

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

### You Be the Coder: Try Your Hand at These Psych Diagnosis Scenarios

Question 1: Our patient was admitted for management of congestive heart failure (CHF). She also has anemia. Her caregiver states that she is confused all the time and has moderate memory loss. She is on Aricept®. How should we code for her?

New York Subscriber

Question 2: Our patient is receiving aftercare following a total hip replacement. We are providing skilled nursing and physical therapy. He also has organic brain syndrome due to an old concussion (OBS). How should we code for him?

Texas Subscriber

Answer 1: List the following codes for this patient, says **Judy Adams, RN, BSN, HCS-D, HCS-O**, with **Adams Home Care Consulting** in Chapel Hill, N.C.

- M1020a: 428.0 (Congestive heart failure, unspecified);
- M1022b: 285.9 (Anemia, unspecified);
- M1022c: 780.93 (Memory loss).

You have some indications that the patient may have dementia. Her caregiver reports that she is confused all the time. And the patient is also taking Aricept which is used to treat dementia caused by Alzheimer's disease.

What you're missing is an actual dementia diagnosis. You can't code for this condition without a physician-documented diagnosis, so you won't be able to include it given the information you currently have.

Best bet: Query the physician to request a dementia diagnosis and the etiology, if known.

In the meantime, you'll list the CHF diagnosis first because this is the reason you are in the home. Follow this with the anemia code.

Even though you can't report a dementia diagnosis, you can list 780.93 for the patient's memory loss to help define her condition.

Answer 2: List the following codes for this patient, says Adams:

- M1020a: V54.81 (Aftercare following joint replacement);
- M1022b: 310.89 (Other specified nonpsychotic mental disorders following organic brain damage);
- M1022c: 907.0 (Late effect of intracranial injury without mention of skull fracture); and
- M1022d: V43.64 (Hip joint replacement).

The focus of care for this patient is aftercare for your patient's joint replacement, so your principal diagnosis is V54.81.

Your patient's OBS is due to old trauma, so you'll code for it as a late effect. The physician didn't specify whether the OBS is psychotic in nature or offer any other details about this condition, so you must list the code for other specified nonpsychotic mental disorders following OBS, 310.89. Dementia is an inappropriate diagnosis for this patient, Adams says.

Try this: Query the caregiver and the physician for more details about the OBS to see if you can list some more specific diagnosis codes for this patient.

Follow this with 907.0 to indicate that the OBS is the late effect of an intracranial injury. There is no mention of a skull fracture, so this is your code.

Finally, list V43.64 to indicate the specific joint replaced; in this case, the hip.