

## **OASIS Alert**

## Reader Question: When Coding Logic and M1350 Conflict

**Question:** Our patient was hit by a metal swing and suffered a deep laceration to his lower leg, which was surgically closed. We are providing wound care. Is this a trauma wound, an open wound, or a surgical wound? How should we code for him? And how do we answer the OASIS wound items?

Nebraska Subscriber

**Answer:** This is an area where coding logic and OASIS logic collide. In coding logic, open wounds and trauma wounds are the same thing  $\square$  wounds caused by accident or violence, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C, HCS-O,** consultant and principal of **Selman-Holman & Associates** and **CoDR**  $\square$  **Coding Done Right** in Denton, TX. This includes wounds caused by animal bites, avulsions, cuts, lacerations, punctures and traumatic amputations.

On the OASIS, however, the term "open wound" takes on a broader definition. OASIS item M1350 asks "Does the patient have a skin lesion or an open wound?" The "open wound" in this instance is any wound, whether a "gaping hole" or a diabetic ulcer, Selman-Holman says. But a patient can have an open wound in M1350 without having an open wound for diagnosis coding purposes.

In your patient's case, you are providing aftercare for surgery due to injury and trauma. The wound is still considered an open (trauma) wound, so you would report the following codes:

M1020a: V58.43 (Aftercare following surgery for injury and trauma);

M1022b: 891.0 (Open wound of knee, leg [except thigh], and ankle, without mention of complication); and

M1022c: V58.31 (Encounter for change or removal of surgical wound dressings).

Because you're providing aftercare following surgery for injury and trauma, V58.43 is your primary diagnosis. ICD-9 instructs you to include other codes to identify the reason for the aftercare encounter, and V58.31 shows that you will be providing wound dressings. Do not place the dressing change code as the second code  $\Box$  move it further down in your list of diagnoses because it is a reason for an encounter, not a diagnosis, Selman-Holman says.

**Key:** Listing 891.0 shows that you are providing care for a trauma wound. Be sure to list this code in M1022b immediately following the aftercare V code because it's not a resolved condition, and you are eligible for additional case mix points when this Skin 1 diagnosis is listed as the principal diagnosis. Under the 2013 Home Health PPS, these additional points are triggered when an eligible diagnosis is listed in M1022b following the V code in M1020a.

The trauma wound code would get primary points when listed in M1020a if no aftercare code is applicable. If an aftercare code is applicable, as in this case, then the trauma wound earns primary points when placed in M1022b directly underneath the V code. If the trauma wound is listed below M1022b, then the lesser "other" diagnosis points are earned instead.

When it comes to responding to M1340  $\square$  Does this patient have a surgical wound, your answer for this patient is "0  $\square$  No." The wound is not a surgical wound. Repair of traumatic lacerations is excluded from surgical wounds on the OASIS.

The answer to M1350 is definitely a "yes" because the wound is not a surgical wound, pressure ulcer, stasis ulcer or a bowel ostomy and it requires ongoing intervention from the home health agency.

