

Home Health ICD-9/ICD-10 Alert

YOU BE THE CODER: DON'T LET AMPUTATION CODING BREAK YOUR STRIDE

Question: We have a patient who had a below knee amputation (BKA) for peripheral vascular disease (PVD) secondary to uncontrolled Type 2 diabetes. She is receiving physical therapy and occupational therapy.

Should we code abnormality of gait for this patient or is that implied by the BKA? Can we use 250.72 in M0245 for case mix because diabetes caused the circulation problem, which resulted in the surgery?

Utah Subscriber

Answer: Assuming the focus of care is therapy for the abnormality of gait and other resulting deficits in activities of daily living, code as follows, suggests **Lynn Yetman, RN, MA, HCS-D, COS-C, LNC**, of **Reingruber & Company** in St. Petersburg, FL.

- M0230a: V57.89 (Multiple training or therapy);
- M0240b: 781.2 (Abnormality of gait);
- M0240c: 250.72 (Diabetes with peripheral circulatory disorders, type II or unspecified type, uncontrolled);
- M0240d: 443.81 (Peripheral angiopathy in diseases classified elsewhere); and
- M0245a: 781.2 (Abnormality of gait).

List the underlying condition that requires aftercare in M0240, advises Yetman. If a diabetic manifestation is not the reason for home health care, the diabetes doesn't have to be listed first.

If, however, you will be providing aftercare which includes assessment of the healing wound and therapy, code V58.73 (Aftercare following surgery of the circulatory system, NEC) first, followed by 250.72 and 443.81. These diagnoses follow the aftercare code because they are the reason for surgery and are still current diagnoses.

You can also list them in M0245a and M0245b as case mix diagnoses. Either abnormality of gait (781.2) or V49.75 (Lower limb amputation status, below knee) would justify the therapy.