

Home Health ICD-9/ICD-10 Alert

READER QUESTION ~ Make A Clean Break With Fracture Coding

Question: We are providing physical therapy to a patient for gait abnormality and lack of coordination due to a closed fracture of her pubic bone (808.2). I've heard that codes from categories 800.xx-829.x or 733.10-733.19 shouldn't be reported in home health. Should I code only for the gait abnormality and lack of coordination? I feel like I should code something to indicate the reason for her abnormal gait.

New York Subscriber

Answer: The official coding guidelines state that "traumatic fractures are coded using the acute fracture codes (800-829) while the patient is receiving active treatment."

Examples of active treatment include surgery, emergency department encounters, and evaluation and treatment by a new physician.

Use the aftercare codes "for encounters after the patient has completed active treatment of the fracture and is receiving routine care for the fracture aftercare during the healing or recovery phase." Similar language has been added to the official coding guidelines regarding pathologic fractures.

Use the aftercare code V54.19 (Aftercare for healing traumatic fracture of other bone) to describe the care related to the fracture in your scenario.

What to do: Code for this patient as follows:

- M0230a V57.1 (Other physical therapy);
- M0240b V54.19 (Aftercare healing traumatic fracture of other bone);
- M0240c 781.3 (Ataxia NOS) OR 781.2 (Abnormality of gait); and
- M0245a 808.2 (Fracture of pubis, open).

List V57.1 as primary because you admitted the patient for rehabilitation services. Next, report V54.19 to indicate that the therapist will provide treatment for the aftercare of a fracture.

Don't overlook: The therapist is treating the patient's abnormal gait described as "gait abnormality and lack of coordination." The code for abnormality of gait is 781.2, while lack of coordination is coded with 781.3. However, you can't code for both conditions -- the two codes exclude each other. If the patient has ataxia, you would code 781.3; for an ataxic gait, report 781.2. Ataxia is more likely to be neurological in nature.

Bonus: List the fracture code in M0245, because this is the underlying condition that is being treated. There is no prohibition against using a fracture code in M0245.

Regulations require that the claim be compliant with official coding rules, but M0245 is not directly reported on the claim. If the fracture code were to be reported in M0230 or M0240 however, the fracture code would appear on the claim.

Another option: You could also use the code for abnormality of gait in M0245 for case mix points, but you would be losing out on risk adjustment on your outcomes.

