

Home Health ICD-9/ICD-10 Alert

Reader Questions: Stick With Focus Of Care For B12 Injections

Question: We have a patient that we're seeing for B12 maintenance. The doctor recently ordered 12-14 visits of physical therapy to address some back pain the patient was experiencing. Because the back pain is the most acute condition for which we are providing care, I'm inclined to list the physical therapy code as primary, but my biller says we should list the anemia diagnosis first, followed by a code for the back pain. How should we sequence the codes? Would the same hold true for a patient receiving both wound care and B12 shots?

-- Ohio Subscriber

Answer: If the focus of the care for the episode is the back pain, then you should sequence the back pain code first. When therapy discharges the patient, you can revert back to the diagnosis that justifies the B12 injections with your next episode.

You should choose your primary diagnosis based on the condition that is the primary reason for admission/ recertification to home care, regardless of whether it's a wound or something else.

Be careful about using the V58.3x (Attention to dressings and sutures) codes as primary, though. Always code the wound first unless it is surgical aftercare for a surgical wound. If you are providing routine care of a surgical wound, sequence the aftercare code first.

Unless otherwise indicated, reader questions were answered by **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C,** consultant and principal of **Selman-Holman & Associates** in Denton, TX.