

OASIS Alert

ICD-10 Update: Master ICD-10 Manifestation Coding

Welcome these diabetic manifestation coding changes.

You'll be happy to learn that the guidelines for coding manifestations in ICD-10 are identical to those in ICD-9. You'll see the same notes asking you to "use additional code" at the etiology code, and to "code first" at the manifestation code in the tabular list. Etiology/ manifestation pairs in the alphabetic index will still be listed together, etiology code first, followed by the manifestation codes in brackets. "The code in brackets is always to be sequenced second," the guidelines state.

For example: To code for dementia in Parkinson's disease, you'll find "G20 [F02.80]" in the alphabetic index under "dementia with Parkinson's disease." When you check these codes against the tabular list, you'll see a note at F02. -- (Dementia in other diseases classified elsewhere) advising you to "Code first: the underlying physiological condition."

New: The biggest difference in coding manifestations in ICD-10 is the change to coding diabetic manifestations. ICD-9 requires you to list at least two codes for most diabetic manifestations -- the diabetes code followed by the manifestation code. So, if your patient was diagnosed with gangrene due to diabetic peripheral vascular disease, you would need to list 250.70 (Diabetes with peripheral circulatory disorders; type II or unspecified type, not stated as uncontrolled); 443.81 (Peripheral angiopathy in diseases classified elsewhere); and 785.4 (Gangrene).

ICD-10 provides combination codes that include diabetes and its manifestations in a single code. So, for example rather than listing the three ICD-9 codes required to describe a patient with gangrene due to diabetic peripheral vascular disease, you'll be able to list a single code -- E11.52 (Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene) -- in ICD-10.

There are only a few diabetic manifestations that will require an extra code in ICD-10. One such manifestation is diabetic chronic kidney disease which requires the use of N18.- (Chronic kidney disease [CKD]) to indicate the stage of CKD. Diabetic ulcers also require an additional code from the L97.- (Non-pressure chronic ulcer of lower limb not elsewhere classified) category to indicate the location and severity of the ulcer.

Look for: An upcoming change to diabetes coding may require you to list gastroparesis as an additional code when it's a manifestation of diabetes. Recent changes at the gastroparesis code indicate that you should code diabetes first, if known.