

MDS Alert

Reader Question: You Can Utilize 'Medically Complex' for Primary Diagnosis

Question: I have a resident who has numerous chronic diseases, some of which are better managed and less symptomatic than others. This resident has Type II diabetes, HIV, and now pneumonia. The HIV is managed well and does not seem to affect this resident's daily life. The diabetes and pneumonia are much more of an issue - complications from the diabetes landed this resident in our facility in the first place. How would I code the primary medical condition for item I0020 (Indicate the resident's primary medical condition category) in Section I (Active Diagnoses)?

Codify Subscriber

Answer: "For 10020, I would code 13 since he is Medically complex," says **Ronald A. Orth, RN, NHA, CPC**, senior SNF regulatory analyst at **Relias Learning** in Milwaukee, Wisconsin.

"I0020 and the AIDs Add-on are not related. You gain nothing by putting the B20 diagnosis code in I0020A," he adds.

However, with facilities have been able to bill at a higher rate for residents with HIV/AIDS, including with the current RUG-IV reimbursement categorization. See story on page XX for more information on how the Patient Driven Payment Model (PDPM) may affect facility reimbursement for residents with HIV/AIDS.