

Stroke

Documentation and coding: Individual & Family Plans

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For coding education questions, email CignaHealthcareHCPeducation@CignaHealthcare.com.

It's important to accurately document and code diagnoses when submitting claims for your patients with Cigna Healthcare-administered coverage. This helps ensure your diagnosis and coding practices comply with all applicable legal requirements,* while enabling us to provide our customers with the benefits and resources they need. For additional information and resources, visit the Cigna Healthcare Individual & Family Plans page at CignaforHCP.com/IFP.

The information that follows is designed to provide guidance for the documentation and coding of claims for your patients with a stroke diagnosis. It is not meant to replace your judgment when caring for your patients.

General guidance

- Document findings to support diagnoses of acute stroke, personal history of stroke without sequela (late effect conditions related to the stroke), or stroke with subsequent sequela.
- Document a diagnostic statement that is compatible with International Classification of Diseases, 10th Revision (ICD-10-CM) nomenclature (terms).
- Document treatment plan and follow up. A treatment plan can be in the form of a medication, referral, diet, monitoring, and/or ordering a diagnostic exam.
- Confirm that a face-to-face or telehealth encounter is signed and dated by the clinician, including printing out the clinician's full name and credentials (e.g., MD, DO, NP, PA).

Stroke coding decision tree

Submit codes that indicate "stroke with late effects" and not codes indicating a current stroke unless the stroke occurred in the office. When coding:

- Determine if the patient had a stroke in the office. *If no, the coding should be for a historical stroke and not a current stroke.*
- Use codes for all "late effect" conditions (sequela) related to the stroke.
- Remember that sequela requires assessment of signs and symptoms.

ICD-10 stroke code categories

- **Acute stroke:** ICD-10 I63.-
Should only be used during the inpatient encounter determined by diagnostic studies.
- **History of stroke:** ICD-10 Z86.73
Should be used when there are no identifiable manifestations of acute stroke, a diagnosis of transient ischemic attack [TIA] was made, or the stroke no

longer has a specific treatment plan.

- **Stroke sequela:** ICD-10 I69.-
Should be used at the time of an ambulatory care office visit, which is considered after the acute inpatient encounter.
- **Nonspecific:** ICD-10 I63.8 and I63.9
Should not be used when the cause or site of the stroke is known.
- **Unspecified:** ICD-10 I69.30
If signs and symptoms present with "other" type of stroke, use code I69.398 and an additional code to specify the late effect (sequela) in outpatient.

Subjective documentation considerations

Ask patients if any manifestations have occurred as a **result of the acute stroke**. Questions to consider include:

- Is the patient experiencing any psychological deficits (depression, anxiety, memory issues)?
- Is the patient experiencing any neurological deficits (motor or sensory)? If yes, is the deficit or deficits:
 - Confined to one side (weakness/hemiplegia) – the left or right?
 - On both sides of the body?
 - Confined to a specific limb (monoplegia)? is the limb defined as either a dominant or non-dominant side?

Objective documentation considerations

- Confirm subjective complaints with specific examination findings (e.g., pin-prick examination, heat and cold tolerance testing, blinded agnosia testing, deep tendon reflexes).
- Direct careful attention to the specific muscle groups that are affected as a result of the acute stroke.

* Diagnosis inaccuracies that are not addressed can result in administrative sanctions and potential financial penalties.

Acute stroke codes for pre-cerebral arteries (excludes I69.3-)

ICD-10 code	Description	Additional characters and codes to use	ICD-10 code	Description	Additional characters and codes to use
I63.0-	Cerebral infarction due to thrombosis of pre-cerebral arteries	(-) Add 5th character: 0 - Unspecified pre-cerebral artery 1 - Vertebral artery 2 - Basilar artery 3 - Carotid artery 9 - Other pre-cerebral artery (-) Add 6th character, when applicable : 1 - Right artery 2 - Left artery 3 - Bilateral arteries 9 - Unspecified artery	I63.2-	Cerebral infarction due to unspecified occlusion or stenosis of pre-cerebral arteries	(-) Add 5th character: 0 - Unspecified pre-cerebral artery 1 - Vertebral artery 2 - Basilar artery 3 - Carotid artery 9 - Other pre-cerebral artery (-) Add 6th character, when applicable : 0 - Unspecified pre-cerebral artery 1 - Right artery 2 - Left artery 3 - Bilateral arteries 9 - Unspecified artery

Acute stroke codes for cerebral arteries (excludes I69.3-)

ICD-10 code	Description	Additional characters and codes to use	ICD-10 code	Description	Additional characters and codes to use
I63.3-	Cerebral infarction due to thrombosis of cerebral arteries	(-) Add 5th character: 0 - Unspecified cerebral artery 1 - Middle cerebral artery 2 - Anterior cerebral artery 3 - Posterior cerebral artery 4 - Cerebellar artery 9 - Other pre-cerebral artery	I63.6	Cerebral infarction due to cerebral venous thrombosis, non-pyrogenic	
I63.4-	Cerebral infarction due to embolism of cerebral arteries		I63.8-	Other cerebral infarction <i>e.g., Lacunar infarction</i>	(-) Add 5th character: 1 - Due to occlusion or stenosis of small artery 9 - Other cerebral infarction
I63.5-	Cerebral infarction due to unspecified occlusion or stenosis of cerebral arteries	(-) Add 6th character, when applicable : 1 - Right artery 2 - Left artery 3 - Bilateral arteries 9 - Unspecified artery	I63.9	Cerebral infarction unspecified (excludes TIA)	Stroke (NOS) not otherwise specified
			G45.9	Transient ischemic attack (TIA), unspecified	TIA

Sequela of stroke codes: Monoplegia, hemiplegia, and hemiparesis

ICD-10 code	Description	Additional characters and codes to use
I69.33-	Monoplegia of upper limb following cerebral infarction	(-) Add 6th character: 1 - Right dominant side 2 - Left dominant side 3 - Right non-dominant side 4 - Left non-dominant side 9 - Unspecified side
I69.34-	Monoplegia of lower limb following cerebral infarction	
I69.35-	Hemiplegia and hemiparesis following cerebral infarction	

Sequela of stroke codes: Other defects—history (used to indicate conditions classifiable to I60-I67)

ICD-10 code	Description
I69.30	Unspecified sequela of cerebral infarction
I69.31-	Cognitive deficits following cerebral infarction <i>Add 6th character for specific cognitive deficit separation</i>
I69.320	Aphasia following cerebral infarction
I69.321	Dysphasia following cerebral infarction
I69.322	Dysarthria following cerebral infarction
I69.323	Fluency disorder following cerebral infarction
I69.328	Other speech and language deficits following cerebral infarction
I69.390	Apraxia following cerebral infarction
I69.391	Dysphagia following cerebral infarction – <i>Use additional code to identify type of dysphagia (R13.1-)</i>
I69.392	Facial weakness following cerebral infarction
I69.393	Ataxia following cerebral infarction
I69.398	Other sequela of cerebral infarction – <i>Use additional code to identify the sign and symptom of sequela – e.g., alteration of sensation or disturbance of vision</i>
Z86.73	Personal history of transient ischemic attack (TIA), and cerebral infarction without residual deficits