

Home Health ICD-9/ICD-10 Alert

READER QUESTIONS: Get Credit for Kidney Care

Question: Our patient was originally admitted for post-op aftercare following kidney transplant and IV antibiotics for prophylaxis because the kidney donor tested positive for cytomegaloviral disease (CMV). Our patient is CMV negative. He was then readmitted to the hospital with a retroperitoneal hematoma. Now he has returned home. He still has issues with pain, but is receiving no pain medication.

We are still seeing him for the same reason as before, but also assessment of pain. How should we code for him?

-- Virginia Subscriber

Answer: For this patient, list the following codes:

M0230a: V58.44 -- Aftercare following organ transplant

M0240b: V42.0 -- Organ or tissue replaced by transplant; kidney

M0240c: V01.89 -- Contact with or exposure to communicable diseases; other communicable diseases

M0240d: V58.81 -- Fitting and adjustment of vascular catheter.

M0240e: V58.69 -- Long-term [current] use of other medications

M0240f: 568.81 -- Hemoperitoneum [nontraumatic].

Don't shortchange the care you are providing by listing V58.81 as primary. This would indicate that the most important service you are providing is fitting and adjusting the vascular catheter. Your nurse is most likely doing much more, including teaching, assessing the disease process, and assessing the effectiveness of the drug. List V01.8 to indicate the patient's exposure to CMV. This V code is the appropriate one for conditions classifiable to 001-136; CMV is coded with 078.5.

Next, report V58.69 for the medicine you are infusing. Sequence the hematoma code earlier in the list if it is more important.