

Internal Medicine Coding Alert

Reader Questions: Report Every Diabetic Manifestation

Question: An established patient with type II uncontrolled diabetes reports to the internist for a check-up. During the course of a subsequent office visit, the internist notes ophthalmic and circulatory diabetic manifestations, in the form of a cataract and angiopathy. What is the appropriate diagnosis coding for this visit?

Mississippi Subscriber

Answer: You don't have to choose which manifestation to report. Coders are free to report multiple manifestations for diabetic patients, and doing this will paint a more complete picture of the individual patient for the insurance company.

The trick: Make sure that for every ICD-9 code for diabetes with manifestation, you include a secondary diagnosis to identify the manifestation. Remember to report the specific diabetes code first, and then the corresponding chronic manifestation code as the secondary diagnosis.

On the claim, report the appropriate level E/M code from 99211-99215, depending on encounter notes.

Then, append the following diagnosis codes to the E/M, in this order:

- 250.52 (Diabetes with ophthalmic manifestations; type II or unspecified type, uncontrolled) linked to the E/M code to represent the ophthalmic manifestation
- 366.41 (Diabetic cataract) linked to the E/M code to show the type of ophthalmic manifestation
- 250.72 (Diabetes with peripheral circulatory disorders; type II or unspecified type, uncontrolled) linked to the E/M code to represent the circulatory manifestation
- 443.81 (Peripheral angiopathy in diseases classified elsewhere) linked to the E/M code to represent the type of circulatory manifestation.