

## Home Health ICD-9/ICD-10 Alert

### CODING HOW-TO :SPOT BLINDNESS AND LOW-VISION CODES TO SECURE CASE MIX POINTS

Don't turn a blind eye to available case mix points.

Under the current Home Health Prospective Payment System,<sup>3</sup> OASIS answers and diagnosis coding interact to impact case mix points more than ever before. But don't get carried away with watching for OASIS triggers, or your claims may attract greater scrutiny.

Take a Look at M0390

OASIS item M0390 (Vision with corrective lenses if the patient usually wears them) provides a clue that you may need to list a code from the 369.xx (Blindness and low vision) category, says **Judy Adams, RN, BSN, HCS-D, COS-C**, president and CEO of Adams Home Care Consulting in Chapel Hill, N.C. "M0390 is actually asking about a patient's vision to identify the patient's ability to see and visually manage (function) within his environment, wearing corrective lenses if they are usually worn," she says. The item is also used to evaluate any risk related to the patient's management of oral medication.

But a M0390 response that indicates your patient has impaired vision doesn't necessarily mean it's appropriate to list a 369.xx code -- the medical record must document additional information beyond the M0390 score to substantiate the limitation in vision, Adams says.

Why? M0390 doesn't test the patient's visual acuity, Adams points out. Loss of vision in one or both eyes must be supported by clinical findings and diagnoses verified with the physician, she says. With proper documentation, you can list a 369.xx code along with an ophthalmic diagnosis such as glaucoma, retinal detachment, or cataract to define the patient's level of visual impairment.

Caution: The 369.xx codes were rarely used before the PPS refinements effective in January 2008 when several codes in this category began to earn case mix points, Adams says. The incidence of 369.xx codes appearing in the top six diagnosis slots has increased significantly over the last year and a quarter, she says. And the Centers for Medicare & Medicaid services can't help but notice such a sudden change in the frequency of use for these new case mix diagnoses.

Know When to List 369.xx

In order to list a 369.xx code, you must be able to show how the diagnosis affects the plan of care for that patient, says Conetoe, N.C.-based coding and billing specialist **Vonnie Blevins, HCS-D**. You should also code for the disease that is causing the vision impairment, she says.

Coding example: Your patient was referred to home care for instruction on diabetes mellitus and administration of insulin twice daily because she lives alone and is legally blind due to glaucoma. M0390 was answered "severely impaired." For this patient, you would list the following codes, Blevins says:

M0230a: 250.00 (Diabetes mellitus without mention of complication; type II or unspecified type, not stated as uncontrolled);

M0240b: 365.9 (Unspecified glaucoma);

M0240c: 369.4 (Legal blindness, as defined in the U.S.A.);

M0240d: V58.67 (Long-term [current] use of insulin); and

M0240e: V60.3 (Person living alone).