

HNS – Information on External Cause Codes

HNS providers are not required to report external cause codes, although physicians are strongly encouraged to do so because the codes provide valuable data research and evaluation of injury prevention strategies.

If you choose to report an external cause code, it is important to note that you can never submit an external cause code by itself; it always must have a corresponding **principal diagnosis code**.

There are four different types of external cause codes. Each code answers one of the following questions:

- How did the injury or condition happen?
- Where did it happen?
- What was the patient doing when it happened?
- Was it intentional or unintentional?

External cause codes define the manner of the injury, the mechanism, the place of occurrence of the event, the activity, and the status of the person at the time the injury occurred.

- Manner refers to whether the cause of injury was unintentional/accidental, self-inflicted, assault, or undetermined.
- Mechanism describes how the injury occurred such as a motor vehicle accident, fall, contact with a sharp object or power tool, or being caught between moving objects.
- Place identifies where the injury occurred, such as a personal residence, playground, street, or place of employment.
- Activity indicates the activity of the person at the time the injury occurred such as swimming, running, bathing or cooking.
- External cause status is used to indicate the work or non-work status of the person at the time death or injury occurred such as work done for pay, military activity, volunteer activity, or leisure activity.

You can assign as many external cause codes as necessary to explain the patient's condition to the fullest extent possible. As a general rule, you only need to report external cause codes for the initial encounter. Typically, you would only report place of occurrence, activity, and external cause status codes during your initial evaluation of the patient. However, there are a handful of codes – particularly ones that describe how an injury happened – that you can report more than once. These codes are usually ones that require a seventh character designating the encounter type (e.g., A, D, or S).

If you submit multiple external cause codes for a single diagnosis code, you should order them according to significance. In other words, the first cause code you list should be the one that describes the cause or intent most closely related to the principal diagnosis.