

## Home Health ICD-9/ICD-10 Alert

### YOU BE THE CODER: STEP UP TO THIS FOOT ULCER CODING CHALLENGE

**Question:** How should we code for a patient who has a diabetic foot ulcer with underlying acute osteomyelitis at the distal tibia-fibula? The patient is on insulin and receiving IV antibiotics. We will be treating the ulcer and managing the antibiotics. The medical record states that the causative organism for the osteomyelitis is staph aureus.

Ohio Subscriber

**Answer:** Code for this patient as follows, suggests **Laresa Boyle, RHIA**, director of coding services at Springfield, MO-based **Healthcarefirst**:

- M0230a: 250.80 (Diabetes with other specified manifestations, type II or unspecified type, not stated as uncontrolled);
- M0240b: 707.15 (Ulcer of other part of foot);
- M0240c: 731.8 (Other bone involvement in diseases classified elsewhere);
- M0240d: 730.07 (Acute osteomyelitis, ankle and foot);
- M0240e: 041.11 (Staphylococcus aureus);
- M0240f: V58.62 (Long-term [current] use of antibiotics); and
- Other pertinent diagnosis: V58.67 (Long-term [current] use of insulin).

Remember, when the physician only notes diabetes on your orders and doesn't record the type, the ICD-9-CM Official Guidelines for Coding and Reporting state that you should default to reporting type II diabetes.

When reporting 250.8x, remember to include an additional code to identify the manifestations--in this case, the ulcer and the osteomyelitis.

**Safe to assume:** ICD-9 assumes a relationship between diabetes and osteomyelitis when both conditions are present, unless the physician has indicated in the medical record that the acute osteomyelitis is totally unrelated to the diabetes. Code 731.8 is a manifestation code which requires you to code the specific bone change such as the osteomyelitis also.

Osteomyelitis is a bone infection that generally takes a while to heal. If the patient is on a 6-8 week regimen of antibiotics, it's appropriate to list V58.62 (Long-term [current] use of antibiotics). However, if the antibiotics were ordered for a shorter period, such as ten days, you shouldn't include this code.

The coding guidelines don't provide a definition or time frame for long-term drug therapy. It's appropriate to document long-term use if a patient receives a drug on a regular basis and is expected to remain on the drug for a length of time or if he's taking the medication for prophylactic use. Documentation of long-term drug use is at the discretion of the health care provider.

**Remember:** Codes from subcategory V58.6 are always secondary codes. Secondary means any code other than the primary diagnosis; it does not mean the code must be listed second.

The V58.67 code was added to ICD-9 in October 2004 to help identify type II diabetic patients who use insulin.