

Home Health ICD-9/ICD-10 Alert

You Be the Coder: Know Which Comes First With Ulcers, Osteomyelitis

Question: We have a patient with type II diabetes who fell and broke his hip. During his recovery, he developed bilateral heel ulcers. He was treated at a wound care center, but the ulcers worsened. He had a sharp debridement of the right heel but later developed osteomyelitis.

He is receiving home care for wound vac to the right heel following a calcaneotomy and care for the remaining decubitus on the left heel. How should we code this episode?

Arizona Subscriber

Answer: If the patient is still on antibiotics for the osteomyelitis, lead with 250.8x (Diabetes with other specified manifestations), suggests **Lucie Carter Lopez, RN, BA, HCS-D**, clinical supervisor with **Interim Health Care** in Fresno, CA.

Follow this with diabetic manifestation code 731.8 (Other bone involvement in diseases classified elsewhere) and 730.07 (Acute osteomyelitis; ankle and foot). The reference in the alphabetic index for osteomyelitis, diabetic and diabetic osteomyelitis states to code 250.8 [731.8]. When you reference 731.8 in the tabular list, the instruction is to "use additional code to specify the bone condition, such as: acute osteomyelitis." Coding guidelines allow you to assume that osteomyelitis is a symptom of the diabetes. Diabetic osteomyelitis requires three codes, 250.8x, 731.8 and 730.xx.

Next, list 707.07 (Decubitus ulcer; heel). Finally, report V58.67 (Long-term [current] use of insulin) if the patient is on insulin, Lopez says. This V code is appropriate for type II patients using insulin to control their diabetes.

If the treatment for osteomyelitis is complete, report 707.07 for the decubitus ulcer as primary, Lopez says. Follow this with 250.0x (Diabetes mellitus without mention of complication) because this patient's only diabetic manifestation, the osteomyelitis, has been cleared up. Also list V58.67 if appropriate for this patient.

Remember: A pressure ulcer is not a manifestation of diabetes, and you can't assume that just because a diabetic has an ulcer on the foot that it is a diabetic ulcer.