

Home Health ICD-9/ICD-10 Alert

Coding 101: Think Twice About Using V55 Codes for Artificial Openings

Hint: Ask who provides the care.

Here's a common scenario: The patient has a colostomy, the clinician checked it and all is well, so you code V55.3 (Attention to artificial openings, colostomy) - or do you?

Home health patients often have artificial openings, so you must know how to code them. They may influence the plan of care, be the primary reason for home care or just be a component of the patient's health concerns.

You should use a V code when a circumstance influences the patient's health status even though it is not the current illness, explains East Orange, NJ coding specialist **JoAnn Baker**, CCS, CPC, CHCC.

ICD-9-CM divides the V codes for artificial openings into V44 codes and V55 codes, depending on whether the patient cares for the artificial opening herself or receives care from the home health provider for the artificial opening.

If the clinician goes into the home to provide some care to the artificial opening, you will be looking at V55 codes. Under ICD-9 coding guidelines, these codes designate attention to artificial openings, with an extra digit to indicate the type of opening:

V55.0 (Tracheostomy)

V55.1 (Gastrostomy)

V55.2 (Ileostomy)

V55.3 (Colostomy)

V55.4 (Other artificial opening of digestive tract)

V55.5 (Cystostomy)

V55.6 (Other artificial opening of urinary tract)

V55.7 (Artificial vagina)

V55.8 (Other specified artificial opening)

V55.9 (Unspecified artificial opening)

Caution: These are the codes you report when the clinician adjusts, repositions, removes, replaces or cleans, for example, a device associated with the artificial opening or the stoma itself. You should not use these codes for complications of the external stoma, the coding manual points out.

V55 Excludes Self Care

If the patient's artificial opening is important to include in your coding because it will have an impact on the patient's care, but the clinician does not provide any of the care for it, look to V44 codes. Use these codes when artificial openings do not require attention or management, your coding manual instructs.

Reason: V44 codes are status codes, used when a patient has a residual of a past disease or condition, coding guidelines state. They include the same types of openings covered under V55, but expand the cystostomy codes. V44.5 (Artificial opening status, cystostomy) is subdivided into:

V44.50 (Cystostomy, unspecified)

V44.51 (Cutaneous-vesicostomy)

V44.52 (Appendico-vesicostomy)

V44.59 (Other cystostomy).

