

Part B Insider (Multispecialty) Coding Alert

Part B Coding Coach: Save Your MVA and Workers' Comp Claims With a Simple E Code

These codes may help you speed up claims processing

Insurers may not always accept or require E codes on your claims, but that doesn't mean you can get away with leaving them out to begin with.

E codes (E800-E999) classify external causes of injury and poisoning for insurance carriers. These codes help insurers understand how and where an accident happened, and provide vital information when you submit certain claims for treating injuries that occur on the job (workers' compensation) or in a motor vehicle accident (MVA). E codes can also be valuable when a patient intentionally inflicts harm upon himself, such as a suicide attempt.

Learn the E Code Basics

Coders who deal with trauma cases use E codes on a regular basis. Falling from in-line skates and roller skates (E885.1), being kicked in the face by a horse (E906.8, Other specific injury caused by animals) and having a motor vehicle traffic accident (E810-E819) are some of the reasons **Christine Neer, CPC, CPC-H**, an oral and maxillofacial coding specialist with the **Face and Jaw Surgery Center** in Bismarck, ND, commonly uses E codes when reporting her surgeons' trauma cases.

Using E codes is a good habit to get into, advises Neer. You never know when a carrier might start inquiring about the circumstances surrounding a patient's injury and treatment, she notes.

Prove Coverage Is Legitimate for Workers' Comp

You should always strive to use E codes for workers' compensation (WC) claims because prior to reimbursement the WC carrier will often require information on the circumstances that caused the patient's injury.

Scenario: A plumber working on leaky pipes cuts his hand on an exposed nail. He goes to the emergency room for sutures. You submit the claim for treatment to the patient's WC carrier with [diagnosis code 882.0](#) (Open wound of hand except finger[s] alone; without mention of complication), but the claim comes back denied because you failed to include the E codes that tell how and where the accident occurred: E920.8 (Accidents caused by cutting and piercing instruments or objects; other specified cutting and piercing instruments or objects) and E849.6 (Place of occurrence; public building).

Legal concerns: E codes have no effect on the reimbursement you will receive, but they can facilitate payment and also affect legal situations down the road. Suppose a patient decides to sue his employer for unsafe working conditions. "If the case goes to trial and you have incomplete information [listed on the WC claim], it can really hurt the case," points out **Rose Bagley, CPC**, senior coder at **Massachusetts General Hospital** in Boston.

In addition, a patient may need WC coverage again in the future for treatment of more work-related injuries, and correct E code information in the patient's record may allow for speedier claim processing and payment.

Don't stop at one: WC claims may require two types of E codes: one that describes how the injury occurred and one that tells where the injury or accident took place (E849.x). The exception is if you're using an E code that includes the place of occurrence in the descriptor, such as E816 (Motor vehicle traffic accident due to loss of control, without collision on the highway).

Don't Drive Off Reimbursement for MVA Claims

In addition to WC carriers, MVA insurers also often require E codes to prove the patient's injury and treatment are related to a MVA. When you file a claim to an MVA carrier, remember to fill out Box 10b on the CMS-1500 form. This box asks if the claim is for an auto accident, and you would check "yes."

Fourth digit is vital: Experts advise you should always report E codes to the highest level of specificity possible, but this is especially true for MVA claims because of the necessary information the fourth digit provides.

For example, suppose an accident involves a car hitting a pedestrian. "With MVA, you need to know if the patient was the driver or passenger, [and] if he was a motorcyclist or a pedestrian," explains Bagley. The fourth digit indicates who the injured person is. You would code the driver's claim with E814.0 (Motor vehicle traffic accident involving collision with pedestrian; driver of motor vehicle other than motorcycle) and the pedestrian's claim as E814.7 (...pedestrian).

Choose Your Poison Code Carefully

E codes can also be valuable for future insurance coverage in cases of poisoning and adverse drug effects. The ICD-9 Table of Drugs and Chemicals contains five E code categories for each drug and chemical substance a patient might ingest or otherwise encounter: accident, therapeutic use, suicide attempt, assault, and undetermined.

Coders sometimes confuse the accidental poisoning, therapeutic use and suicide attempt categories. If you mistakenly code an intentional poisoning suicide attempt as an adverse reaction, for example, that information could cause problems later in authorizing patient psychiatric services. Without the proper E code, the carrier would not be aware the patient had intentionally inflicted harm upon himself. To prevent such mishaps, know these distinctions:

1. **Accidental poisoning E codes** (E860-E869) are for when a patient accidentally takes too much of a drug, takes the wrong drug or takes a drug inadvertently. For instance, when a college student drinks too much at a party and develops alcohol poisoning, you would report E860.0 (Accidental poisoning by alcohol, not elsewhere classified; alcoholic beverage).
2. Therapeutic E codes (E930-E949 - Drugs, medicinal and biological substances causes adverse effects in therapeutic use) are for when a patient suffers an adverse reaction to a properly administered drug. For example, when a patient suffers severe nausea and vomiting from administered codeine for a shoulder injury, you would report E935.2 (Analgesics, antipyretics, and antirheumatics; other opiates and related narcotics).
3. **Suicide and self-inflicted injury E codes** (E950-E959) are to indicate cases of intentional drug overdose - on codeine, for example. You should select codeine code E950.0 (Suicide and self-inflicted poisoning by solid or liquid; analgesics, antipyretics, and antirheumatics).

Remember 2 Tips for E Code Excellence

Next time you encounter a claim that merits E codes, keep these need-to-know tips in mind:

1. Never report an E code as the primary or only diagnosis code, cautions Bagley. You must include a standard ICD-9 code to indicate the patient's condition. E codes are only a supplement to your claim, not the main event, says Neer.
2. Don't restrict yourself to one E code. You can - and often should - report multiple E codes in one claim.

Example: A fire causes an explosion in an auto shop garage and throws a shop employee to the ground. The employee suffers a broken leg and second degree burns on his face and hands.

For this WC claim, you would report diagnosis codes 823.22 (Fracture of tibia and fibula; shaft, closed; fibula with tibia), 944.28 (Burns of wrists and hands; blisters, epidermal loss [second degree]; multiple sites of wrist[s] and hand[s]) and 941.29 (Burns of face, head, and neck; blisters, epidermal loss [second degree]; multiple sites [except with eye] of face, head, and neck) along with these E codes:

4. E890.0 - Explosion caused by conflagration
5. E888.1 - Fall resulting in striking against other object
6. E891.3 - Conflagration in other and unspecified building or structure; burning caused by conflagration
7. E849.3 - Place of occurrence; industrial place and premises.

Note: If there is insufficient room on the claim form to report all the codes, you can attach supplemental documentation listing the extra diagnoses codes.