Healthcare entities that have encountered patients with new or residual symptoms or conditions of a past COVID-19 infection, what has been coined “long COVID,” should be aware that a new code will be available effective October 1, 2021, to report this condition. Instead of code B94.8 Sequelae of other specified infectious and parasitic diseases, a new, more specific code, U09.9 Post COVID-19 condition, unspecified, will be used. Sequencing will remain the same, with code U09.9 assigned as a secondary diagnosis following the residual or newly manifested symptom or condition code(s).

Despite having a new code, determining whether the patient is in the acute or active phase of a COVID-19 infection or experiencing post COVID-19 manifestations still poses a challenge. Many of the symptoms experienced during an active infection are the same as those experienced after the active infection has resolved, with the symptom continuing to affect the patient. Some symptoms or conditions may not develop until weeks or months following resolution of the active infection. Documentation will need to be clear to code these encounters properly and accurately.

To complicate matters further, there may be instances when a patient who has had a previous COVID-19 infection and is still experiencing residual symptoms or sequelae, becomes reinfected with COVID-19. Codes U07.1 and U09.9 can be reported together in these instances. Any associated symptoms or conditions related to post COVID-19 or the active COVID-19 infection should be coded in addition to these two codes.

To assist coders in coding post COVID-19 conditions beginning October 1, 2021, chapter 1 of the ICD-10-CM Official Guidelines for Coding and Reporting has been updated. One new guideline has been added specific to post COVID-19, while other guidelines within this chapter have been revised.