

OASIS Alert

DIAGNOSIS CODING ~ Take 'Excludes' Notes Seriously To Avoid Payment Delays

Don't just skim over those little black boxes when you're looking up codes.

Using codes in M0230 and M0240 that the ICD-9-CM manual defines as mutually exclusive will result in claims returned to providers -- and a cash flow slowdown for your agency.

Example: The 332.0 code for Parkinson's Disease excludes dementia, because another code -- 331.82 -- covers dementia with Parkinsonism. If your OASIS assessment includes separate codes for dementia and Parkinson's Disease, you'll see your claim returned for correction.

Background: In the ICD-9-CM coding manual, the tabular list (Volume 1) divides the codes from 001 to 999.9 into various diseases and body systems. This includes V and E codes as well. You will see the terms "includes" and "excludes" as you look through the codes for the system specific to a patient's diagnosis. Every coder must understand these two basic terms, because they show up over and over, explains coding expert **Jo Ann Baker** with **CodeRyte** in Bethesda, MD.

Tip: You must refer back to the beginning of the chapter, section, subsection or category to find these terms, because excludes and includes notes are not repeated, says Baker.

Don't Stop Reading Too Soon

If you move too quickly from reading the general three-digit heading on to looking for the appropriate fourth and fifth digits, you may skip right over the important excludes and includes notes, experts warn.

"Excludes" means you should report this condition with a code listed elsewhere. In some books, the "excludes" note will appear in a black box with white letters. The terms listed to the right of the note will tell you where to look for the codes for the excluded diagnoses, says clinical and coding consultant **Lynn Yetman**, with **Reingruber & Co.** in St. Petersburg, FL.

Example: When you look in the tabular index at 403 (Hypertensive renal disease), you will see: Excludes acute renal failure (584.5-584.9); renal disease stated as not due to hypertension; renovascular hypertension (405.0-405.9 with fifth-digit 1).

The term "includes," on the other hand, further defines a code and provides examples that may apply to the chapter, section or category you are researching, Yetman says. The "includes" note appears immediately under a three-digit code title and may be highlighted as a white box with black letters.

Example: If you are looking at 403 (Hypertensive renal disease), you will see: Includes arteriolar nephritis; arteriosclerosis of: kidney, renal arterioles; arteriosclerotic nephritis (chronic) (interstitial); hypertensive: nephropathy, renal failure, uremia (chronic);nephrosclerosis; renal sclerosis with hypertension; any condition classifiable to 585, 586, or 587 with any condition classifiable to 401.