

OASIS Alert

Diagnosis Coding: Gear Up Now For New Pain Codes

Use pain codes in M0240 to paint a clearer picture of a patient's needs.

With new ICD-9 codes available in October, your diagnoses in M0230 and M0240 can more accurately support your reimbursement -- if you learn how to use the new codes.

The **Centers for Medicare & Medicaid Services** included a list of new ICD-9-CM codes in its new acute inpatient prospective payment system rule. And home health agencies must be ready to begin using the new codes on Oct. 1 -- with no grace period.

Pain codes are in a new category in the nervous system chapter, says coding expert **Lisa Selman-Holman**, principal in Denton, TX-based **Selman-Holman & Associates**. The new 338.xx series includes 11 new codes to better describe pain conditions:

- 338.0 (Central pain syndrome)
- 338.11 (Acute pain due to trauma)
- 338.12 (Acute post-thoracotomy pain)
- 338.18 (Other acute postoperative pain)
- 338.19 (Other acute pain)
- 338.21 (Chronic pain due to trauma)
- 338.22 (Chronic post-thoracotomy pain)
- 338.28 (Other chronic postoperative pain)
- 338.29 (Other chronic pain)
- 338.3 (Neoplasm related pain [acute] [chronic])
- 338.4 (Chronic pain syndrome).

Don't Overlook These Pain Code Uses

Unless pain management is the primary focus of care, these codes will be used in M0240, Selman-Holman explains. "Having specific pain codes could help you justify a great deal of care," notes **Lori Ladd**, area director and medical liaison for **Purdue Pharma** in Stamford, CT.

Crucial: The key is to use these codes as supplemental or secondary diagnoses. After Oct. 1 you will be able to code pain even when it is integral to the disease or condition, says coding consultant **Sparkle Sparks** with Redmond, WA-based **OASIS Answers**. "But the pain should be significant enough that you are addressing it in your plan of care," Sparks advises.

Suppose a physical therapist is working with a patient who has limited range of motion and trouble walking due to pain after a total hip replacement. The therapist might use 719.7 (Difficulty in walking) as her primary diagnosis, but in addition to coding the joint replacement, she could use new code 338.18 to note the acute postoperative pain that's hindering that patient's walking, suggests nurse consultant **Marvel Hammer** with **MJH Consulting** in Denver.

Reporting secondary diagnoses might seem like extra, unnecessary work. But if you can paint a clearer picture of what the patient is experiencing, these codes could help justify additional therapy sessions or even additional modalities, Hammer points out.

Helpful: Pain codes can also support trauma diagnoses in M0230 and remind clinicians to include pain management in

the plan of care.

Note: To sign up for Eli's Aug. 24 audioconference "2007 ICD-9 Coding Update for Home Health," call 1-800-508-2582. For more detailed coding instruction order Eli's Home Health ICD-9 Alert at www.elihealth.com or by calling 1-800-874-9180.