

## PHYSICIAN FAQs

### **How many ICD codes are there to choose from when determining a patient's diagnosis?**

There are over 65,000 ICD-10 codes that can be used to describe a resident's diagnostic status.

### **Are all ICD codes used to determine reimbursement?**

No. More than 28,000 of these codes, approximately 42%, will NOT qualify residents for ANY reimbursement for their skilled SNF services. In general, the 28,000+ codes that do not qualify for reimbursement are not specific enough.

### **How is a physician involved with the determination of payment in PDPM?**

A physician's expertise will be needed primarily to determine the diagnoses of the patient using ICD coding. While the expectation is not for physicians to memorize the 36,000-plus codes that do qualify residents for skilled services, SNF providers need physicians' support to ensure that the codes that are identified are as SPECIFIC as possible.

### **What if more clarification or additional codes are needed to describe a resident?**

Under PDPM, physicians may receive requests for additional codes and/or clarification of codes that would potentially best describe each unique resident once they are admitted. It is important to understand the need for such requests and the value of responding to them in as timely a manner as possible. Only a physician is authorized to add a diagnosis code into a patient's medical record.

**Questions about this information? Contact [PDPM@AegisTherapies.com](mailto:PDPM@AegisTherapies.com) or visit our Resource Center for more information at [AegisTherapies.com/Resources](https://www.aegistherapies.com/Resources).**