

Home Health ICD-9/ICD-10 Alert

YOU BE THE CODER: Know How To Pair Up Diabetic Manifestations

Question: Our patient has multiple diabetic ulcers on his toes, congestive heart failure (CHF), chronic obstructive pulmonary disease (COPD), diabetic retinopathy, and stage 3 chronic kidney disease due to the diabetes. Our focus of care is the ulcers, but the CHF and COPD also require intervention. How should we code for him?

-- West Virginia Subscriber

Answer: Code for this patient as follows, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, consultant and principal of Selman-Holman & Associates in Denton, Texas:

- M1020a: 250.80 (Diabetes with other specified manifestations; type II or unspecified type, not stated as uncontrolled);
- M1022b: 707.15 (Ulcer of lower limbs, except pressure ulcer; ulcer of other part of foot; toes);
- M1022c: 428.0 (Congestive heart failure, unspecified);
- M1022d: 491.21 (Obstructive chronic bronchitis with [acute] exacerbation);
- M1022e: 250.50 (Diabetes with ophthalmic manifestations; type II or unspecified type, not stated as uncontrolled)
- M1022f: 362.01 (Background diabetic retinopathy);

Additional diagnoses:

- 250.40 (Diabetes with renal manifestations; type II or unspecified type, not stated as uncontrolled)
- 585.3 (Chronic kidney disease, Stage III [moderate]).
- You could also list a code for any loss of vision or low vision.

When coding for diabetic manifestations, you must list the appropriate diabetes code first followed by the manifestation. In this case, that means you'll report three different diabetes codes in order to accurately describe your patient's condition.

The diabetic ulcers are the focus of your care, but manifestation coding rules require that the underlying condition is listed first, so 250.80 is your principal diagnosis followed by 707.15 for the ulcers.

Outcome: Because your patient has a diabetic ulcer, you'll earn 20 non routine supply points for this patient.

Because you'll also be providing interventions for the CHF and COPD, you'll want to list them after the diabetic ulcers.

The patient's diabetic retinopathy and chronic kidney disease will also impact the care you provide, so they should be listed next.

Take note: In this patient's case, the medical record shows that his kidney disease is due to his diabetes, so you can code for it as a manifestation. If there was no documented line between the two, this would be inappropriate.