

## Part B Insider (Multispecialty) Coding Alert

### STROKE CODING: If The Doc Says 'Stroke,' You Can List 434.91

**But double check whether the patient had a hemorrhage**

**Good news:** A change in the 2005 ICD-9 Index means that when your physician writes down "stroke" as the patient's diagnosis, you can automatically record [ICD-9 code 434.91](#).

In the past, for a simple diagnosis of "stroke," the ICD-9 Index listed 436 (Acute, but ill-defined, cerebrovascular disease) as the appropriate code, according to **Jackie Miller**, senior consultant at Dallas, GA-based **Coding Strategies Inc.** Now the Index lists 434.91 (Cerebral artery occlusion, unspecified, with cerebral infarction) as the code you should report. Under the new ICD-9 Index, a diagnosis of "cerebrovascular accident" also will automatically translate to an occlusion with infarction, says Miller.

This change will allow for reimbursement on some previously non-covered services for stroke patients. "There have been some scenarios in the past where radiologists might not get paid for an interpretation of a CT or an MR" scan with a diagnosis of 436, but they would with 434.91, Miller explains.

#### Don't Stop Documenting Details

This change has made coders' lives easier, but may also make coders less aggressive about encouraging doctors to write down precise diagnoses, warns consultant **Sandy Nicholson** with **Pershing Yoakley & Associates** in Atlanta. Now, physicians can get away with writing down "stroke" without going into more detail - and that means you could be missing out on details of the diagnosis that could justify the procedures the physician performed.

For example, if the patient has a stroke with cerebral hemorrhage and the physician fails to note this complication, it could vastly understate the seriousness of the patient's condition, notes Nicholson. Also, if other providers don't realize the patient has a hemorrhage and they start him or her on coumadin or aspirin, the patient could die.

If the physician specifies that the patient has a hemorrhage, then the coder would use ICD-9 code 431, notes Miller. Medicare will cover some procedures for a stroke with hemorrhage but not without, such as surgical or transcatheter interventions. "The more specific [physicians] can be, the better off they're going to be," Miller adds.

**Act now:** Some coders haven't yet caught up with the change from 436 to 434.91 for stroke, and some practices haven't adjusted their pre-printed superbills to reflect the new rule, Miller says.