# Home Health ICD-9/ICD-10 Alert

## MORE BAD DIABETES CODING HABITS

Diabetes complicates care for the patients who have the condition, and selecting the right diagnosis codes to report the disease can complicate a coder's work. Be on the look out for these common coding mistakes, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C,** consultant and principle of Selman-Holman & Associates in Denton, Texas.

Manifestation assumptions: Don't code for manifestations of diabetes that you haven't verified with the patient, caregiver, and physician.

For example, just because your patient has neuropathy and diabetes doesn't mean that the neuropathy is diabetic.

It's a common mistake to assume that because the patient has diabetes and chronic kidney disease that you should list a diabetic chronic kidney disease code, says Selman-Holman. But using another code for this manifestation takes up more M0230/M0240 slots that might be better used for your patient's other diagnoses.

Tip: Gangrene and osteomyelitis are the only conditions that you can assume are manifestations of diabetes ��" and then only if the physician doesn't state another cause.

Fourth digit fiasco: Don't list diabetes with fourth digit "0" (without mention of complication) if you're also reporting other diabetes codes or diabetic manifestations. Reporting fourth digit "0" indicates that there are no manifestations present or perhaps that the conditions cannot be verified as caused by diabetes. Following a 250.0x code with another diabetes code or manifestations specific to diabetes, such as polyneuropathy in diabetes or gangrene, is contradictory to listing "0" as the fourth digit.