

ICD-10 Codes (Effective October 1, 2018)

As of October 1, 2015, Medicare claims must be submitted with a valid ICD-10 code

To assist you with these medical billing code conversions pertaining to overactive bladder (OAB) and other relevant diagnoses, please refer to the grid below.

| ICD-9 CODE ¹ | ICD-10 CODE ² (Effective 10/1/2018) | DESCRIPTION ³ |
|-------------------------------------|---|---|
| 596.51 (“Hypertonicity Of Bladder”) | N32.81 | Overactive Bladder (OAB)/Hyperactive Detrusor Muscle <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • Associated with detrusor muscle overactivity, or excessive contraction of the smooth muscle in the wall of the urinary bladder, resulting in a sudden, strong urge to expel moderate to large amounts of urine before the bladder is full • May involve symptoms including urge incontinence, urinary urgency, frequency, and nocturia |
| 788.30 | R32 | Urinary Incontinence – Unspecified (including Enuresis, Urethral Sphincter Insufficiency, Urethral Sphincter Incontinence, Bladder/Sphincter Weakness) |
| 788.41 (“Urinary Frequency”) | R35.0 | Frequency of Micturition/Urinary Frequency |
| 788.43 (“Nocturia”) | R35.1 | Nocturia |
| 788.63 | R39.15 | Urgency of Urination/Micturition Urgency <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • The strong desire to urinate • A sudden, strong urge to expel moderate to large amounts of urine before the bladder is full |
| 625.6 (female) / 788.32 (male) | N39.3 | Urinary Incontinence – Stress (Female and Male) <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • Associated with impaired urethral closure (malfunction of the urethral sphincter) which allows small amounts of urine leakage when intra-abdominal pressure on the bladder is increased by sneezing, coughing, laughing, lifting, standing from a sitting position, climbing stairs, etc • Urine leakage resulting from an increase in intra-abdominal pressure on a bladder that is not overdistended and is not the result of detrusor contractions |
| 788.31 | N39.41 | Urinary Incontinence – Urge/Urinary Urgency <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • Characterized by abrupt urgency to urinate, frequency, and nocturia (part of the OAB diagnosis) • Associated with detrusor muscle overactivity (excessive contraction of the smooth muscle in the wall of the urinary bladder), resulting in a sudden, strong urge to expel moderate to large amounts of urine before the bladder is full • May be age-related or have neurological causes or other causes such as bladder infection, urethral irritation, etc • The resident can feel the need to void, but is unable to inhibit voiding long enough to reach and sit on the commode |

(Continued on next page)

| ICD-9 CODE ¹ | ICD-10 CODE ² (Effective 10/1/2018) | DESCRIPTION ³ |
|---|---|--|
| 788.34 (“Incontinence Without Sensory Awareness”) | N39.42 | Urinary Incontinence – Unaware/Incontinence Without Sensory Awareness |
| 788.35 | N39.43 | Urinary Incontinence – Post-Void Dribbling |
| 788.36 (“Nocturnal Enuresis”) | N39.44 | Urinary Incontinence – Nocturnal/Nocturnal Enuresis |
| 788.37 (“Continuous Leakage”) | N39.45 | Urinary Incontinence – Continuous |
| 788.33 (“Mixed Incontinence”) | N39.46 | Urinary Incontinence – Mixed (Stress and Urge) <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • The combination of stress incontinence and urge incontinence |
| 788.38 | N39.490 | Urinary Incontinence – Overflow <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • Associated with leakage of small amounts of urine when the bladder has reached its maximum capacity and has become distended from urine retention • Symptoms may include: weak stream, hesitancy, or intermittency; dysuria; nocturia; frequency; incomplete voiding; frequent or constant dribbling • Hypotonic bladder may be caused by outlet obstruction • Post-void residual (PVR) volume (the amount of urine remaining in the bladder within 5 to 10 minutes following urination) exceeds 200 ml |
| 788.39 (“Other Urinary Incontinence”) | N39.491* | Coital Incontinence* |
| | N39.492* | Postural (Urinary) Incontinence* |
| | N39.498 | Urinary Incontinence – Other Specified (including total and reflex incontinence) |
| 788.91 | R39.81 | Urinary Incontinence – Functional <u>Relevant Clinical Information</u> <ul style="list-style-type: none"> • Refers to loss of urine that occurs in residents whose urinary tract function is sufficiently intact that they should be able to maintain continence, but who cannot remain continent because of external factors (eg, inability to utilize the toilet facilities in time) • Refers to incontinence that is secondary to factors other than inherently abnormal urinary tract function • May be related to physical weakness or poor mobility/dexterity, cognitive problems, various medications, or environmental impediments |
| 307.6 (“Enuresis Not Due To A Substance Or Known Physiological Condition”) | F98.0 | Urinary Incontinence – Nonorganic Origin/Enuresis Not Due To A Substance Or Known Physiological Condition/Enuresis – Functional/Enuresis – Nonorganic Origin |

*ICD-10 codes highlighted in blue are new codes effective October 1, 2018.

Sources: 1. Centers for Medicare & Medicaid Services. ICD-9-CM Diagnosis and Procedure Codes: Abbreviated and Full Code Titles. <https://www.cms.gov/medicare/coding/ICD9providerdiagnosticcodes/codes.html>. Updated May 20, 2014. Accessed October 4, 2018. 2. Centers for Medicare & Medicaid Services. 2019 ICD-10-CM. <https://www.cms.gov/Medicare/Coding/ICD10/2019-ICD-10-CM.html>. Updated September 18, 2018. Accessed October 4, 2018. 3. Centers for Medicare & Medicaid Services. CMS Manual System: Pub. 100-07 State Operations Provider Certification. <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/r8som.pdf>. Accessed October 4, 2018.