

2022 AMA Coding Guidelines for Social Determinants of Health (SDoH)

New American Medical Association (AMA) Coding Guidelines

At Carolina Complete Health, we work to improve not only the health of our members, but also the economic and social issues that can act as barriers to proper care. Social factors, including education, social supports, and poverty, can affect a person's risk factors for premature death and life expectancy.

Assessing the impacts of SDoH is essential to the achievement of greater health equity. The first step to improving health equity is to measure it:

- **New AMA Coding Guidelines** - *Effective January 1, 2021*
 - New AMA coding guidelines allow providers to use ICD-10-CM Z55-Z65 SDoH codes as a reason for moderate risk under Medical Decision Making (MDM) when coding for office or other outpatient services. Examples of "Diagnosis or treatment significantly limited by SDoH" may be a determinant factor in MDM "Moderate risk of morbidity from additional diagnostic testing and treatment" (www.ama-assn.org/system/files/2019-06/cpt-revised-mdm-grid.pdf). The addition of SDoH into the MDM Grid revision for 2021 can have a significant impact on proper payment, population health, and disease management.
- **How to Document SDoH**
 - Discussing SDoH with your patients is the first step in helping to address social risk. ***When you submit claims, please add the appropriate supplemental ICD-10 diagnosis codes that identify SDoH.*** Utilizing these codes will allow providers and Carolina Complete Health to collect data and identify solutions that best align with the patient's needs.
- **Commonly Used SDoH ICD-10 Codes (Refer to the current year ICD-10 CM manual for additional codes and guidelines.)**
 - The Centers for Medicare and Medicaid Services (CMS) [released a report](#) in January 2020 stating that Z55-Z65, assess and help account for patients' social determinants of health (SDoH). SDoH refer to conditions an individual experiences that include aspects of their social, physical, and economic environment. SDoH can cause health inequalities and are important predictors of clinical care. Codes Z55-Z65 break down into sub-codes that can provide a more detailed reporting of SDoH.

New and Revised SDOH Z Codes for Fiscal Year 2022

ICD-10	Description
Z55.5	Less than a high school diploma
Z58	Problems related to physical environment
Z58.6	Inadequate drinking water supply
Z59.00	Homelessness unspecified
Z59.01	Sheltered homelessness
Z59.02	Unsheltered homelessness
Z59.4	Revised from “Lack of adequate food and safe drinking water” to Z559.4 “Lack of adequate food”
Z59.41	Food insecurity
Z59.48	Other specific lack of adequate food
Z59.81	Housing instability, housed
Z59.811	Housing instability, housed with risk of homelessness
Z59.812	Housing instability, housed, homelessness in past 12 months
Z59.819	Housing instability, housing unspecified
Z59.89	Other problems related to housing and economic circumstances.

NC Medicaid Update:

Effective April 1, 2023, NC Medicaid is updating its guidance around billable codes for social drivers of health.

An update to the ICD-10-CM replaces Z59.1 (Inadequate Housing) with a set of more specific codes. As of April 1, 2023, NC Medicaid expects providers to use Z59.10 (Inadequate Housing, Unspecified) in place of Z59.1. This code should be used if a member responds “Yes” to the question “Are you worried about losing your housing?”

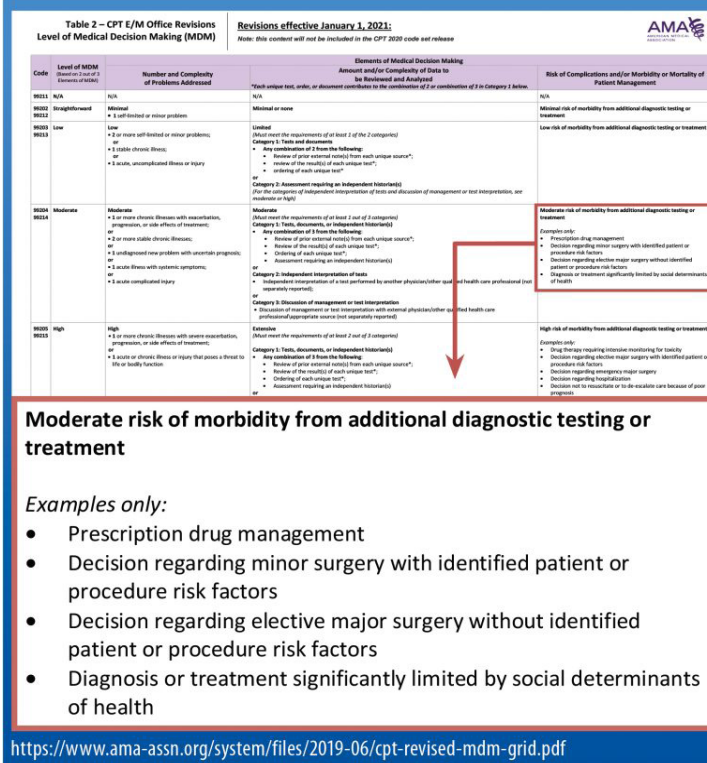
Additional guidance can be found in the March 30, 2023 Medicaid Bulletin {Update to Billable Codes Used for Social Drivers of Health} {<https://medicaid.ncdhhs.gov/blog/2023/03/30/update-billable-codes-used-social-drivers-health>}

ICD-10	Description	Number of Sub-Codes
Z55	Problems related to education and literacy	7
Z56	Problems related to employment and unemployment	12
Z57	Occupational exposure to risk factors	12
Z59	Problems related to housing and economic circumstances	10
Z60	Problems related to social environment	7
Z62	Problems related to upbringing	24
Z63	Other problems related to primary support group, including family circumstances	14
Z64	Problems related to certain psychosocial circumstances	3
Z65	Problems related to other psychosocial circumstances	8

Table 2 – CPT E/, Office Revisions Level of Medical Decision Making (MDM)

Table 2 – CPT E/M Office Revisions Level of Medical Decision Making (MDM) | Revisions effective January 1, 2021

Note: this content will not be included in the CPT 2020 code set release



Code	Level of MDM (Based on 2 out of 3 Elements of MDM)	Number and Complexity of Problems Addressed	Elements of Medical Decision Making (Amount and/or Complexity of Data to be Reviewed and Analyzed)	Risk of Complications and/or Morbidity or Mortality of Patient Management
9911	N/A	N/A	N/A	N/A
9922	Strategic/Forward	Minimal • 1 well-fleshed or minor problem	Minimal or none	Minimal risk of morbidity from additional diagnostic testing or treatment
9923	Low	• 2 or more self-limited or minor problems, or • 1 stable chronic illness, or • 1 acute, uncomplicated illness or injury	Category 1: Tests and documents • Any combination of 3 from the following: • Review of prior external notes(s) from each unique source* • Review of the results of each unique test* • Ordering of each unique test* Category 2: Assessment requiring an independent historical(s) (For the category of independent interpretation of tests and discussion of management or test interpretation, see moderate or high)	Low risk of morbidity from additional diagnostic testing or treatment
9924	Moderate	• 1 or more chronic illnesses with exacerbation, progression, or side effect of treatment, or • 2 or more stable chronic illnesses, or • 1 undiagnosed new problem with uncertain prognosis, or • 1 acute illness with systemic symptoms, or • 1 acute complicated injury	Category 1: Tests, documents, or independent historical(s) • Any combination of 3 from the following: • Review of prior external note(s) from each unique source* • Review of the results of each unique test* • Assessment requiring an independent historical(s) Category 2: Independent interpretation of tests • Independent interpretation of a test performed by another physician/other qualified health care professional (not necessarily separately reported) Category 3: Discussion of management or test interpretation • Discussion of management or test interpretation with external physician/other qualified health care professional (separately reported)	Moderate risk of morbidity from additional diagnostic testing or treatment • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health
9925	High	• 1 or more chronic illnesses with severe exacerbation, progression, or side effect of treatment, or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	Category 1: Tests, documents, or independent historical(s) • Any combination of 3 from the following: • Review of prior external note(s) from each unique source* • Review of the results of each unique test* • Ordering of each unique test* Category 2: Assessment requiring an independent historical(s) or Category 3: Discussion of management or test interpretation • Discussion of management or test interpretation with external physician/other qualified health care professional (separately reported)	High risk of morbidity from additional diagnostic testing or treatment Complex only: • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization • Decision not to resuscitate or to discontinue care because of poor prognosis

Moderate risk of morbidity from additional diagnostic testing or treatment

Examples only:

- Prescription drug management
- Decision regarding minor surgery with identified patient or procedure risk factors
- Decision regarding elective major surgery without identified patient or procedure risk factors
- Diagnosis or treatment significantly limited by social determinants of health

<https://www.ama-assn.org/system/files/2019-06/cpt-revised-mdm-grid.pdf>

Carolina Complete Health SDoH and Community Resources

Providers can use the following resources to mitigate SDoH gaps for their patients:

- **Housing Resource Supports** – Housing Management Specialists connect members to needed community resources to support housing needs.
- **My Healthy Balance** – Provides eligible members up to \$120 per year for healthy foods at Walmart (eligibility triggered by CNS/SDoH mini-screener.)
- **NCCARE360** – A comprehensive platform [provided by Unite Us] to support SDoH referrals across the State. Access available to all stakeholders, with seamless tracking of client referrals by referral agent and all involved service providers. NCCARE360 is a platform with programs available where providers can make referrals from within. <https://www.carolinacompletehealth.com/vas>
- **FindHelp.org** is a free resource that helps locate support services, including food pantries, residential housing assistance, transportation, and other assistance. Information is quick and easy to use. Simply enter the beneficiary’s zip code. Aunt Bertha also off
- **United Way 2-1-1** provides access to community resources for housing, food, medical supplies, utility assistance, health and insurance, caregiver services, employment, tax preparation, mental health, dental care, veteran services, prescriptions, parenting education, and more. It is a free, confidential, 24/7 resource for information and referrals when someone you know needs help. Resources are available through United Way organizations throughout the state. Dial 2-1-1 or visit <https://www.211.org>.