

# Home Health ICD-9/ICD-10 Alert

## Coding 101: Nail Adverse Effects Reporting With E Codes

**Hint: List three codes for poisonings.**

**Fact:** Reporting E codes isn't always optional in home health, so you'll need to know when you're required to list a code to describe the cause of a patient's injury or poisoning. Follow these expert tips to make sure your E code reporting meets the guidelines.

Basics: E codes describe the external causes of injury and poisoning. In other words, they describe the "how, where and why of injuries and adverse events," says **Sparkle Sparks, MPT, HCS-D, COS-C**, consultant with Redmond, WA-based **OASIS Answers**.

When your patient suffers an accidental poisoning or an adverse effect from a medication properly prescribed and taken or correctly administered, you must list an E code to describe the circumstances, says **Jan McLain, RN, BS, LNC, HCS-D, COS-C**, with **Adventist Health System Home Care** in Port Charlotte, Fla.

For accidental poisonings, you'll look to the E850-E858 code range. But when your patient experiences an adverse effect, even though everyone involved followed the medication regimen correctly, you must include a code from the E930 to E949 series (Drugs, medicinal and biological substances causing adverse effects in therapeutic use) along with the other diagnosis codes you report for this patient. This guidance comes from section I.C.19.c.6 of the Official ICD-9 Guidelines for Coding and Reporting chapter-specific coding guidelines

No, your reimbursement won't be impacted if you don't list an E code when you ought to. But reimbursement isn't the only reason you should strive to code correctly. As a home health coder, you must follow the coding guidelines to comply with the HIPAA transaction and coding set regulations.

To choose the right E code, you'll need to follow two steps and know some sequencing rules.

### 1. Poisoning Or Adverse Effect?

Your first step in coding for a poisoning or the adverse effects of drugs and other chemicals, is to figure out whether the patient was poisoned or whether he merely suffered an adverse effect.

Look for phrases such as "wrong substance" or "wrong dose" taken, "wrong person" taking the substance, "overdose" or "intoxication," in the medical record to clue you in that a poisoning has occurred.

If you see "allergic," "idiosyncratic" or "paradoxical" reactions, "cumulative effect" or "toxicity," in the medical record, you're likely dealing with the adverse effect of therapeutic-use and you'll need to make certain to list an E code for this patient.

### 2. Determine Your Sequencing

You'll generally find that one code isn't enough to accurately describe the circumstances contributing to a patient suffering adverse effects or poisoning.

Before you can select the correct E code, you'll also need to familiarize yourself with the Table of Drugs and Chemicals in your ICD-9 manual (See the accompanying article, "Master Adverse Effects Coding with the Table of Drugs And Chemicals," for more on that topic.)

For adverse effects: Sequence what happened to the patient (the adverse effect) first, followed by the E code that

indicates which drug or drugs were responsible for that kind of adverse effect, McLain says.

**Coding example:** Your patient has been taking digoxin as ordered but has developed the adverse effect of bradycardia. List 427.89 (Other specified cardiac dysrhythmias; other) followed by E942.1 (Cardiotonic glycosides and drugs of similar action causing adverse effects in therapeutic use).

**Tip:** If your patient suffered an adverse event of a medication as the result of an interaction with alcohol, there is a special coding guidelines (c.5) that you should "use poisoning codes and E codes for both," McLain points out.

Code 427.89 explains what the adverse effect was -- what happened to the patient. Next, E code E942.1 describes the cause of the adverse effect.

**For poisonings:** When your patient has suffered a poisoning, list the poisoning code first, followed by what happened to the patient because he was poisoned, and then report the E code to describe the circumstances of the poisoning, says McLain. The coding sequence here is reversed from the properly administered medication adverse events.

**Coding example:** Your patient woke up lethargic due to an unintentional overdose of Ambien.

An accidental overdose is considered a poisoning. To code for this patient, she suggests reporting the following codes:

- 967.9 (Poisoning by sedatives and hypnotics; unspecified sedative or hypnotic);
- 780.79 (Other malaise and fatigue); and
- E852.9 (Accidental poisoning by other sedatives and hypnotics; unspecified sedative or hypnotic).

Code 967.9 describes the poisoning. Next, 780.79 explains what happened to the patient (lethargy) because of the poisoning. Finally, E code E852.9 shows that this was an accidental poisoning.

**Missing detail:** Although you know which sleeping pill the patient overdosed on, there is no specific entry for Ambien in ICD-9-CM. If you can't find the specific drug name or generic, you must code for the category -- a sleeping pill in this case.