COVID-19: Locating the ICD-10-CA/CCI Code

Update

Change in direction: The word "lab" (in the context of COVID-19 testing) has been removed from all directive statements and notes in the *Canadian Coding Standards for Version 2022 ICD-10-CA and CCI — Addendum: Pandemics and Epidemics (COVID-19)*.

This job aid has been updated to align with this change in direction. **The information in this job aid applies to discharges on or after April 1, 2023.**

The purpose of this job aid is as follows:

1. To supplement the main source of direction regarding COVID-19 code assignment found in the *Canadian Coding Standards for Version 2022 ICD-10-CA and CCI — Addendum: Pandemics and Epidemics (COVID-19)*, which coders are to use to ensure that all requirements related to code assignment for a COVID-19–related episode of care are met.

2. To guide you to the correct code for a COVID-19–related episode of care. This job aid includes a table of all COVID-19–related codes, code titles and coding instructions,[i] as well as the associated alphabetical index and tabular list. It also includes the CCI COVID-19 vaccination code.

Table 1: ICD-10-CA COVID-19–related codes

Table 2: Confirmed COVID-19 in a newborn

Table 3: COVID-19 in pregnancy

Table 4: COVID-19 in palliative care

Table 5: CCI COVID-19–related code

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i. The coding instructions found in this job aid are limited to direction regarding mandatory code assignment, diagnosis typing, diagnosis prefix, diagnosis cluster and any special direction regarding COVID-19 code assignment that is an exception to direction found elsewhere in the coding standards.

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ICD-10-CA COVID-19–related codes

Table 1 lists the ICD-10-CA COVID-19–related emergency use codes.

Table 1   ICD-10-CA COVID-19–related codes

COVID-19–related episode of care	ICD-10-CA code and code title	Coding instructions	Alphabetical index *The text below will be reflected in the next release of ICD-10-CA, subject to minor changes prior to release.*	Tabular list *The text below will be reflected in the next release of ICD-10-CA, subject to minor changes prior to release.*
Confirmed COVID-19	U07.1 COVID-19, virus identified	• Assign U07.1 (**mandatory**) when the patient is diagnosed with an acute infection with the COVID-19 virus (SARS-CoV-2), confirmed by a positive COVID-19 test result, or when the physician or primary care provider or infection control staff documented a positive COVID-19 test result. **Note:** A COVID-19 test may include a polymerase chain reaction (PCR) test, a rapid antigen test (RAT) or a point-of-care molecular test (POCT). • Apply the diagnosis type (M, 1, 2, 3, W, X, Y) for the Discharge Abstract Database (DAD) based on the *Diagnosis Typing Definitions for DAD* coding standard or the problem type (MP or OP) for the National Ambulatory Care Reporting System (NACRS) based on the *Main and Other Problem Definitions for NACRS* coding standard. • Assign additional code(s) (**mandatory**) to identify any specific manifestations of COVID-19 as a diagnosis type (M, 1, 2, 3, W, X, Y) for the DAD or problem type (MP or OP) for NACRS. **Note:** You may use COVID-19 test results, when available, to confirm or to rule out documentation of suspected COVID-19 when the COVID-19 test results are not documented by the physician or primary care provider or by infection control staff.	**Coronavirus disease 2019 [COVID-19]** – confirmed with positive test result U07.1 – virus identified (result confirmed) U07.1 **Disease** – 2019-nCoV acute respiratory disease (see Disease, coronavirus 2019) – 2019-new Coronavirus acute respiratory disease (see Disease, coronavirus 2019) – coronavirus 2019 [COVID-19] – – confirmed with positive test result U07.1 – – virus identified (test result confirmed) U07.1 – COVID-19 – – confirmed with positive test result U07.1 – – virus identified (test result confirmed) U07.1	**U07.1 COVID-19, virus identified** **Note:** Use this code when infection with the COVID-19 virus (SARS-CoV-2) has been confirmed by a COVID-19 test result, irrespective of severity of clinical signs or symptoms. Use additional code to identify pneumonia or other manifestations. *Excludes*: • Coronavirus as the cause of diseases classified to other chapters (B97.2) • Coronavirus infection, unspecified site (B34.2) • Severe acute respiratory syndrome [SARS], unspecified (U04.9–)

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Suspected COVID-19	U07.2 COVID-19, virus not identified	• Assign U07.2 (**mandatory**) when the patient is diagnosed, clinically or epidemiologically, with an acute infection with the COVID-19 virus (SARS-CoV-2) and the COVID-19 test results are inconclusive or not available, or COVID-19 testing is not performed. **Note:** A COVID-19 test may include a polymerase chain reaction (PCR) test, a rapid antigen test (RAT) or a point-of-care molecular test (POCT). • Do **not** apply prefix Q to U07.2. • Apply the diagnosis type (M, 1, 2, 3, W, X, Y) for the DAD based on the *Diagnosis Typing Definitions for DAD* coding standard or the problem type (MP or OP) for NACRS based on the *Main and Other Problem Definitions for NACRS* coding standard. • Assign additional code(s) (**mandatory**) to identify any specific manifestations of COVID-19 as a diagnosis type (M, 1, 2, 3, W, X, Y) for the DAD or problem type (MP or OP) for NACRS. **Note:** You may use COVID-19 test results, when available, to confirm or to rule out documentation of suspected COVID-19 when the COVID-19 test results are not documented by the physician or primary care provider or by infection control staff.	**Coronavirus disease 2019 [COVID-19]** – clinical diagnosis U07.2 – suspected (clinically or epidemiologically diagnosed) (probable) U07.2 – virus not identified (clinically or epidemiologically diagnosed) (probable) (suspected) U07.2 **Disease** – 2019-nCoV acute respiratory disease (see Disease, coronavirus 2019) – 2019-new Coronavirus acute respiratory disease (see Disease, coronavirus 2019) – coronavirus 2019 [COVID-19] – – clinical diagnosis U07.2 – – suspected (clinically or epidemiologically diagnosed) (probable) U07.2 – – virus not identified (clinically or epidemiologically diagnosed) (probable) (suspected) U07.2 – COVID-19 – – clinical diagnosis U07.2 – – suspected (clinically or epidemiologically diagnosed) (probable) U07.2 – – virus not identified (clinically or epidemiologically diagnosed) (probable) (suspected) U07.2	**U07.2 COVID-19, virus not identified** **Note:** Use this code when COVID-19 is diagnosed clinically or epidemiologically but a COVID-19 test result is inconclusive, not available or testing is not performed. Use additional code to identify pneumonia or other manifestations. *Excludes:* Coronavirus infection, unspecified site (B34.2) COVID-19: • Confirmed by COVID-19 testing (U07.1) • Special screening examination (Z11.5) • Suspected but ruled out by a negative COVID-19 test result (Z03.8)

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Multisystem inflammatory syndrome (MIS) associated with COVID-19	U07.3 Multisystem inflammatory syndrome associated with COVID-19	• Assign U07.3 (**mandatory**) when the patient is diagnosed with MIS associated with COVID-19. • Apply the diagnosis type (M, 1, 2, 3, W, X, Y) for the DAD based on the *Diagnosis Typing Definitions for DAD* coding standard or the problem type (MP or OP) for NACRS based on the *Main and Other Problem Definitions for NACRS* coding standard. **Note:** MIS associated with COVID-19 includes cytokine storm and Kawasaki-like syndrome; it can be diagnosed in both children and adults. • Assign additional code(s) (**mandatory**) to identify any specific manifestations of COVID-19 as a diagnosis type (M, 1, 2, 3, W, X, Y) for the DAD or problem type (MP or OP) for NACRS.	**Multisystem inflammatory syndrome associated with COVID-19 (in adults (MIS-A)) (in children (MIS-C)) U07.3** **Storm** – cytokine storm, associated with COVID-19 U07.3 **Syndrome** – cytokine storm, associated with COVID-19 U07.3 – Kawasaki-like, associated with COVID-19 U07.3 – pediatric inflammatory multisystem (PIMS) U07.3 – multisystem inflammatory – – associated with COVID-19 (adult) (child) U07.3	**U07.3 Multisystem inflammatory syndrome associated with COVID-19** Includes: Temporally associated with COVID-19: • Cytokine storm (syndrome) • Kawasaki-like syndrome • Paediatric Inflammatory Multisystem Syndrome [PIMS] • Multisystem Inflammatory Syndrome in Children [MIS-C] *Excludes:* Mucocutaneous lymph node syndrome [Kawasaki] (M30.3)

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Post COVID-19 condition	U07.4 Post COVID-19 condition	• Assign U07.4 (**mandatory**) when the physician or primary care provider documented the patient as having a condition that's related to or associated with a past COVID-19 infection (i.e., resolved acute COVID-19 infection). • Do **not** apply prefix 7 to U07.4. • Apply diagnosis type (3) for the DAD and OP for NACRS to U07.4. • Do **not** apply diagnosis type (M) for the DAD or MP for NACRS to U07.4. • Assign (**mandatory**) additional code(s) for the specific condition(s) or symptom(s). • Apply the diagnosis type (M, 1, 2, 3, W, X, Y) for the DAD based on the *Diagnosis Typing Definitions for DAD* coding standard or the problem type (MP or OP) for NACRS based on the *Main and Other Problem Definitions for NACRS* coding standard to the ICD-10-CA code(s) for the specific condition(s) or symptom(s). • Apply prefix 7 (**mandatory**) to the ICD-10-CA code(s) that identify each specific post COVID-19 condition or symptom.	**Post COVID-19 condition** U07.4	**U07.4 Post COVID-19 condition** **Note:** This code should never be used in primary coding. This code is for use in multiple coding to identify an established relationship between a specific condition and post acute COVID-19 infection. Use additional code to identify the specific condition. *Excludes:* Personal history of COVID-19 (U07.5)

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Personal history of COVID-19	U07.5 Personal history of COVID-19	• Assign U07.5 (**mandatory**) when the documentation indicates that the patient has a history (confirmed or suspected) of COVID-19. **Note:** Documentation indicating a history of COVID-19 is not limited to physician documentation. • Apply diagnosis type (3) for the DAD and OP for NACRS. • Do **not** apply diagnosis type (M) for the DAD or MP for NACRS to U07.5.	**History (personal) (of)** – COVID-19 (confirmed) (suspected) U07.5 – disease or disorder (of) Z87.8 – – infectious Z86.18 – – – COVID-19 (SARS-CoV-2) (confirmed) (suspected) U07.5	**U07.5 Personal history of COVID-19** *Excludes:* Post COVID-19 condition (U07.4)
Need for vaccination against COVID-19	U07.6 Need for immunization against COVID-19	• **NACRS direction:** Assign U07.6 (mandatory) when the sole purpose of the ambulatory care encounter is the administration of a COVID-19 vaccine. • Apply MP to U07.6. • Do **not** assign U07.6 when a patient receives a COVID-19 vaccine during an acute care inpatient episode of care. • **DAD acute care inpatient direction:** Administration of the COVID-19 vaccine is classified as an intervention. The CCI code is 8.IM.70.HA-ZZ Immunization (to prevent) severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] by intramuscular [IM] injection of agent or substance NEC. **Note:** The decision to assign 8.IM.70.HA-ZZ when a vaccination against COVID-19 is given is made at the jurisdiction or facility level based on data needs.	**Vaccination** – prophylactic (against) Z26.9 – – COVID-19 (SARS-CoV-2) U07.6	**U07.6 Need for immunization against COVID-19** **Note:** This code is for use when a person who may or may not be sick, encounters the health services for the specific purpose of receiving the COVID-19 vaccine. *Includes:* Prophylactic COVID-19 vaccination *Excludes:* Immunization not carried out (Z28.–)

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Adverse reaction to a COVID-19 vaccine	U07.7 COVID-19 vaccines causing adverse effects in therapeutic use	• When the patient is diagnosed with an adverse reaction in therapeutic use due to the COVID-19 vaccine, assign U07.7 as an **external cause code** with an additional ICD-10-CA code(s) to identify the specific reaction. • Apply diagnosis type (9) for the DAD and OP for NACRS to U07.7. • Apply a diagnosis cluster (**mandatory**) to the set of codes that denote an adverse reaction in therapeutic use due to the COVID-19 vaccine. **Notes:** • When the specific adverse reaction in therapeutic use **is documented** (i.e., a reaction to the substance/ingredients), assign an ICD-10-CA code that describes the **specific** reaction. • When the specific reaction **is not documented**, assign T80.6 *Other serum reactions*.	**External Cause Index** Sequelae (of) Y89.9 – drugs and biologicals causing adverse effects in therapeutic use (classifiable to Y40–Y59, U07.7) Y88.0 **Table of Drugs** **COVID-19 vaccine:** Adverse effect in therapeutic use U07.7 **Vaccine NEC:** COVID-19 vaccine — Adverse effect in therapeutic use U07.7	**U07.7 COVID-19 vaccines causing adverse effects in therapeutic use** **Note:** This code is to be used as an external cause code (i.e., under category Y59 *Other and unspecified vaccines and biological substances*). A code from another chapter must be assigned first to indicate the nature of the adverse effect. *Includes:* Correct administration of COVID-19 vaccine in prophylactic therapeutic use as the cause of any adverse effect *Excludes:* Accidents in the technique of administration of drugs, medicaments and biological substances in medical and surgical procedures (Y60–Y69)

Confirmed COVID-19 in a newborn

Table 2   Confirmed COVID-19 in a newborn

When an acute COVID-19 infection in a newborn is confirmed by a positive COVID-19 swab taken *less than or equal to 48 hours after birth*, assign, mandatory . . .	When an acute COVID-19 infection in a newborn is confirmed by a positive COVID-19 swab taken more than 48 hours after birth, assign, mandatory . . .
• **P35.8** *Other congenital viral diseases* as a significant diagnosis type (M), (1), (W), (X) or (Y); and • **U07.1** *COVID-19, virus identified* as a diagnosis type (0).	• **U07.1** *COVID-19, virus identified* as a diagnosis type (2). **Exception:** When there is physician documentation to indicate that the confirmed COVID-19 infection was acquired in utero or during birth.

Notes

The 48-hour timeline is based on when the swab is taken, not when the COVID-19 test results are available.

An acute COVID-19 infection in a newborn is a condition that requires supervision and/or specific monitoring and puts the baby's health and/or life at risk. A newborn with an acute COVID-19 infection is always considered unhealthy. See also the coding standard *Diagnosis Typing Definitions for DAD*.

COVID-19 in pregnancy

See the coding standard *Complicated Pregnancy Versus Uncomplicated Pregnancy*.

Table 3   COVID-19 in pregnancy

Confirmed COVID-19 in pregnancy is classified to . . .	Suspected COVID-19 in pregnancy is classified to . . .
• **O98.5–** *Other viral diseases complicating pregnancy, childbirth and the puerperium* as a significant diagnosis type/main problem or other problem; and • **U07.1** *COVID-19, virus identified* (**mandatory**) as diagnosis type (3)/other problem.	• **O98.5–** *Other viral diseases complicating pregnancy, childbirth and the puerperium* as a significant diagnosis type/main problem or other problem; and • **U07.2** *COVID-19, virus not identified* (**mandatory**) as diagnosis type (3)/other problem.

Note

Do **not** assign **O98.5–** and **U07.2** when COVID-19 is suspected but ruled out by a negative COVID-19 test result.

COVID-19 in palliative care

See the coding standard *Palliative Care*.

Table 4 COVID-19 in palliative care

When a patient with a diagnosis of COVID-19 is admitted for the *sole purpose* of receiving palliative care, assign . . .
• **Z51.5** *Palliative care* (**mandatory**) as diagnosis type (M); and
• Additional ICD-10-CA code(s) to identify the palliative condition(s) (i.e., COVID-19 [**mandatory**] as diagnosis type [3]).

CCI COVID-19–related code

Table 5 identifies the CCI COVID-19–related vaccination code.

Table 5 CCI COVID-19–related code

COVID-19–related episode of care	CCI code and code title	Coding instructions
Vaccination against COVID-19	8.IM.70.HA-ZZ *Immunization (to prevent) severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] by intramuscular [IM] injection of agent or substance NEC*	The decision to assign this code is made at the jurisdiction or facility level, based on data needs.

Additional resources

- April 2023 update of *Canadian Coding Standards for Version 2022 ICD-10-CA and CCI — Addendum: Pandemics and Epidemics (COVID-19)*
- *Mapping COVID-19 Codes: ICD-10-CA to WHO's Base ICD-10*
- CIHI's COVID-19 resources web page

Still need assistance?

If you need assistance coding a specific case that does not align with the directions above, submit a question and the de-identified, pertinent clinical documentation to *Classifications coding (CED-DxS, ICD-10-CA, CCI, Canadian Coding Standards)* via eQuery.

✉ **classifications@cihi.ca**

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