

Home Health ICD-9/ICD-10 Alert

Reader Question: Report Proximate Cause for MS Patient

Question: Our patient has had multiple sclerosis for 13 years. We see her for management of her neurogenic bladder. She is experiencing urinary retention due to the neurogenic bladder, which we are managing with a Foley catheter. Our nurse visits this patient every three weeks to change and care for the catheter and to watch for signs of a urinary tract infection (UTI). How should we code for this care?

New Mexico Subscriber

Answer: Code as follows for this patient:

- M1020a: V53.6 (Fitting and adjustment of other device; urinary devices);
- M1022b: 596.54 (Neurogenic bladder NOS); and
- M1022c: 340 (Multiple sclerosis).

Use proximate-condition versus underlying-diagnosis logic to code this scenario. Medicare directs coders to list the proximate diagnosis first if you're treating only one aspect of care for an underlying long-term chronic condition such as Parkinson's disease. That way, you don't misrepresent the focus of care.

In your patient's case, the focus of the care (the proximate reason) is her neurogenic bladder. So you'll list V53.6 as primary to indicate that you're in the home to assist the patient with her catheter.

Follow this with 596.54 to show that she has neurogenic bladder. Urinary retention is integral to neurogenic bladder, so you don't need to code for it separately.

Finally, list 340 to indicate that the patient also has Multiple Sclerosis.

Leave M1024 blank for this patient because the underlying diagnosis to the V code is the neurogenic bladder, which is not a case mix diagnosis.