

Home Health ICD-9/ICD-10 Alert

YOU BE THE CODER: DON'T LET THIS FRACTURED HIP SCENARIO BREAK YOUR STRIDE

Question: Our patient returned to home care following surgery for a total hip replacement due to an open fracture of her femur. She broke her femur after falling on a curb. Nursing will provide wound care and teaching. Physical therapy will provide gait training. How should we code for her?

Kentucky Subscriber

Answer: For this patient, report the following codes, suggests **Margaret W. Rush, RHIA, HCS-D, OASIS** and coding coordinator with **Alacare Home Health & Hospice** in Birmingham, AL.

- M0230a: V54.81 (Aftercare following joint replacement);
- M0240b: V43.64 (Organ or tissue replaced by other means; joint; hip);
- M0240c: V58.31 (Encounter for change or removal of surgical wound dressing);
- M0240d: 781.2 (Abnormality of gait);
- M0240e: E849.8 (Place of occurrence; other specified places);
- M0240f: E880.1 (Fall on or from sidewalk curb); and
- M0245a: 820.9 (Fracture of neck of femur; unspecified part of neck of femur, open).

List a surgical aftercare V code used when you'll provide treatment to the surgical site or other aftercare following surgery, says Rush. In this case, both skilled nursing and physical therapy are treating the patient for the same condition--surgical aftercare of joint replacement--so this is the primary diagnosis.

Choosing the right aftercare V code depends on your patient's situation, Rush says. Consider the type of surgery your patient had, the reason for your patient's surgery, or the body system the condition affected. In this case, the joint replacement code is specific to the surgery performed.

Tip: Select the aftercare V code that applies to the condition that required surgery by noting the code range listed below the aftercare V code.

When reporting V54.81, your ICD-9 manual will advise you to also list an additional code to identify which joint was replaced. In this case, list V43.64 to indicate the hip.

Therapy will be addressing the patient's gait abnormality, so 781.2 explains further why this skilled service is needed.

Add detail: While not required in home health, E codes to describe where and how a patient was injured can paint a more complete picture of your patient's condition.



Because the official coding guidelines don't allow the acute fracture codes to be listed in home care, you can't list the fracture in M0230a or M0240. But you can report it in M0245a because it is the underlying condition to the V code you placed in M0230a and the fracture code is a case mix code. This will earn you 11 extra points for reimbursement, Rush explains.