New Irritant Contact Dermatitis Codes (Formerly Known as Moisture Associated Skin Damage): Why They Are Important to You
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In a Nutshell

• **Bedside care providers** are usually the ones to identify skin damage resulting from moisture on their patients.

• There has not been *(until now)* a reliable way to capture the number of patients in the US who have moisture associated skin damage.

• The way that all disease state data in the US is collected is by tracking something called **ICD-10CM codes**.

• The ICD-10CM codes for moisture related problems were *inadequate* and *inconsistently* used.

• A group of volunteers from the WOCN Society worked to get **new** ICD-10CM Codes added so that we could track and trend skin problems related to moisture in the US.

• The change is going to require that we use **slightly different words** to document these conditions. We must be role models for and teach others to use the new words.

• It's inconvenient to have to change our language, but we can do it (we have done it before). The new words are going to be with us for a long time, so **we must change**.
Irritant Contact Dermatitis
(formerly known as Moisture Associated Skin Damage)

• Definition: a spectrum of injuries to the epidermis due to exposure to various sources of moisture and irritants

• Sources of irritant contact dermatitis (ICD):
  • Incontinence (urine and feces)
  • Digestive stoma (tube, ostomy and fistula secretions)
  • Respiratory secretions (saliva)
  • Perspiration (intertrigo/intertriginous dermatitis)
  • Wound drainage
Common Signs and Symptoms of Irritant Contact Dermatitis

- Local inflammation with erythema (pink or red color or lighter or darker than usual skin tone)

- Inflamed skin has irregular border that reflects areas of contact with irritating moisture source (urine, feces, digestive secretions, mucus, saliva, perspiration, or wound drainage)

- Erosion of superficial skin layers that can result in a shiny or glistening appearance of skin

- Rash sometimes from a fungal or bacterial infection on the skin

Sources of ICD

ICD d/t Fecal, Urinary, or Dual Incontinence

• Formerly IAD/Diaper Dermatitis/Diaper Rash
• Associated with higher likelihood of pressure injury\(^8\)

ICD d/t Digestive Stoma or Fistula Secretions

• Formerly Peristoma MASD/excoriation/denudation
• Increased likelihood of infection
• Decreases ostomy pouching system wear-time, increases pain, diminishes patient confidence

ICD d/t Respiratory Secretions

• ICD d/t Respiratory Secretions

Sources of ICD

**Erythema Intertrigo**
- ICD d/t a perspiration trapped in a skinfold that cannot evaporate
- May involve friction between skin folds

**Wound Drainage**
- Formerly IAD/Diaper Dermatitis/Diaper Rash
- Associated with higher likelihood of pressure injury.ª
Significance of Adding New Codes

• Explicit ICD-10-CM coding will:
  • Establish language for accurate data capture of the diagnosis of these clinically relevant conditions not currently defined by the ICD-10CM taxonomy
  • Encourage accurate documentation of the prevalence of these forms of irritant contact dermatitis
  • Enhance reimbursement for ICD-10CM Codes for irritant contact dermatitis
  • Facilitate research by defining terms for outcomes to be measured consistently thus enabling comparisons across studies
  • Enhance education for clinicians and healthcare providers
  • Improve patient care via accurate diagnosis capture
What we must now document

Documenting Staff Should Utilize:

1. Irritant Contact Dermatitis d/t friction or contact w/bodily fluids, unspecified
2. Irritant Contact Dermatitis d/t saliva
3. Irritant Contact Dermatitis d/t fecal, urinary, or dual incontinence
4. Irritant Contact Dermatitis d/t friction or contact w/other specified body fluids (This code includes wound drainage)
5. Irritant Contact Dermatitis related to unspecified stoma or fistula
6. Irritant Contact Dermatitis related to digestive stoma or fistula
7. Irritant Contact Dermatitis related to respiratory stoma or fistula
8. Irritant Contact Dermatitis related to fecal or urinary stoma or fistula
9. Erythema Intertrigo

Coding Staff Should Then Utilize:

1. L24A0
2. L24A1
3. L24A2
4. L24A9
5. L24B0
6. L24B1
7. L24B2
8. L24B3
9. L30.4
Remember

• The use of these ICD-10 CM Codes for Irritant Contact Dermatitis (ICD) conditions will:

  • Provide standard language for ICD
    • Specific wording in documentation will assist coders with billing
  • Demonstrate value of bedside nursing specialists to assessment and intervention as WOC RN practice can more definitively be tied to appropriate coding of patient conditions
  • Link nursing specialist interventions to patient outcomes and facility billing/reimbursement
QUESTIONS

INFO@WOCN.ORG
References and Resources


References and Resources


