
Rehabilitation episodes of care: Top 10 principal diagnosis codes 2014/2015 to 2016/2017

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Published by the State of Queensland (Queensland Health), February, 2018



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What is the purpose of this Statbite? This report demonstrates the real impact of the changes in the coding standard for rehabilitation episodes of care that was implemented as part of The International Statistical Classification for Diseases and Health Problems, Tenth Revision, Australian Modification (ICD-10-AM) Ninth Edition on 1 July 2015.

What are the implications for users of the data?

When analysing data relating to principal diagnosis, consideration should be given to the impact of these changes and to the selection of care types used for deriving counts.

The implementation of The International Statistical Classification for Diseases and Health Problems, Tenth Revision, Australian Modification (ICD-10-AM) Ninth Edition on 1 July 2015 and subsequent changes to the Australian Coding Standards (ACS) relating to rehabilitation episodes of care have significantly impacted the range of diagnosis codes being assigned as principal diagnosis.

Prior to 1 July 2015, it was mandated that a code from the range Z50.- *Care involving use of rehabilitation procedures* was to be assigned as the principal diagnosis code for rehabilitation episodes of care. The changes included in the ICD-10-AM and ACS Ninth Edition required the underlying condition necessitating rehabilitation care to be the principal diagnosis and the Z50.- diagnosis code to be assigned as an additional diagnosis code. See [Technical report #18: Impact of changes to coding of rehabilitation episodes of care](#) for further supporting and background information.

These changes has seen the range of diagnosis codes being assigned as principal diagnosis codes for rehabilitation episodes of care shift significantly from Z50.- *Care involving use of rehabilitation procedures* (Table 1). Interestingly, the top 10 diagnosis codes being assigned as the rehabilitation episode of care principal diagnosis code are the same for 2015/2016 and 2016/2017, though their ranking differs slightly between years.

Table 1: Principal diagnosis code for admitted rehabilitation episodes of care, public and private hospitals Queensland, 2014/2015 to 2016/2017

Diagnosis code	2014/2015	2015/2016	2016/2017
G20 Parkinson's disease		2,289 (6)	2,782 (5)
G81.9 Hemiplegia, unspecified		1,816 (9)	2,418 (7)
I25.11 Atherosclerotic heart disease native coronary artery		2,110 (7)	2,546 (6)
I63.9 Cerebral infarction unspecified		1,965 (8)	1,986 (9)
M16.1 Other primary coxarthrosis		2,850 (4)	3,451 (3)
M17.1 Other primary gonarthrosis		7,700 (1)	9,211 (1)
M54.5 Low back pain		2,962 (3)	2,960 (4)
R26.8 Other & unspecified abnormalities of gait & mobility		4,426 (2)	5,077 (2)

Diagnosis code	2014/2015	2015/2016	2016/2017
<i>R29.6 Tendency to fall, not elsewhere classified (NEC)</i>		1,322 (10)	1,296 (10)
<i>R53 Malaise and fatigue</i>		2,418 (5)	2,103 (8)
<i>Z50.0 Cardiac rehabilitation</i>	4,064 (4)		
<i>Z50.1 Other physical therapy</i>	5,072 (3)		
<i>Z50.4 Psychotherapy, not elsewhere classified</i>	91 (7)		
<i>Z50.5 Speech therapy</i>	380 (5)		
<i>Z50.7 Occupational therapy & vocational rehabilitation NEC</i>	287 (6)		
<i>Z50.8 Care involving use of other rehab procedure</i>	12,473 (2)		
<i>Z50.9 Care involving use of rehab procedure, unspecified</i>	52,810 (1)		

Conditions such as osteoarthritis of the hip (M16.1 *Other primary coxarthrosis*) and knee (M17.1 *Other primary gonarthrosis*) are included within the top 10 principal diagnosis codes as patients who undergo hip or knee joint replacement frequently transition to a rehabilitation episode of care after the acute surgical phase of their care has been completed.

Patients with a principal diagnosis code of *I25.11 Atherosclerotic heart disease native coronary artery* may be undergoing rehabilitation to assist in their recovery post interventional cardiology procedure, coronary artery bypass surgery or to improve their general cardiac health status.

When analysing data relating to principal diagnosis or rehabilitation episodes of care, consideration should be given to the impact of these changes and to the selection of care types used for deriving counts.

It is recommended that anyone intending to analyse data related to principal diagnosis or rehabilitation episodes of care should contact the Statistical Services Branch for further information.

Conclusion

Changes to coding standards as part of ICD-10-AM Ninth Edition have led to a significant shift in the assignment of principal diagnosis codes for rehabilitation episodes of care and now include the assignment of codes for many conditions and diseases.

Care should be taken when comparing trends in assignment of principal diagnosis codes for admitted rehabilitation episodes of care pre and post 2015/2016 in light of these changes.