

New ICD Code for Sepsis Survivors to Transform Post-Acute Care



Renee Hewitt, Oct 22, 2024

Starting October 1, the Centers for Disease Control and Prevention (CDC) is implementing a significant new diagnostic code, “Encounter for Sepsis Aftercare” (z51A), which will have a far-reaching impact on the care of sepsis survivors both nationally and globally. This update comes at a crucial time, as sepsis remains a life-threatening condition affecting millions of Americans each year.

Sepsis, triggered by an extreme response to infection, impacts approximately 1.7 million Americans annually. Alarming, about 40% of those who survive sepsis find themselves readmitted to the hospital within 90 days. In fact, between one-third and one-half of these readmissions occur due to sepsis recurrence, and nearly 50% of survivors experience long-term physical or psychological effects.

Breakthrough research from the [Center for Home Care Policy & Research](#) at [VNS Health](#) and the [University of Pennsylvania School of Nursing](#) (Penn Nursing) highlighted the need for a new ICD-10 code. A study analyzing the records of over 165,000 sepsis survivors entering home care revealed a startling fact: sepsis was noted in admission assessments only 7% of the time. This raised critical questions about whether home health providers were even aware of a patient’s sepsis diagnosis.

“Our work has shown that timely attention by home care and outpatient clinicians is [highly effective](#) for [sepsis survivors](#),” said Kathryn H. Bowles, PhD, RN, Director of the VNS Health Center for Home Care Policy & Research. “It is critically important to communicate sepsis survivorship across transitions in care because, among those readmitted from home health care, one-third occur in the first seven days. We are hopeful this new ICD code will direct the necessary attention to sepsis survivors and improve outcomes for the [1.7 million Americans](#) who encounter sepsis each year.”

The study also identified risk factors associated with early readmission among sepsis survivors and provided compelling evidence of a communication gap between acute and post-acute care providers. Interviews conducted at 16 hospitals and five affiliated home health agencies revealed that the absence of a diagnostic code hindered home health personnel from recognizing sepsis as a significant factor in a patient's recovery plan.

This oversight has profound implications, as it compromises the quality of care that sepsis survivors receive after leaving the hospital. With one-third and one-half of readmissions attributed to sepsis recurrence, timely follow-up care is essential.

Following the publication of these findings, Dr. Bowles and her team spearheaded an advocacy initiative to persuade the CDC of the necessity for this new diagnostic code. Their efforts culminated in a formal presentation to a CDC committee in March 2023, ultimately leading to the acceptance of the new ICD-10 code announced in July.

As of today, the introduction of the z51A code represents a critical step forward in enhancing the quality of care for sepsis survivors. It will alert home care clinicians and post-acute care providers when a patient is discharged after hospitalization for sepsis, ensuring that they receive appropriate attention and monitoring during their recovery.

Implementing this new code marks a pivotal moment in healthcare practice and protocol, fostering better communication and care transitions for sepsis survivors. With this landmark change, there is hope for improved health outcomes for the millions affected by sepsis each year.

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