

Home Health ICD-9/ICD-10 Alert

Reader Question: Take A Second Look At This Amputation Scenario

Question: In your November 2006 issue, there was a coding scenario regarding correct coding for a patient who had a below-the-knee amputation due to gangrene and was receiving physical therapy. The answer was confusing because the abnormality of gait diagnosis (781.2) was listed in M0240c and M0245a. I was under the impression that the only codes I could list in M0245a were either the case mix code that the V code in M0230a replaced or the case mix code documented on M0240b.

Washington Subscriber

Answer: Everyone knows that when a V code replaces a case mix code in M0230a, you may place the case mix code in M0245. But this situation is slightly different. In this case, a symptom code replaced a definitive diagnosis that no longer exists (gangrene) and the V code replaced the gangrene.

This is similar to the situation involved in coding abnormality of gait for the patient with degenerative joint disease (DJD) who undergoes a joint replacement. In that situation, the symptom -- abnormality of gait -- reflects the problem better than DJD because that has been resolved. Abnormality of gait can be placed in M0245 even though DJD cannot.

Now let's take another look at the scenario. You are providing aftercare after an amputation, and the patient is receiving rehab services only. The most recent ICD-9-CM update instructs you to code V54.89 (Other orthopedic aftercare) for aftercare to an amputation. So, for this patient, list:

- M0230a: V54.89;
- M0240b: V49.75 (Lower limb amputation status; below knee);
- M0240c: 781.2 (Abnormality of gait); and
- M0245a: 781.2 (Abnormality of gait).