

Home Health ICD-9/ICD-10 Alert

You Be The Coder: Pair Up Codes for Diabetic Manifestations

Question: Our 72-year-old male patient with uncontrolled type II diabetes and diminished visual acuity due to diabetic macular edema has a diabetic ulcer over his left first metatarsal head. Although a podiatrist sees him regularly, our nurse visits him two times weekly to monitor the wound and change dressings. How should we code for this patient?

-- Ohio Subscriber

Answer: Code for this patient as follows, says **Joan L. Usher, BS, RHIA, COS-C, ACE** with JLU Health Record Systems in Pembroke, MA:

M1020a: 250.82 (Diabetes with other specified manifestations; type II or unspecified type, uncontrolled);

M1022b: 707.15 (Ulcer of other part of foot):

M1022c: 250.52 (Diabetes with ophthalmic manifestations; type II or unspecified type, uncontrolled);

M1022d: 362.07 (Diabetic macular edema);

M1022e: 362.01 (Diabetic retinopathy NOS);

M1022f: 369.20 (low vision, NOS).

When you have multiple kinds of diabetic manifestations, you must list multiple diabetes codes, Usher says. The fourth digit you select for a code in the 250.xx category links the complication to the diabetic disease. In your patient's case, that means listing 250.82 for your patient's diabetic ulcer along with 250.52 for your patient's diabetic macular edema.

Follow each diabetes code with the appropriate code for the specific manifestations.

When coding for diabetes, the fifth digit of 250.xx identifies the type of diabetes and whether the diabetes is controlled or uncontrolled, Usher says. In your patient's case, the medical record specifies that his diabetes is uncontrolled, so it's appropriate to list 2 as your fifth digit. Absent this detail, you would select the default fifth digit for codes in the 250.xx category -- "0."

Coding guidelines and the note at 362.07 indicate that you must also code for diabetic retinopathy when you report diabetic macular edema. Because you don't have specific information about the level of retinopathy, use the 362.01 code. The diminished visual acuity can be appropriately coded in this example as well.

You can also list V58.67 (Long-term [current] use of insulin) if your type II patient uses insulin, Usher says. But it's not appropriate to list this code for a type I diabetic because insulin code is inherent in the 250.x1 and 250.x3 codes.