

Home Health ICD-9/ICD-10 Alert

READER QUESTIONS :Follow the Guidelines for Coding Co-Morbidities

Question: I've read in your publication that certain co-morbidities should always be listed as secondary diagnoses even if there is no intervention. But I recently attended a coding seminar regarding the Attachment D changes, and the presenter said that any secondary diagnosis must have an intervention, even if it is only observation and assessment. Which stance on co-morbidities is correct?

-- Arizona Subscriber

Answer: The Centers for Medicare & Medicaid Services has retracted the information that requires an intervention for every diagnosis because it contradicts guidance in Chapter 8 of the Implementation Manual, as well as other official guidance, including that in the American Hospital Association's Coding Clinic.

If the diagnosis may impact the care, even if you're not treating it, you should code the diagnosis. Chronic conditions and conditions that impact the body systemically will always impact the care or the rehab prognosis, and you should code for them. The key is to make sure that documentation in the assessment or the POC supports each secondary diagnosis that you code.