

Home Health ICD-9/ICD-10 Alert

Reader Question: Gain Case Mix Points for Pathologic Fracture

Question: Our patient fell and was hospitalized for a lumbar compression fracture. She also has osteoporosis, which the physician states caused the fracture. We will be providing aftercare. How should we code for her? Must we list an E code for the fall?

Michigan Subscriber

Answer: If you have any questions about a fracture you suspect is pathologic, be sure to consult the physician.

Pathologic fractures can be caused by a number of conditions, not just osteoporosis. For example, the patient could have had a neoplasm that caused the fracture. And some compression fractures are traumatic. So it's important to determine whether the fracture was caused by the fall (traumatic) or caused by the osteoporosis (pathological).

In your case, the physician has documented the link between the osteoporosis and the pathologic fracture. So, your principal diagnosis in M1020a for this patient is V54.27 (Aftercare for healing pathologic fracture of vertebrae) to indicate the aftercare your agency is providing.

Across from the M1020a diagnosis, in M1024, put the code 733.13 (Pathologic fracture of vertebrae). Although the pathologic fracture is a case mix code, it rarely earns points as an Ortho 2 case mix diagnosis. Remember, coding guidelines restrict reporting fracture codes to settings providing active treatment; so these codes cannot appear in M1020 or M1022.

Next, code for the patient's osteoporosis with 733.00 (Osteoporosis, unspecified). You need to include the osteoporosis code because V54.27 doesn't include any information about the patient's osteoporosis.

If you have room, you can also list the appropriate E code to describe the patient's fall. This isn't required in home health, but it is a coding best practice. However, you'll need more information about the fall to determine the exact code for this patient.