ICD-10-CM for Home Health Outreach Staff
Webcast #2

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Referral Data: Impact Overview

- Lay the Groundwork for Comprehensive SOC Assessment
  - Accurate Case Mix
  - Appropriate Care Plan

- Provide Current & Historical Data
  - All Relevant Medical Data

- Clear Transmission of Prior Setting(s)

- Regulatory Foundation
  - Communication
  - Referral Needs/Orders
  - Face to Face Encounter
Objectives

- Identify expanded medical documentation for Home Health to assign accurate ICD-10-CM diagnosis codes;
- Discuss disease specific medical documentation most pertinent to home health providers;
- Detail required medical documentation for common home health diagnosis;
- Utilize tools and tips to enhance accurate ICD-10-CM diagnosis code selection and sequencing;
- Apply ICD-10-CM to common case examples in the home health setting that requires specific documentation.

Why is Coding So Important?

- **Statistical Data** – Track and trend best practice variances; volume; complications; treatment patterns
- **Research for Enhanced Outcomes and Treatments**
- **Reflects Patient Acuity** for injury or illness; Plan of Care centers on Codes and Severity Indices
- **Medical Necessity Determination**
- **PPS Payment** – HHRG calculation
- **Resource Allocation**
- **Risk Adjustment for Quality Outcomes**
- **Accurate Reimbursement for All Settings**
**Documentation is Key**

- All reported codes **MUST** be supported by physician documentation in the medical record.
- Report an updated, accurate picture of patient’s health status reflected in OASIS assessments and clinical documentation.
- Report diagnoses and conditions which relate to the patient’s CURRENT plan of care.
- Do NOT include conditions that have been resolved or no longer effect patients functioning and plan of care.

**Intake Is Critical Here**

- Medical Documentation to Support **ALL** Diagnoses.
- **Diagnosis Details**
  - Type of Disease or Injury
  - Acuity and Severity (Chronic or Acute)
  - With or without Signs and Symptoms
  - Etiology and/or manifestations of a disease
  - Laterality and anatomical location
  - With or without complications
  - External cause(s) of injury or illness
- **Specificity is Critical with ICD-10-CM**
Diabetes: A National Focus

- CMS has focused initiatives on Diabetes
- Diabetes is a national epidemic (CDC)
- ICD-10-CM codes align with the international classification systems for diabetes
- Federal mandate to diagnosis and treat earlier to prevent complications
- Increased code specificity to track and correlate with quality outcomes & costs
- Diabetes is a risk adjuster for home health quality outcomes
- *Diabetes remains case mix for Home Health*
  - 35% of all acute hospitalizations are related DM

DM: Documentation Must-Haves

- **Type of Diabetes**
  - Type 1: Juvenile
  - Type 2: NIDDM
  - Other
    - Drug Induced
    - Post Surgical
    - Secondary
    - Gestational
    - Due to Genetic Defects

- **Treatment(s)**
  - Long Term (Current) Use of Insulin?

- **Complications and/or Manifestations**

<table>
<thead>
<tr>
<th>Table 1. Classification and observations on types of diabetes mellitus</th>
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<tbody>
<tr>
<td><strong>Type</strong></td>
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<td>Type 1</td>
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<td>Gestational</td>
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<td>Genetic</td>
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More on Diabetes & Disorders

- **Significant Changes to Diabetes Mellitus**
- **Five (5) DM Categories**
  - E08 Diabetes Mellitus due to an underlying condition  
  - E09 Drug or chemical induced diabetes mellitus  
  - E10 Type 1 diabetes mellitus  
  - E11 Type 2 diabetes mellitus  
  - E13 Other specified diabetes mellitus  
- **Expanded Combination Codes for DM and manifestations of DM**
- Updated to reflect & align current clinical classifications
- No longer classified to controlled/uncontrolled

Diabetic Code Selections

- **Selection Based on Clinical Documentation**
  - Default to Type 2 if Unknown
- **Type of Diabetes**
  - Body System Affected
  - Use of insulin
  - Complications
  - Manifestations
  - Reason for secondary diabetes mellitus
- **Remember**
  - Use as many codes as necessary to detail a patient’s condition, including complications & manifestations

See DM Checklist
More on Manifestations

- I-10: Can No Longer Assume DM with
  - DM & Osteomyelitis
  - DM & Gangrene
- Need MD Documentation
  - All Manifestations
    - Cardiomyopathy
    - Nephropathy
    - Neuropathy
    - Retinopathy
    - Angiopathy
    - Diabetic Ulcer
    - Diabetic Encephalopathy
  - All Complications (DKA; HNS; Coma; Gastroparesis;...)

One Common Scenario

- Patient admitted to home health with new diagnosis of Type 2 diabetes. SNV for diabetic teaching, insulin management. HTN; Hypothyroidism.

- ICD-9-CM
  
  250.00 DM
  410.9 HTN
  244.9 Hypothyroidism
  V58.67 L-T Use Insulin

- ICD-10-CM
  
  E11.9 Type 2 Diabetes mellitus without complications
  I10 Essential (primary) HTN
  E03.9 Hypothyroidism, unspecified
  Z79.4 L-T Use of Insulin
Another DM Case Scenario

- Patient admitted post hospitalization for foot amputation due to diabetic peripheral angiopathy; vascular disease. Insulin dependent Type 2 diabetes with gastroparesis secondary to the diabetes. COPD, hypothyroidism.
  - Z47.81 Aftercare, following surgery (for) (on) amputation
  - E11.51 Type 2 diabetes with peripheral angiopathy
  - E11.43 Type 2 diabetes with gastroparesis
  - J44.9 COPD
  - E03.9 Hypothyroidism, unspecified
  - Z89.439 Absence of (complete or partial) foot (acquired)

Other DM Scenarios

- Patient with diabetic nephrosis due to steroid use
  - T38.0x5D poisoning by adverse effect of glucocorticoids and synthetic analogues
  - E09.21 Drug induced diabetes with kidney complications

- Hypoinsulinemia due to postpancreatectomy
  - E89.1 Postsurgical hypoinsulinemia
  - Use additional codes: E08; Z79.4; Z90.411

- Diabetic amyotrophy
  - Neurogenic muscle weakness in the hips and back
  - Early complication of diabetes
  - E11.44 Type 2 Diabetes with diabetic amyotrophy
CV Diseases & Disorders

- **Valve Disorders**
  - Coded by Location & Etiology

- **Conduction Disorders**
  - Blocks; Arrhythmias

- **Ischemic Heart Disease**
  - Chronic Ischemic Heart Disease

- **Heart Failure (I50.-)**

- **Acute Myocardial Infarctions (I21.-; I22.-)**

- **Cerebrovascular Disease (I60-I69)**
  - Sequelae: Residuals Post Acute CVA I69.-

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Documentation Needs

- **HTN (Assumption Code Still in Place with CKD)**
  - Includes all types of HTN except
  - HTN due to any condition
    - Gestational
    - Lupus
    - Other

- **Atrial Fibrillation**
  - **Type**
    - Paroxysmal
    - Persistent
    - Chronic
  - Fibrillation versus Flutter
ICD-10-CM HTN

- **I10 Essential HTN**
  - Includes: Arterial; Benign; Malignant; Unspecified

- **I11.0 Hypertensive Heart Disease with Heart Failure**
  - Use additional code for heart failure I50.-

- **I11.9 Hypertensive Heart Disease without Heart Failure**

- **I12 Hypertensive CKD**
  - Use additional code for CKD (N18-)

- **I13 Hypertensive Heart & Chronic Kidney Disease with Stage 5 CKD or End Stage Renal Disease**

More on HTN

- **I15 Secondary HTN**
  - Code also the underlying condition
  - **I15.0 Renovascular HTN**
  - **I15.1 HTN secondary to other renal disorders**
  - **I15.2 HTN secondary to endocrine disorders**
  - **I15.8 Other secondary HTN**
  - **I15.9 Secondary HTN, unspecified**

  **Sequencing for Secondary HTN is determined by the encounter needs**
  - Discretionary based on the Plan of Care
Case Scenario

- Patient admitted post hospitalization with a chronic nonhealing stage 3 decubitus ulcer of the right ankle. Patient is a Type 1 diabetic with peripheral vascular disease due to the diabetes. Stage 4 CKD, HTN, hypercholesterolemia, status post BKA.
  - L89.513 Pressure ulcer, stage 3, ankle
  - E10.51 Type 1 diabetes with peripheral angiopathy
  - I12.9 Chronic hypertensive kidney disease (Stage 1-4)
  - N18.4 Stage 4 (severe) CKD
  - E78.0 Hypercholesterolemia
  - Z89.52 Absence, limb, below the knee (acquired)

More Case Scenarios

- **Stage III CKD, HTN, mild chronic heart failure**
  - I12.9 Hypertensive CKD with Stage 1 through Stage 4 or unspecified CKD
  - N18.3 CKD, Stage III (moderate)
  - I50.9 Heart Failure, Unspecified

- **COPD; Hypertensive Heart Disease with Heart Failure; Oxygen Dependent**
  - J44.9 Pulmonary, chronic obstructive
  - I11.0 Hypertensive Heart Disease with Heart Failure
  - I50.9 Heart Failure, unspecified
  - Z99.81 Oxygen (long term) (supplemental)
Heart Valve Disorders

- **Stenosis**
  - Narrowing of valve orifice (calcification)

- **Prolapse**
  - Most Common Valve Disorder
    - 5-10% of population
  - Mitral Valve Prolapse (MVP)
  - “Click Murmur” or “Barlow’s Syndrome

- **Regurgitation**
  - Valve Insufficiency
  - Does not close properly
  - Backflow

Valve Disorders

- **Documentation Needs: Valve Disorders**
  - Type of Disorder
  - Valve(s) Involved
  - Cause of disorder, if applicable
  - Congenital or non-congenital

- **I05.0** Rheumatic Mitral Stenosis
- **I05.1** Rheumatic Mitral Insufficiency
- **I07.0** Rheumatic Tricuspid Stenosis
- **I34.1** Nonrheumatic Mitral Valve Prolapse
- **I35.1** Nonrheumatic Aortic Valve Insufficiency
- **I37.0** Nonrheumatic Pulmonary Valve Stenosis
Angina: I20.0-I20.9

- **Angina Pectoris**
  - Discomfort or pain in Chest
  - Inadequate Blood Supply to the Heart
  - Early Warning Sign of AMI

- **Code Selection**
  - Based on Type of Angina

- **Other Code Guidance**
  - When using a combination code that includes atherosclerosis, it is **NOT** necessary to use an additional code for angina pectoris
  - A Causal relationship is *assumed* with atherosclerosis and angina, unless the documentation indicates otherwise

## Angina Diagnoses

- **I20.0 Unstable Angina**
  - Accelerated; Crescendo; De Nove; Intermediate Coronary Syndrome; Preinfarction Syndrome; Worsening Effort Angina

- **I20.1 Angina Pectoris with Documented Spasm**

- **I20.8 Other Forms of Angina**
  - Angina equivalent; Angina of effort; Coronary slow flow syndrome; Stenocardia

- **I20.9 Angina Pectoris, Unspecified**
  - Angina NOS; Anginal syndrome; Cardiac angina; Ischemic chest pain
One Case Scenario

- Patient admitted home health with Unstable Angina, HTN, CHF, DM controlled with oral hypoglycemics.
- I20.0 Unstable Angina
- I50.9 Congestive Heart Failure NOS
- I10 Essential (Primary) Hypertension
- E11.9 Type 2 Diabetes without complications

Ischemic Heart Disease: I25

- **Etiology**
  - Narrowing of coronary arteries

- **Code Selection**
  - Location of Blockages
  - Past Medical History & Symptomatology
  - Type of Angina, if applicable

- **Code Guidance**
  - When using one of these combination codes it is **NOT** necessary to use an additional code for angina pectoris
  - A **causal relationship** is assumed with atherosclerosis and angina, unless the documentation indicates otherwise
Documentation Needs

- **Type and Complication(s)**
- **Angina Pectoris**
  - Unstable (accelerated; crescendo; intermediate coronary syndrome)
  - With Documented Spasm (angiospastic; prinzmetal; variant)
  - Other Forms (coronary slow flow syndrome; stenocardia; ischemic chest pain)
- **ASHD + Angina**
  - CAD with Angina
  - Cause and Effect Assumed by Coder
- **Other Complications & Treatments**

Ischemic Heart Diagnoses

- I25.10 Atherosclerotic heart disease of native artery without angina pectoris
- I25.11 Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
- I25.111 Atherosclerotic heart disease of native artery with angina pectoris with documented spasm
- I25.118 Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris
- I25.119 Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris
- I25.2 Old myocardial infarction
- I25.3 Aneurysm of heart
- I25.41 Coronary artery aneurysm
More Ischemic Heart Dx Codes

- I25.41 Coronary artery aneurysm
- I25.42 Coronary artery dissection
- I25.5 Ischemic cardiomyopathy
- I25.6 Silent myocardial ischemia
- I25.7--Atherosclerosis of coronary artery bypass grafts and coronary artery of transplanted heart with angina pectoris
  - See Multiple Codes Here
- I25.8– Other forms of chronic ischemic heart disease
  - See Multiple Codes Here
- I25.9 Chronic ischemic heart disease, unspecified
  - *Ischemic Heart Disease (Chronic) NOS*

CHF Documentation Needs

- **Code Selection**
  - Acute/Chronic/Acute on Chronic
  - Type of Failure (Systolic; Diastolic)
  - Location: Right/Left

- **Guidelines**
  - Code etiology first if indicated
  - Heart failure following surgery: I97.13-
  - Heart Failure due to HTN: I11.0
  - Rheumatic Heart Failure: I09.81

- **Heart Failure Should Always Listed in First 6 Diagnoses for Home Care**
**Common HF Diagnoses**

- I50.1 Left Ventricular Failure
- I50.20 Unspecified systolic (congestive) HF
- I50.21 Acute systolic (congestive) HF
- I50.22 Chronic systolic (congestive) HF
- I50.23 Acute on chronic systolic (congestive) HF
- I50.9 Heart Failure, unspecified
- I50.30 Unspecified diastolic (congestive) HF
- I50.31 Acute diastolic (congestive) HF
- I50.32 Chronic diastolic (congestive) HF
- I50.33 Acute on chronic diastolic (congestive) HF

**MI Documentation Needs**

- **Date of MI is Critical**
- **Date of Sequential MI is Critical**
- Acute MI = 4 weeks (28 days)
- **Type of MI**
  - STEMI
    - Anterior wall (left main coronary artery; left anterior descending coronary, other)
    - Inferior wall (right coronary artery. Other)
    - Other sites (Circumflex)
  - Non-STEMI
    - Subendocardial MI; Transmural MI
- STEMI to NSTEMI: Due to thrombolytic therapy
### AMI Diagnosis Codes

- I21.01 ST elevation MI involving the left main coronary artery
- I21.02 ST elevation MI involving the left anterior descending coronary artery
- I21.09 ST elevation MI involving other coronary artery of anterior wall
- I21.11 ST elevation MI involving right coronary artery
- I21.19 ST elevation MI involving other coronary artery of inferior wall
- I21.21 ST elevation MI involving left circumflex coronary artery
- I21.9 ST elevation MI involving other sites

### More AMI Diagnosis Codes

- I21.3 ST elevation MI of unspecified site
- I21.4 Non-ST elevation MI
- I22.0 Subsequent ST elevation MI of anterior wall
- I22.1 Subsequent ST elevation MI of inferior wall
- I22.2 Subsequent ST elevation MI myocardial infarction
- I22.8 Subsequent ST elevation MI of other sites
- I22.9 Subsequent ST elevation MI of unspecified site

**Remember:** Use the I22 codes for a patient who has a second MI within the 4 week timeframe of the initial AMI
Pulmonary Disease

- COPD is a Primary or Secondary Diagnosis for over 20% of all Home Care Patients
- COPD, is a no longer a case mix diagnosis for home health
- COPD is a chronic disease that impacts every home health Plan of Care – without exception
- COPD impacts Acute Hospitalization and Emergent Care Rates
  - Higher Risk of Uncontrolled Symptoms
  - Higher Risk of Falls
  - Higher Risk of Infections
  - Higher Risk of Complications

Documentation Needs

- COPD versus Emphysema
  - Acute or Chronic
  - Infections agent (Streptococcus; Coxsackie virus; Mononucleosis; etc.) if indicated

- Asthma
  - Mild, moderate or severe
  - Intermittent or Persistent
  - Uncomplicated, with exacerbation, with status asthmaticus
  - Exposure to tobacco smoke

- Pneumonia
  - Vital or bacterial; Causal Agent
  - Anatomical location (Lobular; bronchopneumonia)
COPD Diagnosis Examples

- **J44**: Other chronic obstructive pulmonary disease
  - Code also type of asthma
  - Use additional codes as well
- **J44.0** Chronic obstructive pulmonary disease with acute lower respiratory infection
  - Use additional code to identify the infection
- **J44.1** Chronic obstructive pulmonary disease with (acute) exacerbation
  - Decompensated COPD
- **J44.9** Chronic obstructive pulmonary disease, unspecified (COPD NOS)

Emphysema

- **J43** Emphysema
  - Use additional code to identify
    - Exposure to environmental tobacco smoke (Z77.22)
    - Exposure to tobacco smoke in the perinatal period (Z96.81)
    - History of tobacco use (Z87.891)
    - Occupational exposure to environmental tobacco smoke (Z57.31)
    - Tobacco dependence (F17.-)
    - Tobacco use (Z72.0)
- **J43.0** Unilateral pulmonary emphysema (MacLeod’s Syndrome)
- **J43.1** Panlobular emphysema
- **J43.2** Centrilobular emphysema
- **J43.8** Other emphysema
- **J43.9** Emphysema, unspecified
Asthma Diagnosis Examples

- **Documentation Needs**
  - Severity of disease
  - Whether acute exacerbation exists
  - Whether status asthmaticus exists
  - Code additional codes as indicated

  - **J45.20** Mild intermittent asthma, uncomplicated
  - **J45.21** Mild intermittent asthma with (acute) exacerbation
  - **J45.22** Mild intermittent asthma with status asthmaticus
  - **J45.32** Mild persistent asthma with status asthmaticus
  - **J45.901** Unspecified asthma with (acute) exacerbation
  - **J45.902** Unspecified asthma with status asthmaticus
  - **J45.909** Unspecified asthma, uncomplicated

Common Case Scenario

- Patient admitted post hospitalization for acute transmural anterior wall STEMI. Parkinson’s; asthma; diabetes controlled by oral hypoglycemics.

  - **I21.09** ST elevation (STEMI) MI involving other coronary artery of anterior wall
  - **G20** Parkinson’s Disease
  - **J45.909** Unspecified Asthma, uncomplicated
  - **E11.9** Diabetes, Type 2
Pharyngitis & Pneumonia

- Pharyngitis
  - Acute or Chronic
  - Infectious Agent (Streptococcus; coxsackie virus; mononucleosis;...)

- Pneumonia
  - Viral or Bacterial
  - Causal Organism (E.Coli; MRSA;..)
  - Anatomical Location
    - Lobular
    - Bronchopneumonia

- Treatment(s)

Pneumonia Specificity

- J12 Viral Pneumonia, not elsewhere classified
  - Code first associated influenza, if applicable
- JJ13 Pneumonia due to Streptococcus pneumonias
- J14 Pneumonia due to Hemophilus influenzae
- J15.0 Pneumonia due to Klebsiella pneumoniae
- J15.1 Pneumonia due to Pseudomonas
- J15.211 Pneumonia due to Methicillin susceptible Staphylococcus aureus
- J15.212 Pneumonia due to Methicillin resistant Staphylococcus aureus
- J18.0 Bronchopneumonia, unspecified organism
- J18.9 Pneumonia, unspecified organism
Case Scenario

- Patient has pneumonia due to Hemophilus influenza. Chronic obstructive lung disease with lower respiratory infection; Nicotine dependence

  J14 Pneumonia due to Hemophilus influenza
  J44.0 Chronic obstructive pulmonary disease with lower respiratory infection
  F17.218 Nicotine dependence, cigarettes, with other nicotine induced disorders

Document Infectious Agent If Known

Flu Season is Here

- Causes
  - Viruses

- Types
  - Two Main Types
    - Type A (includes H1N1)
    - Type B (less common)

- Code Selection
  - Virus
  - Manifestation(s)

- Remember
  - Code Guidelines: Clear diagnostic statements
  - Default Code: J11.1 (Influenza NOS)
**Documentation Needs**

- **Influenza**
  - Influenza due to certain identified viruses
    - Only confirmed cases of influenza due to certain influenza viruses are reported
  - Influenza due to certain unidentified viruses
    - “Probable”, “Suspected”, “Possible”
    - J11.1 Influenza due to unidentified influenza virus with gastrointestinal manifestations

- **Manifestations or Complications of Influenza**
  - GI Symptoms
  - Respiratory conditions
  - Pneumonia

**Influenza Diagnosis Examples**

- J09.x1 Influenza due to identified novel influenza A virus with pneumonia
- J09.x2 Influenza due to identified novel influenza A virus with other respiratory manifestations
- J09.x3 Influenza due to identified novel influenza A virus with gastrointestinal manifestations
- J09.X9 Influenza due to identified novel influenza A virus with other manifestations
- J10.1 Influenza due to other identified influenza virus with respiratory manifestations
- J10.89 Influenza due to other influenza virus with other manifestations
More on Influenza Data

- **Multiple Codes may be used to report a case of influenza**
  - J09: Use additional codes for manifestations
    - J85.1 lung abscess
    - J91.8 pleural effusion
    - J01.- sinusitis
  - J10: Use additional code to identify virus
    - Code also type of pneumonia
    - Use additional codes for manifestations

- **Influenza may be a primary or secondary diagnosis, depending on the Plan of Care**

- **Coders MUST read ALL instructional notes**

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Common Case Scenarios

- **Acute bronchitis due to Streptococcus A; mild chronic heart failure**
  - J20.2 Acute bronchitis due to streptococcus
  - I50.9 Heart Failure, Unspecified

- **Influenza due to other identified influenza virus with otitis media; Hypertensive Heart Disease with Heart Failure; Oxygen Dependent**
  - J10.83 Influenza due to other identified influenza virus with otitis media
  - I11.0 Hypertensive Heart Disease with Heart Failure
  - I50.9 Heart Failure, unspecified
  - Z99.81 Oxygen (long term) (supplemental)
Neoplasms

- Neoplasm Terminology
  - Malignant Primary
  - Malignant Secondary (metastatic)
  - Ca In Situ
  - Benign
  - Uncertain behavior
  - Unspecified behavior

- Anatomical Specificity
  - Specific anatomical location is key
  - Lung Cancer: (Which lung?; Which lobe?)
  - Breast Cancer: (Which breast?; Which quadrant?)

Malignant Neoplasms

- Type (Topography) and Site

- Primary
  - Melanomas
  - Merkel cell carcinomas
  - Mesotheliomas

- Excludes
  - Neuroendocrine tumors
  - Lymphoid
  - Hemapoietic (ex. Hodgkin’s Lymphoma)

- Example: Adenocarcinoma of Transverse Colon
  - Specific Type; Specific Location
More on Neoplasms

- **Leukemia**
  - **Type**
    - Lymphoid; myelomonocytic; promyelocytic; erythroid; mast cell; ........
  - Current or In Remission
  - In Relapse

- **Lymphoma**
  - **Type**
    - Nodular lymphocyte predominant; nodular sclerosis classical; mixed cellularity classical; lymphocyte-depleted classical; lymphocyte-rich
    - What Location?

- **Treatment Options & Plans**

Skin Cancer

- **Type**
  - Basal Cell Carcinoma
  - Squamous Cell Carcinoma
  - Carcinoma in situ
  - Melanoma in-situ

- **Anatomical Location & Laterality**
  - Right or left
  - Forearm; Shoulder; Face; etc......

- **Site Specific**
  - For diagnosis In-Situ and/or Melanomas
Anemia

- Anemia
  - Type
    - Chronic or Acute
    - Treatment(s)
  - Anemia and Malignancy
    - Type & Site of Cancer
    - Anemia “due to” or “because of”
  - Anemia as Adverse Effect of Chemotherapy and/or Treatment
  - Nutritional Deficits
  - Treatment(s)

More on Chemo Impact

- Adverse Effect of Chemotherapy
  - Documentation Must Include
    - Adverse Effect: Sign or Symptom
    - Drug or Therapy: Chemotherapy or Radiation
    - Reason for Therapy: Cancer (Type; Location; Laterality)

- One Example
  - Fever and chills due to adverse effect of chemotherapy, carcinoma of the pancreas
    - R50.9 Fever, unspecified
    - T45.1x5D Adverse effect of antineoplastic and immunosuppressive drugs, subsequent encounter
    - C25.9 Malignant neoplasm of pancreas, unspecified
Case Scenario

- Primary: C50.912 Malignant neoplasm of unspecified site of left female breast
- Secondary: C78.7 Secondary neoplasm of the liver
  - D63.0 Anemia secondary to neoplasm
  - G89.3 Neoplasm Pain
  - R64 Cachexia
  - Z66 DNR

Bottom Line on I-10-CM Diagnoses

- MD Documentation is Critical
  - Etiology
  - Complications
  - Manifestations
  - Treatments
- Pain
  - Site specific
  - Cause (Neoplasm; Trauma; Chronic; Other)
- Dementia
  - Identify cause if known (Alzheimer’s; Parkinson’s…)
  - If cause is not known
    - Identify behavior Issues (wandering; irritation; combative…)
Pain

- **Site –Specific Pain (Acute or Chronic?)**
  - Location & Laterality
    - Cervicalgia
    - Left or Right Knee
    - RUQ Abdomen
- **Pain due to Neoplasm**
  - What Type of Cancer?
  - Location & Laterality
- **Chronic Pain Syndrome**
- **Pain due to Trauma**
  - What Kind of Trauma?
    - Fracture or Contusion? Cause?

Case Scenarios

- Patient has acute neck pain secondary to falling down stairs.
  - G89.11 Acute Pain due to Trauma
  - M54.2 Cervicalgia
  - W10.9xxD Fall on or from unspecified steps/stairs
- Patient has neoplasm pain secondary to liver cancer.
- G89.3 Neoplasm Pain
- C22.9 Malignant neoplasm of the liver, not specified as primary or secondary
Back Pain

- Documentation Needs: Specificity
  - Lumbago or Lower Back Pain
  - Pain due to Intervertebral Disc Disorder
    - Site of Spine?
    - Associated radiculopathy, myelopathy, other complications and/or manifestations

- Back and Flank Pain
  - Other manifestations and complications
  - Pregnancy
  - Kidney Stone
  - UTI

Urinary Tract Infection (UTI)

- Cystitis (Kidney or Bladder Infection)
  - Acute or Chronic
  - With/without Hematuria
  - By Type: Interstitial; Trigonitis; Irradiation

- UTI
  - Only used when site is not identified
  - Explore additional data to identify infectious agent

- CKD Specificity
  - Stage (1-5 or ESRD)
    - Mild (Stage 2); Moderate (Stage 3); Severe (Stage 4)
  - Is patient on Dialysis?
Alzheimer’s Specificity

- **ICD-10-CM Tabular Instructions**
  - “Use additional code”
  - **MUST** Code Dementia with or without behavioral disturbance with Alzheimer’s Disease

- **G30 Series**
  - G30.0 Alzheimer’s disease with *early onset*
  - G30.1 Alzheimer’s disease with *late onset*
  - G30.8 Other Alzheimer’s disease
  - G30.9 Unspecified Alzheimer’s Disease

- **Follow Physician Documentation for Onset**
  - Code G30.9 when no specific documentation exists about the age of disease onset

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Case Scenario

- **72 year old male admitted Home Health with primary dx of anemia secondary to lung cancer. Alzheimer’s with late onset. History of tobacco use.**
  - C34.90 Malignant neoplasm of unspecified part of unspecified bronchus or lung
  - D63.0 Anemia in neoplastic disease
  - **G30.1** Alzheimer’s Disease with Late Onset
  - F02.80 Dementia in other diseases classified elsewhere without behavioral disturbance
  - Z87.891 History of tobacco use
Common Case Scenario

- Patient post hospitalization for end stage COPD. Daughter is caregiver. Patient has dementia with increased behavioral disturbance, including wandering. HTN.
- J44.1 COPD, end stage
- F03.91 Dementia, unspecified, with behavioral disturbance
- I10 HTN
- Z91.83 Wandering in diseases classified elsewhere

Multiple Sclerosis: G35

- **Multiple Sclerosis**
  - Demyelinating Disease of the Central Nervous System
- MS G35 Includes:
  - Disseminated multiple sclerosis
  - Generalized multiple sclerosis
  - Multiple sclerosis NOS
  - Multiple sclerosis of brain stem
  - Multiple sclerosis of cord
- **Primary or Secondary Diagnosis**
- **List all Pertinent Diagnoses on Plan of Care**
- **Resources: National MS Society**
**Epilepsy: G40**

- **Brain Disorder in which clusters of brain cells send abnormal signals to the body**
- **Causes**
  - Trauma
  - Congenital
  - Drug induced
  - Other
- **Code Selection**
  - Type of Epilepsy
  - Intractable or not intractable
  - With or without status epilepticus

**ICD-10-CM Epilepsy Examples**

- G40 Epilepsy and recurrent seizures
- G40.001 Localization–related (focal)(partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, not intractable, with status epilepticus
- G40.009 Localization-related (focal)(partial) idiopathic epilepsy and epileptic syndromes with seizures of localized onset, not intractable, without status epilepticus
- G40.101 Localization-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures not intractable, with status epilepticus
- G40.109 Localization-related (focal)(partial) symptomatic epilepsy and epileptic syndromes with simple partial seizures not intractable, without status epilepticus
CP & Other Paralytic Syndromes

- **Cerebral Palsy**
  - Usually appears before the age of 3
  - Underdeveloped or damaged brain cells impact movement, learning, hearing, sight, and thinking

- **Hemiplegia**
  - Complete paralysis of one entire side of body
  - Congenital or acquired

- **Paraplegia**
  - Paralysis of lower extremities
  - Acquired or congenital

- **Monoplegia**
  - Paralysis of one limb

More Diagnosis Examples

- G81.90 Hemiplegia, unspecified affecting unspecified site
- G81.91 Hemiplegia, unspecified affecting right dominant side
- G81.92 Hemiplegia, unspecified affecting left dominant side
- G81.93 Hemiplegia, unspecified affecting right nondominant
- G82.20 Paraplegia, unspecified
- G82.21 Paraplegia, complete
- G82.22 Paraplegia, incomplete
- G82.50 Quadriplegia, unspecified
- G82.51 Quadriplegia, C1-C4 complete
- G82.52 Quadriplegia, C1-C4 incomplete
- G82.53 Quadriplegia, C5-C7 complete
- G82.54 Quadriplegia, C5-C7 incomplete
Obstetrics

- **Requires Documentation**
  - Final character for trimester of pregnancy
  - Trimester based on provider documentation
  - Routine Outpatient Prenatal Visits: Z34
  - Routine Prenatal for High Risk Pregnancies: O09

- **Diagnosis Code Guidelines**
  - Pre-existing conditions *versus* conditions due to the pregnancy: *Follow Manual Instructions*  
    - Gestational Diabetes versus Diabetes mellitus prior to pregnancy (O24)
    - Pre-existing HTN complicating pregnancy (O10)
  - Post Partum Complications: 6 weeks
  - Pregnancy Associated Cardiomyopathy: O93.3
  - Sequelae of Pregnancy: O94

Complications or Status

- **Alcohol and/or tobacco use during pregnancy, childbirth and puerperium**
  - O99.31 Alcohol use during pregnancy……
  - Code also F10- to indicate Alcohol related disorders, to identify manifestations of alcohol use
  - O99.33 Smoking (tobacco) complicating pregnancy…..
    - Assign for any mother who uses tobacco products during pregnancy
    - Code also F17, nicotine dependence OR Z72.0, tobacco use

- **HIV Status**
  - O98.7- HIV related illness complicating pregnancy..
  - Z21 Asymptomatic HIV infection status
One Case Scenario

- Patient seen with a gestation period of 29 weeks, for gestational diabetes. She requires close monitoring of her blood sugars for the possibility of starting insulin.
  - **O24.410** Gestational diabetes mellitus in pregnancy, diet controlled
  - **O09.893** Supervision of other high risk pregnancies, third trimester

More Case Scenarios

- 36 year old G2P1 woman admitted is now 26 weeks pregnant and being seen for gestational hypertension.
  - **O13.2** Pregnancy complicated by HTN
  - **O09.522** Single pregnancy, elderly, multigravida
  - **Z3A.26** Single pregnancy, 26 weeks gestation

- 16 week pregnancy with mild hyperemesis and UTI, E.Coli.
  - **O21.0** Hyperemesis, pregnancy
  - **O23.42** Pregnancy complicated by urinary infection
  - **B96.20** Infection, E.coli
  - **Z3A.16** Pregnancy, 16 weeks gestation
Many ICD-10 Challenges

- **Documentation Needs**
  - Requires *increased specificity* in the clinical documentation

- **Specific Documentation Needs**
  - *Laterality; Severity; Specific Affected site; Clinical Specificity*
  - **Examples:**
    - Atherosclerotic heart disease heart disease of native coronary artery with unstable angina pectoris (I25.110)
    - Rheumatic aortic valve diseases (I06)
    - STEMI MI involving left anterior descending coronary artery (I21.02)
    - Hemiplegia & hemiparesis following cerebral infarction affecting right dominant side (I69.351)

**Clinicians: Increased A & P for 2015 and Beyond**

Agency Risk Areas: ICD-10

- **Reimbursement Issues: Backlogs; Claims Denials**
- **Allocating Adequate ICD-10-CM Resources**
  - Dual Coding and Testing
  - Monitoring and Compliance Oversight
- **Adequate Systemic Implementation Planning**
  - Comprehensive Agency ICD-10 Assessment
  - Monitor Vendor and Partner Preparedness
- **Lack of Access to Precise Physician Documentation**
  - Ensure Accurate ICD-10 Code Assignment
- **Specialty Resource Access During Transition**
  - Oversight and Monitoring of ICD-10 Compliance and Impact
Resource Web Sites

www.cms.hhs.gov
Centers for Medicare & Medicaid Services
PPS Federal Register

www.cdc.gov
Centers for Disease Control
Official ICD-9-CM Code Guidelines

www.ahima.org
AHIMA (American Health Information Management Association)

www.cms.hhs.gov/HomeHealthQualityInits/12_HHQI0OASISUSERManual.asp
OASIS User’s Manual Revised 12/12

www.medicalspecialtycoding.com
Board of Advanced Medical Coding

Available Education Programs as Webcasts and DVDs

- Corporate Compliance in the Home Health Setting
- HIPAA and What It Means for Home Health Providers
- Care of the Geriatric Patient
- Abuse and Neglect: Your Care Responsibilities
- Advanced Directives
- Infection Control for Home Care and Hospice
- Care for the Patient with Dementia
- Home Safety
- Clinical Documentation
- Disease Management and Special Diets
- Personal Safety and Violence in the Workplace

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- Performance Improvement;
- Clinical Operations;
- Emergency Disaster Planning;
- Infection Control;
- Administration and Organizational Structure;
- On-site Interim Management;
- Strategic and Business Continuity Planning;
- Staff Education and Retreats;
- Quality Outcome Enhancement;
- Best Practices and Leadership Development; and
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<table>
<thead>
<tr>
<th>ICD-9-CM Diagnoses</th>
<th>ICD-10-CM Code Equivalent(s)</th>
</tr>
</thead>
</table>
| 250.00 Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled | E11.9 Type 2 diabetes mellitus without complications  
E13.9 Other specified diabetes mellitus without complications |
| 250.01 Diabetes mellitus without mention of complication, type 1 (juvenile type), not stated as uncontrolled | E10.9 Type 1 diabetes mellitus without complications |
| 250.02 Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled | E11.65 Type 2 diabetes mellitus with hyperglycemia |
| 250.03 Diabetes mellitus without mention of complication, type 1, stated as uncontrolled | E10.65 Type 1 diabetes with hyperglycemia |
| 250.40 Diabetes with renal manifestations, type 2 or unspecified, not stated as uncontrolled | E11.21 Type 2 diabetes mellitus with diabetic nephropathy  
E11.22 Type 2 diabetes with diabetic chronic kidney disease  
E11.29 Type 2 diabetes with other diabetic kidney complications  
| 250.50 Diabetes with ophthalmic manifestations, type 2 or unspecified type, not stated as uncontrolled | E11.311 Type 2 diabetes mellitus with unspecified retinopathy with macular edema  
E11.319 Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema  
E11.321 Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema  
| 250.60 Diabetes with neurological manifestations, type 2 or unspecified, not stated as uncontrolled | E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified  
E11.41 Type 2 diabetes mellitus with diabetic mononeuropathy  
E11.42 Type 2 diabetes mellitus with diabetic polyneuropathy  
E11.43 Type 2 diabetes mellitus with diabetic autonomic (poly) neuropathy  
E11.44 Type 2 diabetes mellitus with diabetic amyotrophy  
E11.49 Type 2 diabetes mellitus with other diabetic neurological complication  
E11.610 Type 2 diabetes mellitus with diabetic neuropathic arthropathy  
<table>
<thead>
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<th>ICD-9-CM Diagnoses</th>
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<tbody>
<tr>
<td>250.70 Diabetes with peripheral circulatory disorders,</td>
<td>E11.51 Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene</td>
</tr>
<tr>
<td>type 2 or unspecified type, not stated as uncontrolled</td>
<td>E11.52 Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene</td>
</tr>
<tr>
<td></td>
<td>E11.59 Type 2 diabetes mellitus with other circulatory complications</td>
</tr>
<tr>
<td>250.80 Diabetes with other specified manifestations, type</td>
<td>E11.618 Type 2 diabetes with other diabetic arthropathy</td>
</tr>
<tr>
<td>2 or unspecified type, not stated as uncontrolled</td>
<td>E11.620 Type 2 diabetes with diabetic dermatitis</td>
</tr>
<tr>
<td></td>
<td>E11.621 type 2 diabetes with foot ulcer</td>
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<tr>
<td></td>
<td>E11.622 Type 2 diabetes with other skin ulcer</td>
</tr>
<tr>
<td></td>
<td>E11.628 Type 2 diabetes with other skin complications</td>
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<tr>
<td></td>
<td>E11.630 Type 2 diabetes with periodontal disease</td>
</tr>
<tr>
<td></td>
<td>E11.638 Type 2 diabetes with other oral complications</td>
</tr>
<tr>
<td></td>
<td>E11.649 Type 2 diabetes with hypoglycemia without coma</td>
</tr>
<tr>
<td></td>
<td>E11.65 Type 2 diabetes with hyperglycemia</td>
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<tr>
<td></td>
<td>E11.69 Type 2 diabetes with other specified complication</td>
</tr>
<tr>
<td>250.81 Diabetes with other specified manifestations, type</td>
<td>E10.618 Type 1 diabetes mellitus with other diabetic arthropathy</td>
</tr>
<tr>
<td>1 (juvenile type), not stated as uncontrolled</td>
<td>E10.620 Type 1 diabetes mellitus with diabetic dermatitis</td>
</tr>
<tr>
<td></td>
<td>E10.621 Type 1 diabetes mellitus with foot ulcer</td>
</tr>
<tr>
<td></td>
<td>E10.622 Type 1 diabetes mellitus with other skin ulcer</td>
</tr>
<tr>
<td></td>
<td>E10.628 Type 1 diabetes mellitus with other skin complications</td>
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<tr>
<td></td>
<td>E10.65 Type 1 diabetes mellitus with hyperglycemia</td>
</tr>
<tr>
<td></td>
<td>E10.69 Type 1 diabetes mellitus with other unspecified complications</td>
</tr>
<tr>
<td>250.90 Diabetes with unspecified complication, type 2 or</td>
<td>E11.8 Type 2 diabetes with unspecified complications</td>
</tr>
<tr>
<td>unspecified type, not stated as uncontrolled</td>
<td>E13.8 Other specified diabetes mellitus with unspecified complications</td>
</tr>
<tr>
<td>250.91 Diabetes with unspecified complication, type 1</td>
<td>E10.8 Type 1 diabetes mellitus with unspecified complications</td>
</tr>
<tr>
<td>(juvenile type), not stated as uncontrolled</td>
<td></td>
</tr>
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<td>ICD-9-CM Diagnoses</td>
<td>ICD-10-CM Code Equivalent(s)</td>
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<tr>
<td>V54.81 Aftercare following Joint replacement</td>
<td>Z47.1 Aftercare following Joint Replacement Therapy</td>
</tr>
<tr>
<td>781.2 Abnormal Gait</td>
<td>R26.0 Ataxic Gait</td>
</tr>
<tr>
<td></td>
<td>R26.1 Paralytic Gait</td>
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<tr>
<td></td>
<td>R26.89 Other Abnormalities of Gait &amp; Mobility</td>
</tr>
<tr>
<td></td>
<td>R26.9 Unspecified Abnormalities of Gait &amp; Mobility</td>
</tr>
<tr>
<td>728.87 Generalized Muscle Weakness</td>
<td>M62.81 Muscle Weakness, Generalized</td>
</tr>
<tr>
<td>V15.88 History of Falls</td>
<td>Z91.81 History of Falls</td>
</tr>
<tr>
<td>428.0 Congestive Heart Failure</td>
<td>I50.9 Heart Failure, Unspecified</td>
</tr>
<tr>
<td>401.9 Essential Hypertension, Unspecified</td>
<td>I10 Essential (Primary) Hypertension</td>
</tr>
<tr>
<td>427.31 Atrial Fib</td>
<td>I48.0 Atrial Fibrillation</td>
</tr>
<tr>
<td>496 COPD NOS</td>
<td>J44.9 Chronic Obstructive Pulmonary Disease, Unspecified</td>
</tr>
<tr>
<td>491.21 Obstructive Chronic Bronchitis with Acute Exacerbation</td>
<td>J44.1 Chronic Obstructive Pulmonary Disease with Acute Exacerbation</td>
</tr>
<tr>
<td>492.8 Emphysema</td>
<td>J43.9 Emphysema, Unspecified</td>
</tr>
<tr>
<td>486 Pneumonia</td>
<td>J18.0 Bronchopneumonia, unspecified organism</td>
</tr>
<tr>
<td></td>
<td>J18.1 Lobar pneumonia, unspecified organism</td>
</tr>
<tr>
<td></td>
<td>J18.2 Hypostatic pneumonia, unspecified organism</td>
</tr>
<tr>
<td></td>
<td>J18.8 Other pneumonia, unspecified organism</td>
</tr>
<tr>
<td></td>
<td>J18.9 Pneumonia, unspecified organism</td>
</tr>
<tr>
<td>311 Depression</td>
<td>F32.9 Depression NOS</td>
</tr>
<tr>
<td>300.00 Anxiety</td>
<td>F41.9 Anxiety Disorder, Unspecified</td>
</tr>
<tr>
<td>331.0 Alzheimer’s Disease</td>
<td>G30.9 Alzheimer’s Disease, Unspecified</td>
</tr>
<tr>
<td>332.0 Parkinson’s Disease NOS</td>
<td>G20 Parkinson’s Disease</td>
</tr>
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<tr>
<td>340 MS</td>
<td>G35 Multiple Sclerosis</td>
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<tr>
<td>290.0 Senile Dementia</td>
<td>F03 Unspecified Dementia</td>
</tr>
<tr>
<td>294.10 Dementia in diseases classified elsewhere without behavioral changes</td>
<td>F02.80 Dementia in other diseases classified elsewhere without behavioral changes</td>
</tr>
<tr>
<td>294.11 Dementia in diseases classified elsewhere, with behavioral changes</td>
<td>F02.81 Dementia in other diseases classified elsewhere with behavioral changes</td>
</tr>
</tbody>
</table>
| 599.0 Urinary Tract Infection, Site Not Specified | N39.0 Urinary Tract Infection, Site Not Specified  
N30.00 Acute cystitis without hematuria | Identical              |
| 596.54 Neurogenic Bladder                 | N31.9 Neuromuscular dysfunction of bladder, unspecified                                     | Identical              |
| 585.9 CKD, Unspecified                    | N18.9 CKD, Unspecified                                                                      | Identical              |
| 585.6 ESRD                                | N18.6 End Stage Renal Disease                                                                | Z99.2 Additional Code for Dialysis Status     |
| 438.21 CVA with dominant Hemiplegia       | I69.351 Hemiplegia and Hemiparesis affecting right dominant side  
I69.352 Hemiplegia and Hemiparesis affecting left dominant side  
I69.353 Hemiplegia and Hemiparesis affecting right non dominant side  
I69.354 Hemiplegia and Hemiparesis affecting left non dominant side | Approximate            |
| 438.82 CVA with Dysphagia                 | I69.391 Dysphagia following cerebral infarction                                               | Use additional code for dysphagia R13.1-     |
| 787.20 Dysphagia                          | R13.10 Dysphagia, Unspecified                                                                | Approximate            |
| 530.81 GERD                               | K21.0 Gastro-esophageal reflux disease with esophagitis  
K21.9.....without esophagitis                                                           | Identical              |
<table>
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<tr>
<td>250.00 Diabetes Mellitus without mention of complication, Type 2 or Unspecified Type, not stated as uncontrolled</td>
<td>Ell.9 Type 2 Diabetes Mellitus without Complications</td>
<td>Approximate</td>
</tr>
<tr>
<td>440.20 Atherosclerosis</td>
<td>I70.201 Unspecified atherosclerosis of native arteries of extremities, right leg</td>
<td>Approximate</td>
</tr>
<tr>
<td>440.23, 707.1x Atherosclerosis with ulceration</td>
<td>I70.23 Atherosclerosis of native arteries of right leg with ulceration</td>
<td>6&lt;sup&gt;th&lt;/sup&gt; character specified exact location on leg 1-thigh 2-calf 3-ankle 4-heel and midfoot 5-other part of foot 8-other part of lower leg 9-unspecified site Use additional code to identify severity of ulcer(L97 with 5&lt;sup&gt;th&lt;/sup&gt; character “1”)</td>
</tr>
<tr>
<td>443.9 PVD</td>
<td>I73.9 Peripheral vascular disease, unspecified</td>
<td>Identical</td>
</tr>
<tr>
<td>453.42 Acute embolism and thrombosis of deep veins of lower extremity</td>
<td>I82.41 Acute embolism and thrombosis of femoral vein</td>
<td>6&lt;sup&gt;th&lt;/sup&gt; character is used to indicate right, left or bilateral</td>
</tr>
<tr>
<td></td>
<td>I82.42.........of iliac vein</td>
<td></td>
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<tr>
<td></td>
<td>I82.42.........of popliteal vein</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I82.44.........of tibial vein</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I82.49.........of other specified deep vein of lower extremity</td>
<td></td>
</tr>
<tr>
<td>454.0 Varicose veins of lower extremities with ulcer</td>
<td>I83.00 Varicose veins of unspecified lower extremity with ulcer</td>
<td>I83.0- codes are combination codes with more detail than ICD-9-CM 454.0. I83.0- codes are differentiated first by right, left or unspecified lower extremity, and then by the ulcer’s location on the leg or foot L97 code is also reported to identify the severity of the ulcer</td>
</tr>
<tr>
<td></td>
<td>I83.001.....with ulcer of thigh</td>
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</tr>
<tr>
<td></td>
<td>I83.002.....with ulcer of calf</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I83.003.....with ulcer of ankle</td>
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<tr>
<td></td>
<td>I83.004.....with ulcer of heel and midfoot</td>
<td></td>
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<tr>
<td></td>
<td>I83.005.....with ulcer other part of foot</td>
<td></td>
</tr>
<tr>
<td></td>
<td>I83.008.....with ulcer other part of lower leg</td>
<td></td>
</tr>
<tr>
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<td>ICD-10-CM Code Equivalent(s)</td>
<td>Additional Information</td>
</tr>
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</tr>
<tr>
<td>I83.009.....with ulcer of unspecified site</td>
<td></td>
<td></td>
</tr>
<tr>
<td>457.1 Lymphadema</td>
<td>I89.0 Lymphedema, not elsewhere classified</td>
<td>Approximate</td>
</tr>
<tr>
<td>459.81 Venous insufficiency</td>
<td>I87.2 Venous insufficiency (chronic) (peripheral)</td>
<td>Identical</td>
</tr>
<tr>
<td>459.81, 707.1x Stasis ulcer of lower extremity</td>
<td>I87.2 Venous insufficiency (chronic) (peripheral)</td>
<td>L97 codes are specific for location, including right and left, and severity, E.G. skin, fat layer exposed, necrosis of muscle, necrosis of bone</td>
</tr>
<tr>
<td>682.6 Cellulitis/abscess leg</td>
<td>L03.115 Cellulitis of right lower limb</td>
<td>Cellulitis and abscesses are coded with different codes</td>
</tr>
</tbody>
</table>
| 707.03 Pressure ulcer, coccyx                         | L89.15 Pressure ulcer of sacral region                           | 6<sup>th</sup> character specified stage  
0- unstageable  
1- stage 1  
2- stage 2  
3- stage 3  
4- stage 4  
9- unspecified |
| 707.04 Pressure ulcer, hip                            | L89.20 Pressure ulcer of unspecified hip  
L89.21.....of right hip  
L89.22.....of left hip  
L89.4.....Pressure ulcer of contiguous site of back, buttock and hip (5<sup>th</sup> character indicates stage) | 6<sup>th</sup> character specified stage  
0- unstageable  
1- stage 1  
2- stage 2  
3- stage 3  
4- stage 4  
9- unspecified |
| 707.07 Pressure ulcer heel                            | L89.60 Pressure ulcer of unspecified heel  
L89.61.....of right heel  
L89.62.....of left heel | 6<sup>th</sup> character specified stage  
0- unstageable  
1- stage 1  
2- stage 2  
3- stage 3  
4- stage 4  
9- unspecified |
1. TYPE
- Type I (Juvenile, brittle, due to autoimmune process, idiopathic)
- Type II (adult-onset, diabetes NOS, insulin-resistant)
- Other:
  - DM due to underlying condition (identify condition): ________________________
  - Chemical or drug induced (what drug or chemical): ________________________
  - Other specified: ______________________________________________________

2. COMPLICATIONS AND/OR MANIFESTATIONS
- No complications or manifestations
- Hyperosmolarity
  - With nonketotic hyperglycemic-hyperosmolar coma (NKHHC)
  - Without NKHHC, with coma
- Kidney complications (Nephropathy)
  - Chronic kidney disease (stage): _________________
  - With other diabetic kidney complications: _________________________________
- Ophthalmic Complications (Retinopathy)
  - Nonproliferative Retinopathy (mild, moderate, or severe?)
  - Proliferative Retinopathy
  - Macular edema
  - Diabetic cataract
  - With other ophthalmic complications: _________________________________
- Neurological complications (Neuropathy)
  - Diabetic Mononeuropathy,
  - Diabetic Polyneuropathy,
  - Diabetic Autonomic polyneuropathy,
  - Diabetic Amyotrophy
  - Diabetic gastroparesis
  - Diabetic neuropathic arthropathy
  - With other neurological complications: _________________________________
- Circulatory complications (diabetic peripheral angiopathy)
  - With gangrene
  - With other circulatory complications: _________________________________
- Other complications
  - Dermatitis
  - Foot ulcer (identify location of ulcer on foot)
  - Other skin ulcer (identify site of ulcer)
  - Periodontal disease
  - Other oral complications
- Hypoglycemia
  - With coma
- Hyperglycemia
- Ketoacidosis
  - With coma

3. Is the patient on chronic (active) insulin?
- Yes
- No