnosis. A diagnosis indicating either right or left or bilateral should be in sync with any modifier (RT/LT/50) reported for the same procedure.