

## Home Health ICD-9/ICD-10 Alert

### You Be The Coder: Beware Of Tricky CVA Code Changes

**Question:** Mr. Jones was discharged from the hospital following treatment for pneumonia. Three weeks before the pneumonia he had a stroke with cerebral infarction resulting in right-sided hemiplegia (his dominant side) and dysphasia. He is readmitted to home care with skilled nursing to monitor vital signs. He also requires medication education and must be observed for further lung problems. PT, OT and SLP will resume the therapy for rehabilitation after the stroke. More than 10 therapy visits are expected. How would you code this episode?

**Answer:** You should code the following:

**For M0230**

1. 434.91 (Cerebral artery occlusion, unspecified; with cerebral infarction)

**For M0240**

2. V57.1 (Other physical therapy)
3. V57.21 (Encounter for occupational therapy)
4. 342.91 (Hemiplegia, unspecified; affecting dominant side)
5. V57.3 (Speech therapy)
6. 787.2 (Dysphagia)
7. 486 (Pneumonia, organism unspecified)

The stroke is still in the acute phase, so you should use 434.91 as the primary diagnosis because both nursing and therapy are focusing on the CVA, explains **Laresa Boyle** director of coding services at Longview, TX-based **Healthcarefirst**. This situation would have been coded 436 (Acute, but ill-defined, cerebrovascular disease) before Oct. 1, she notes (see Article 5).