

Home Health ICD-9/ICD-10 Alert

Coding How-To: Use 2 Tips to Ace Your Aftercare Coding

Case mix codes in M1024 don't always bring case mix points.

When caring for a patient following surgery, you'll need to know when to use a numerical code versus an aftercare V code, when to list a V57.x code for therapy, and how M1024 and case mix fit in. Read on for advice that will make your aftercare coding a breeze.

1. Discern Aftercare From Surgical Complications

You'll most often report an aftercare V code from the V58.7x subcategory when the focus of care is your patient's routine recovery from a surgical procedure, says **Jan McLain, RN, BS, LNC, HCS-D, COS-C,** with Adventist Health System Home Care in Port Charlotte, Fla. This holds true provided the underlying reason for the surgery is resolved or resolving and fits the numeric categories for the aftercare V code, she says.

Don't miss 4 exceptions: However, the V58.7x codes don't work in the following surgical aftercare scenarios, McLain says:

Fractures: Choose your fracture aftercare code depending on whether the fracture was due to trauma (V54.1x) or was a pathologic fracture (v54.2x), or was repaired by a joint replacement (V54.81). Don't list an acute fracture code in M1020/M1022 because these acute codes are reserved for active treatment (by hospital, physician or emergency department). But you can list the acute fracture code in M1024. However, it will not gain points unless it meets the criteria of a Ortho 1 or Ortho 2 case mix and the patient is receiving either IV or parenteral therapy in the home (M1030 = 1 or 2) or has a pressure ulcer.

Trauma: Report the aftercare code V58.43 (Aftercare following surgery for injury and trauma) when the surgery is for traumatic injuries that would classify to diagnoses from the 800-999 (Injury and poisoning) categories. But watch for exclusions! Code for those trauma fractures with V54.1x.

Joint replacements: Code for joint replacements with two codes -- V54.81 (Aftercare following joint replacement) followed by the V43.6x code for the location.

Neoplasms: Report the aftercare code V58.42 (Aftercare following surgery for neoplasms) when the surgery is for a neoplasm that would classify to diagnoses from the neoplasm chapter.

Complications: You should list the appropriate numeric code for the complication if the surgical wound or post op course is not routine because of a non-healing surgical wound (998.83), dehisced wound (998.3x) or infection (998.59) or any mechanical complication of an orthopedic device since the procedure, McLain says.

2. Reserve V57.x for Therapy Only

The way home health has used codes from the V57.x (Care involving use if rehabilitation procedures) series has changed over the years as the ICD-9-CM Committee has elaborated on proper use of the code.

Currently, you should only use V57.1 (Other physical therapy) as the principal diagnosis when physical therapy only is on the initial plan of care, there is no intention to add nursing, and the focus of the therapist is to rehab the patient to a former functional level, McLain says.

The V57.x series also includes V57.89 (Multiple training or therapy) for rehab cases that involve more than one therapy discipline such as physical therapy and occupational therapy, but again, only if the focus is one of rehabilitation, McLain



says. If therapy does not meet the criteria for being the primary diagnosis -- for example, when nursing is in the plan of care -- the V57 code should not be used at all.

Why? This coding separates episodes with a more general focus of care from those that are strictly focused on rehab, McLain says.

Because you can only list codes from the V57.x series as principal diagnoses when nursing is involved, these codes aren't appropriate, says **Jennifer Warfield**, **RN**, **BSN**, **HCS-D**, **COS-C**, education director with PPS Plus Software in Biloxi, MS. In therapy-only cases, you can list a V57.x code as primary and the case mix code it replaces -- as appropriate -- in M1024.

Remember: Coding guidelines ask you to follow the V57.x code with a code for the condition being addressed, such as hemiplegia, Warfield says. Add this code as an additional diagnosis in M1022.