

Home Health ICD-9/ICD-10 Alert

Watch for Unrelated Conditions in Hospice Coding

Question: Our hospice patient has a terminal diagnosis of amyotrophic lateral sclerosis (ALS). She also has dysphagia resulting in loss of weight, decreased respiratory function, and dependence on a respirator, along with emphysema. She is bedbound and has a stage III pressure ulcer on the coccyx. What diagnosis codes should we list for her?

Answer: List the following diagnosis codes on your claim for this hospice patient, says Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C, consultant and principal of Selman-Holman & Associates and CoDR □ Coding Done Right in Denton, Texas.

Terminal diagnosis: 335.20 (Amyotrophic lateral sclerosis)

Co-Morbidities:

- 787.20 (Dysphagia, unspecified)
- 783.21 (Loss of weight)
- 707.03 (Pressure ulcer; lower back)
- 707.23 (Pressure ulcer stage III)
- V49.84 (Bed confinement status)
- V46.11 (Dependence on respirator, status)

Unrelated diagnosis: 492.8 (Other emphysema)

A home health coder would include the emphysema diagnosis with the "other diagnoses" but at least one HHH MAC thinks differently.

Home Health and Hospice MAC Palmetto GBA explains on its website that a beneficiary with ALS and clinically significant COPD could have specific ALS-related impairments of respiration function (such as impaired respiratory muscle function), along with COPD-related impairments of the respiratory system (such as changes in the structure of the bronchial tree and/or alveoli, with associated impaired respiratory functions), Selman-Holman says.

"The COPD can be considered unrelated because it's different mechanics than the ALS," Selman-Holman says. You can also consider the emphysema as unrelated because it is a pre-existing condition.