

ICD-10 CM DIAGNOSIS CODE COMBINATIONS (EXCLUDES1)

Scope

This policy applies to:

- | | | |
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| <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington | <input checked="" type="checkbox"/> Kaiser Permanente Health Plan of Washington Options, Inc. | <input type="checkbox"/> Medicaid |
| <input checked="" type="checkbox"/> Commercial | <input checked="" type="checkbox"/> Medicare | |

Policy

Original Effective Date: 02/01/2024

Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not separately reimburse services billed with diagnosis codes that are mutually exclusive when billed for the same member by the same provider on the same date of service.

Billing/Coding Guidelines

All claims must be billed according to Centers for Medicare & Medicaid Services (CMS) guidelines.

An Excludes 1 note is a pure excludes note. It means “NOT CODED HERE!” An Excludes1 note indicates that the code excluded should never be used at the same time as the code above the Excludes1 note. An Excludes1 is used when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.

To confirm the codes are not mutually exclusive, medical records may be requested.

Policy Definitions

Excludes1 – an ICD-10 CM note that indicates that the code excluded should never be used at the same time as the code above the code above the Excludes1 note.

Prerequisite(s)

Mutually exclusive services should not be reported together.

Mutually exclusive diagnosis codes are identified in ICD-10 CM with an **Excludes1** note

Exception to the Excludes1 definition is the circumstance when the two conditions are unrelated to each other.

References

[ICD-10-CM Official Guidelines for Coding and Reporting](#) – CMS.gov

[ICD-10-CM Tabular List of diseases and injuries](#) – CMS.gov

Frequently Asked Questions

- Q1:** Can codes F45.8 (Other somatoform disorders) and G47.63 (sleep related teeth grinding) be billed on the same claim?
- A1:** No, F45.8 has an Excludes1 note for "sleep-related teeth grinding (G47.63)," because "teeth grinding" is an inclusion term under F45.8. Only one of these two codes should be assigned for teeth grinding. However, psychogenic dysmenorrhea is also an inclusion term under F45.8, and a patient could have both this condition and sleep-related teeth grinding. In this case, the two conditions are clearly unrelated to each other, and so it would be appropriate to report F45.8 and G47.63 together.

Revision History

09/18/2023 – New Policy

Note: This information is intended to serve only as a general reference resource regarding reimbursement policy for the services described and is not intended to address every aspect of a reimbursement situation. Accordingly, we may use reasonable discretion in interpreting and applying this policy to services being delivered in a particular case. Further, the policy does not cover all issues related to reimbursement for services rendered to our enrollees as legislative mandates, the provider contracts, the enrollee's benefit coverage documents, and the Provider Manual all may supplement or in some cases supersede this policy. This policy may be modified from time to time by publishing a new version of the policy on Kaiser Permanente provider website; however, the information presented in this policy is believed to be accurate and current as of the date of publication.