

Internal Medicine Coding Alert

Diagnosis Coding: Do not Ignore E codes, Use to Document Circumstances in Detail

Beware: Never use E codes as primary code.

Accidents happen, and your physicians probably see the evidence in patients of all ages. Round out your diagnosis coding for accidental injuries by adding 'E codes' to your ICD-9 roster, and you can speed up your claims processing.

Put E Codes in Their Place

E codes represent external causes of injury and poisoning. According to the section introduction, E codes are "provided to permit the classification of environmental events, circumstances, and conditions as the cause of injury, poisoning, and other adverse effects."

Important: The guidelines continue, stating that you should report applicable E codes "in addition to a code from one of the main chapters of ICD-9-CM, indicating the nature of the condition."

Payers don't require E codes on claims. However, you can use an E code (and often more than one E code) to fully describe circumstances or establish medical necessity.

Example: A patient falls from a ladder while pruning shrubs during her volunteer shift at the community education center. She presents to the office complaining of pain in her lower left arm. You evaluate the patient and determine that her arm is bruised, but not broken or sprained. You also evaluate her for other injuries and report a 99213 for the visit.

List a diagnosis code for a contusion of the forearm (923.10) as the primary diagnosis. But some payers might question the E/M level for the workup because the diagnosis is not specific. However, if you include E016.1 (Activities involving property and land maintenance, building and construction; gardening and landscaping), E849.6 (Place of occurrence; public building), and E881.0 (Fall on or from ladders or scaffolding; fall from ladder), the payer would have information justifying workup and, possibly, x-rays to check for a fracture or more severe injury.

Get to Know E Code Basics

According to ICD-9, the main purpose of E codes is to statistically track the incidence of accidental injury. For example, the well known statistic that most accidents happen in the home was obtained from through the use of E-code tracking.

E codes do not change your reimbursement amount because they are considered "for informational purposes only" codes. They can help speed up the reimbursement you're due, however, because insurers may have fewer follow-up questions about your claims if E codes give them a fuller picture of a patient's diagnosis. Plus, in cases where your patient is injured by a moving car, either as a pedestrian, bike rider, or passenger, you'll often have to deal with auto insurers, which may require E codes.

Example: A nine-year-old patient is rappelling at a birthday party and the rope holding him breaks, causing the patient to fall to the ground, landing on his foot in a twisted position. The mother tells you that she wants the child checked for injuries, and says that if he is hurt, a lawsuit might be a possibility. Your physician examines the patient and finds that he has a dislocated toe but no other injuries.

In this example, you'll report 838.09 (Dislocation of foot; closed dislocation, other) as the primary diagnosis, followed by E004.1 (Activities involving climbing, rappelling, and jumping off; rappelling) as your secondary code.

Check for Common 'E' Codes in Your Practice

If you think E codes don't apply to you, consider these possibilities: Have you ever treated a patient for a dog bite? How about a bee sting? Or an allergic reaction to antibiotics? These are all covered in ICD-9's E code section. Keep the following common internal medicine E codes in mind when you're selecting your diagnoses going forward:

- E001.x -- Activities involving walking and running
- E006.x -- Activities involving other sports and athletics played individually
- E007.x -- Activities involving other sports and athletics played as a team or group
- E010.9 -- Other activity involving other muscle strengthening exercises
- E812.x -- Other motor vehicle traffic accident involving collision with motor vehicle
- E813.x -- Motor vehicle traffic accident involving collision with other vehicle
- E849.0 -- Place of occurrence; home
- E849.6 -- Accidents occurring in public building
- E888.9 -- Unspecified fall

Bottom line: Be on the lookout for details in your physician's notes that could point you toward E codes that help explain the situation more fully. Even if you don't get paid more for the E code, including it will boost your claim's accuracy and can help answer payer questions up front.

Prepare to Submit More E Codes in Future

E codes won't be immune from change with ICD-10 implementation, so smart coders are looking ahead to that time.

"I've noticed that a lot of payers have become relaxed on their requirement of E codes, as have many offices become relaxed in submitting them," says **Linda Vargas, CPC, CEMC**, coding and reimbursement specialist with Cass Regional Medical Center in Harrisonville, Mo. "My concern is that once ICD-10 arrives, payers will no longer be as lax and will want as much information as possible to support medical necessity for services provided."

New letters: Conditions currently represented by E codes will change to V, W, X, and Y codes in ICD-10. "We'll have plenty of choices," Vargas says. "We're already showing our providers tid-bits when we can. By showing them samples of codes and their descriptors, we hope they'll understand that specificity in their documentation is key."