

Home Health ICD-9/ICD-10 Alert

Coding 101: 3 Strategies Clear Up Aftercare Coding Confusion

Heed the notes when selecting an aftercare V code.

When providing home care for a patient who has had surgery, you need to make a choice between an aftercare V code and a complication code. Learn when it's appropriate to use each code type and simplify your post-surgery coding.

1. Check For Complications

Select a surgery aftercare V code when the home health staff will be providing routine post-operative care for a patient, says consultant **Judy Adams, RN, BSN, HCS-D**, with **Larson-Allen** in Charlotte, NC. Routine care for these patients can include such things as providing dressing changes, teaching about signs and symptoms of infection, infection control measures, dietary changes to promote healing, and any activity restrictions, she says.

The key: Never list a surgery aftercare code when the patient has a complication present, says Adams. Complications such as a wound infection, dehiscence or other complication of the surgical procedure are not considered routine aftercare.

2. Identify the Reason for Surgery

Before you can assign an aftercare V code for a patient recovering from surgery, you must identify the medical condition that required the patient to have the surgery, says Adams. Then select the aftercare code for the correct body system.

Look carefully at the note following each surgical aftercare code in the "Other aftercare following surgery" (V58.4x) and "Aftercare following surgery to specified body systems, not elsewhere classified" (V58.7x) categories, Adams advises. These notes describe the range of codes for conditions classifiable to that aftercare code and may also include special instructions.

For example: The entry for V58.43 (Aftercare following surgery for injury or trauma) informs you that this code is appropriate for conditions classifiable to 800-999. It also contains an "excludes" note that directs you to look elsewhere for your code if you're providing surgical aftercare for traumatic fractures (V54.10-V54.19).

Coding scenario: Your patient has had a partial colectomy to treat a bowel obstruction and is referred to home health. You will assess the incision and teach the patient and his caregiver how to do dressing changes, which signs and symptoms to watch for and report to the physician, the principles of infection control, and dietary modifications to promote healing of the wound.

For this patient, list V58.75 (Aftercare following surgery of the teeth, oral cavity, and digestive system, NEC) in M0230, says Adams. The note underneath V58.75 reads "Conditions classifiable to 520-579," and bowel obstruction is indicated with a 560.x category code.

Don't lose out: If the referral is for wound care of a non-complicated surgical wound, consider listing the code for attention to dressings (V58.31) as a secondary code with the surgical aftercare code (V58.7x or V58.4x) as primary, Adams says. Home health nurses do more than just change the dressing when they see a postoperative patient; they always assess and instruct on the post-surgical recovery and healing process as well, she explains. Take credit for the broader focus of the care you provide.

The next step: Decide whether to code the condition requiring surgery. For example, in the scenario above, you

wouldn't code the bowel obstruction once surgery has corrected the condition. However, if the condition still exists after the surgery, you would continue to code the condition.

Coding scenario: If the patient underwent a popliteal-femoral bypass for peripheral vascular disease (PVD), the bypass wouldn't "cure" the PVD. So, even though you would report an aftercare code (V58.73, Aftercare following surgery of the circulatory system, NEC) to describe the care you are providing, you would also code the PVD as an existing disease.

V code tip: Code care for amputation stumps with V54.89 (Other orthopedic aftercare). New entries in the ICD-9-CM 2007 alphabetic index indicate to code aftercare to amputation with this code.

3. Know Where To Look For Complication Codes

Report a complication code, rather than an aftercare V code, when the care is something other than routine general surgical aftercare, says Adams.

Some examples of complications include:

- 996.42 (Dislocation of prosthetic joint);
- 996.52 (Skin graft failure or rejection);
- 996.55 (Failure of artificial skin graft);
- 996.61 (Infection and inflammatory reaction due to cardiac pacemaker lead);
- 998.31 (Disruption of internal operation wound);
- 998.32 (Disruption of external operation wound);
- 998.59 (Other postoperative wound infection);
- 998.7 (Acute reaction to a foreign substance accidentally left during a procedure); and
- 998.83 (Non-healing surgical wound).

For example: Use a complication code when the surgical wound or site has disrupted or not healed after the normal time of healing has passed, says **Margaret W. Rush, RHIA, HCS-D**, OASIS and coding coordinator with **Alacare Home Health & Hospice** in Birmingham, AL. For a patient whose abdominal surgical site ruptures three weeks after his appendix removal, list 998.32 to describe the complication, she says.

Sequence Complications Correctly

If the care of the complication is the primary reason for home care, code the complication first, then list additional codes that describe the patient's situation, says Adams. But don't include the V codes for aftercare or dressing changes because the care is no longer routine.

Coding scenario: Your patient was referred to home care for wound care and IV antibiotic administration for a post-operative abdominal wound infection due to Staph aureus (Staph). For this patient, list the following codes:

- M0230a: 998.59;
- M0240b: 041.11 (Staphylococcus aureus); and

- M0240c: V58.81 (Fitting and adjustment of vascular catheter).

Exception to the rule: You might be wondering why V58.81 is in the list above when the above advice indicated that you should not use a V code if the condition is complicated.

While you cannot use a routine surgical aftercare code or the V code for attention to dressings (V58.31) in this situation because the wound is infected, you can use the V code for the attention to the vascular catheter because this care relates to the catheter -- not the wound care, Adams explains.