

Transition to ICD-10-CM Diabetes & More

Patricia W. Tulloch RN, BSN, MSN, HCS-D
RBC Limited Healthcare & Management Consultants
P: 845-889-8128 • E: rbc@netstep.net
www.rbclimited.com



Objectives



- **Analyze the ICD-10-CM Chapter 4 categories (E00-E89)**
- **Review Chapter 4 Guidelines**
- **Explain ICD-10-CM terminology as it relates to coding endocrine and metabolic diseases**
- **Identify pathophysiology terms as they relate to ICD-10-CM endocrine coding**
- **Apply ICD-10-CM to common home health scenarios**
- **Take Away:
RBC ICD-10-CM Diabetes Crosswalk Guide**

Housekeeping Information

- **Handout Materials & Take Away Tools**

- **Webcast Participants**

If you haven't done so already, you can download the handouts and tools in the handout box to the left of your screen. At any time during the presentation – you can “**pause**” the program. Go to the lower left of the screen and click on the “**pause**” button. Please note you may have to scroll down on the page to see the “**pause**” button.

- **DVD Participants**

The main contact should have received the handout materials link in the receipt email that was issued upon completion of purchase. If you still need a copy of the handouts, ask your contact or email RBC at rbc@netstep.net.

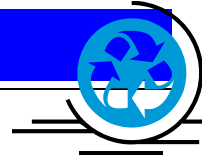
- Email your questions to rbc@netstep.net
- Lastly, for further information about our Education Programs and Products, go to: <http://education.rbclimited.com>

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***

35% of all acute hospitalizations are related DM

Why the Focus ?



- 20.8 million Americans have diabetes
- 14.6 million are diagnosed
- 6.2 million undiagnosed
- 41 million are prediabetics
- 90 % are Type 2 diabetics
- 10% are Type 1, or Juvenile, diabetics

ADA 2009 Statistics

Health Care Costs are Staggering

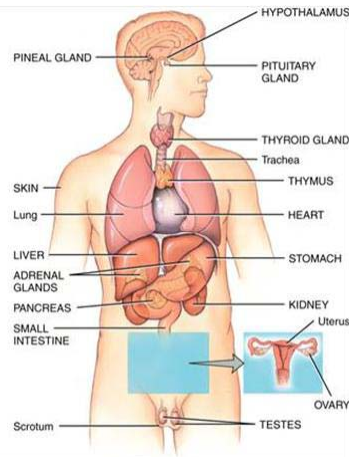
- Every Day
 - 41,000 people are newly diagnosed with diabetes
 - 810 die from diabetic complications
 - 230 have amputations
 - 120 go on dialysis
 - 55 go blind

**Diabetes should ALWAYS be coded in the top 6
Diagnosis Items**

Diabetes is Pertinent to EVERY Plan of Care

Endocrine System

- **Works with Central Nervous System**
 - Regulate Body Functions
- **Composed of Ductless Glands**
 - Secrete hormones to regulate growth and metabolism
- **Major Endocrine Glands**
 - Pancreas
 - Pituitary
 - Thyroid; Thymus
 - Parathyroid
 - Adrenals
 - Pineal
 - Ovaries/Testes



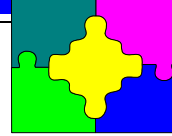
Chapter 4: E00-E89



- **Endocrine, Nutritional & Metabolic Diseases**
 - Endocrine System (E00-E46)
 - Series of ductless glands
 - Secrete hormones to regulate body functions
 - Nutritional (E40-E68)
 - Vitamin & other nutritional deficiencies
 - Metabolic Disorders (E70-E88)
 - Other: (E89)
- **ICD-10-CM Chapter 4 Guideline Focus**
 - Diabetes Mellitus
- **ICD-10-CM**
 - Updates to current classification system of diabetes

Specific Chapter 4 Blocks

- **E00-E07 Disorders of the Thyroid**
- **E08-E13 Diabetes mellitus**
- **E15-E16 Other disorders of glucose regulation and pancreatic internal secretion**
- **E20-E35 Disorders of other endocrine glands**
- **E36 Intraoperative complications of endocrine system**
- **E40-E46 Malnutrition**
- **E50-E64 Other nutritional deficiencies**
- **E65-E68 Overweight, obesity, and other hyperalimentation**
- **E70-E88 Metabolic Disorders**
- **E89 Post procedural endocrine and metabolic complications and disorders, not elsewhere classified**



Official Code Guidelines

- **Chapter 4: Diabetes**
 - Use as many codes as necessary to describe all complications of the disease
 - Sequence codes based on the reason(s) for care & services
 - List as many diabetic codes in E08-E13 as needed to identify all associated conditions that impact the plan of care
 - If the type of diabetes is not documented, *default to Type II*
- **More Code Guidelines for Diabetes**
 - If Type II DM patient uses long term insulin assign Z79.4
 - Do not assign Z79.4 if the use of insulin is temporary for a Type II diabetic patient to bring the blood sugar under control
- **Remember**
 - ICD-10-CM Diabetic codes have many combination codes
 - Do not use Z79.4, long term insulin use, for Type 1 Diabetics



More on DM Code Guidelines

- **Secondary Diabetes (E08)**
 - Diabetes due to a secondary underlying condition
 - Cystic fibrosis; congenital; malignant neoplasm
 - Sequence codes based on instructions in Tabular List
 - *Code first the underlying condition*
 - Use additional code Z79.4 for long term insulin use, when indicated
- **More Code Guidelines for Diabetes**
 - DM due to removal of pancreas is E89.1 & E13
 - Code additional code Z98.41-, Acquired Absence of Pancreas
- **Secondary Diabetes due to Drugs or Chemicals**
 - Code first T36-T65 to identify the causative drug or chemical
 - E09 Drug or chemical induced diabetes mellitus
 - Use additional code to identify insulin (Z79.4)
 - Must follow Code Guidelines: Adverse Effects

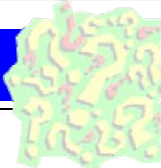
More on DM Code Guidelines

- **Complications of Pump Malfunctions**
- **Insulin Pump Malfunction**
 - Code first Pump Malfunction resulting in *overdose of insulin*: T85.6-
 - Additional code T38.3x1- (Poisoning by insulin & oral hypoglycemic (antidiabetic) drugs, accidental (unintentional))
- **Pump Malfunction Resulting in an Overdose of Insulin**
 - Code first T85.614 Breakdown (mechanical) of insulin pump OR
 - Code first T85.624 Displacement of insulin pump OR
 - Code first T85.633 Leakage of insulin pump OR
 - Code first T85.694 Other mechanical complication of insulin pump
 - Additional Code: T38.3x1- Poisoning by insulin and oral hypoglycemics (antidiabetic) drugs, accidental (unintentional)

More Code Guidelines on Pumps

- **Complications of Pump Malfunctions**
- **Insulin Pump Malfunction: Insulin Underdosing**
 - Code first Pump Malfunction resulting in *underdose of insulin*: T85.6-
 - Additional code T38.3x6- (Underdosing of insulin)
 - Code also any other complications due to insulin underdosing
- **Pump Malfunction Resulting in an Underdose of Insulin**
 - Code first T85.614 Breakdown (mechanical) of insulin pump **OR**
 - Code first T85.624 Displacement of insulin pump **OR**
 - Code first T85.633 Leakage of insulin pump **OR**
 - Code first T85.694 Other mechanical complication of insulin pump
 - **Additional Code:** T38.3x6- Underdosing of insulin

Compare DM Code Sets



- | ■ <u>ICD-9-CM</u> | ■ <u>ICD-10-CM</u> |
|--|--|
| ■ <i>Manifestation/etiology requires 2 codes</i> | ■ <i>Manifestation/etiology uses a single combination code</i> |
| ■ <i>4th digit for complication</i> | ■ <i>5/6th character for type of complication</i> |
| ■ <i>Controlled or uncontrolled</i> | ■ <i>Eliminates controlled or uncontrolled</i> |
| ■ <i>DM Type not documented defaults to Type 2</i> | ■ <i>Undocumented DM Type defaults to Type 2</i> |
| ■ <i>Insulin code for L-T for Type 2 Diabetes</i> | ■ <i>Insulin Code for L-T for Type 2 Diabetes</i> |
| ■ <i>Do not list insulin code for Type 1 Diabetics</i> | ■ <i>Do not list insulin code for Type 1 Diabetics</i> |

ICD-10-CM: DM Control Status

- **Diabetes: Clinical Documentation**
 - Inadequately controlled
 - Out of control
 - Poorly controlled
- **Diabetes Code Selection Considerations**
 - Type of Diabetes *with hyperglycemia*
- **Examples**
 - E10.65 Type 1 diabetes mellitus with hyperglycemia
 - E11.65 Type 2 diabetes mellitus with hyperglycemia

May be an additional code with other DM codes

See Sample DM Crosswalk Tool

More on ICD-10 Conventions

- **Ensure Coder Reads**
 - Includes notes: Further defines a category
 - Inclusion terms: Some of the conditions included in that code
 - Code first/use additional code notes
 - Code also – Two codes may be required but sequencing is dependent upon circumstances
 - See and See Also
- **ICD-10-CM has many more combination codes**
 - Manifestation & complications

Steps to Accurate Coding



- See Basic Code Rules
- Identify the main diagnostic term
- Find the main term in the alphabetical index
- Read the sub-terms under the main term
- Follow the cross-reference instructions
- ALWAYS Verify the code in the Tabular Index
- Read ALL Instructions
 - * Exclusion notes
 - * Inclusion notes
 - * Code 1st notes
 - *NOS (not otherwise specified)
 - *NEC (not elsewhere classified)
 - *Manifestation notes

Code Steps Applied

- Type 1 diabetes mellitus with diabetic nephropathy
- Step 1
- Look up term in Alphabetical Index
- Diabetes, diabetic (mellitus) (sugar) E11.9
 - Type 1 E10
 - With nephropathy E10.21

Code Steps Applied

- **Type 1 diabetes mellitus with diabetic nephropathy**
- **Step 2**
- **Verify the code in the Tabular index**
- **E10 Type 1 diabetes mellitus**
 - **E10.2 Type 1 diabetes mellitus with kidney complications**
 - **E10.21 Type 1 diabetes mellitus with diabetic nephropathy**
 - **Type 1 diabetes mellitus with intercapillary glomerulosclerosis**
 - **Type 1 diabetes mellitus with intracapillary glomerulonephrosis**
 - **Type 1 diabetes mellitus with Kimmelstiel-Wilson disease**

Sample ICD-10-CM DM Alpha

- **Diabetes, diabetic type 2 E11.9**
 - **with**
 - amotrophy E11.44
 - arthropathy NEC E11.618
 - autonomic (poly) neuropathy E11.43
 - cataract E11.36
 - Charcot's joints E11.610
 - chronic kidney disease E11.22
 - circulatory complication NEC E11.59
 - complication E11.8
 - specified NEC E11.69
 - dermatitis E11.620
 - foot ulcer E11.621

Sample ICD-10-CM DM Tabular

- **E10.6 Type 1 diabetes mellitus with other specified complications**

E10.61 Type 1 diabetes mellitus with diabetic arthropathy

E10.610 Type 1 diabetes mellitus with diabetic neuropathic arthropathy

Type 1 diabetes mellitus with Charcot's joints

E10.618 Type 1 diabetes with other diabetic arthropathy

E10.62 Type 1 diabetes mellitus with skin complications

E10.620 Type 1 diabetes mellitus with diabetic dermatitis

Type 1 diabetes with diabetic necrobiosis lipoidica

E10.621 Type 1 diabetes mellitus with foot ulcer

Use additional code to identify site of ulcer (L97.4-, L97.5-)

Quick Check

- **ICD-10-CM aligns with updated clinical classifications of diabetes.**
 - True
 - False
- **ICD-10-CM Code Guidelines directs coders to use as many codes as necessary to describe all disease manifestations and/or complications.**
 - True
 - False
- **ICD-10-CM uses many more combination codes for diabetics with manifestation and/or complications.**
 - True
 - False

Diabetes & Disorders

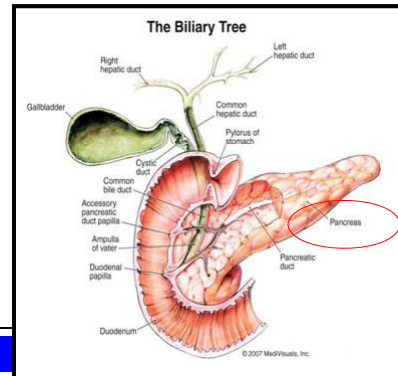
- **Significant Changes to Diabetes Mellitus**
- **Five (5) DM Categories**
 - E08 Diabetes Mellitus due to an underlying condition
 - E09 Drug or chemical induced diabetes mellitus
 - E10 Type 1 diabetes mellitus
 - E11 Type 2 diabetes mellitus
 - E13 Other specified diabetes mellitus
- **Expanded Combination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

More on Diabetes

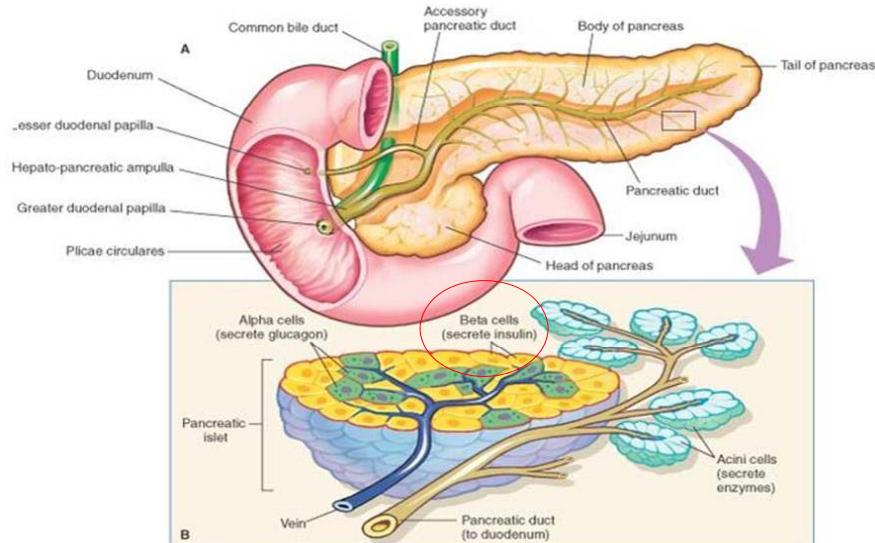
- **Diabetes Mellitus**
 - Disease of the endocrine system
 - Beta cells fail to secrete insulin *or*
 - Target cells fail to respond to insulin
 - Diabetes can be caused by too little insulin or resistance to insulin or both
- **Three Main Types of Diabetes**
 - Type 1 Diabetes Mellitus
 - Type 2 Diabetes Mellitus
 - Gestational Diabetes
- **Secondary Diabetes**
 - Diabetes caused by an underlying condition

Pathophysiology Review

- **Pancreas: Fish Shaped Gland**
- **Endocrine Gland: Produces Hormones**
- **Exocrine Gland: Secretes Digestive Enzymes**
- **Locations: Upper Left Abdominal Quadrant**
 - Under Stomach
- **Functions**
 - Secretes insulin, glucagon & somatostatin
 - Maintains blood sugar levels
 - Helps body cells use glucose for energy



More A & P

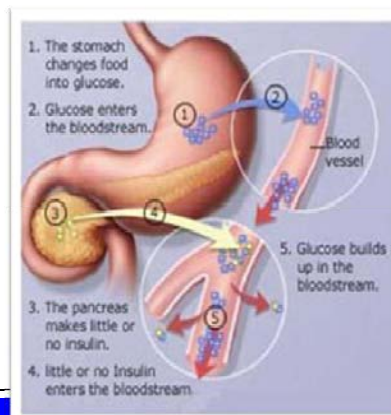


More on Diabetes

- **Type 1 Diabetes Mellitus**
 - Juvenile Diabetes
 - Failure to produce insulin
 - Requires insulin administration
- **Type 2 Diabetes Mellitus**
 - Formerly known as *NIDDM & Adult Onset*
 - Cells fail to produce insulin properly *and/or*
 - Cells resistant to insulin
 - Predisposing Factors: Obesity; Lack of Exercise; Genetics
- **Gestational Diabetes Mellitus**
 - High Blood Glucose during Pregnancy
 - May precede Type 2 DM; Cardiovascular Disease

More on Type 1 Diabetes

- **10% of diagnosed diabetics: E10**
- **First diagnosed under the age of 30 years**
- **Sudden onset of symptoms and illness**
- **Insulin Deficiency**
 - Genetic predisposition
 - Destruction of Beta cells
 - No known preventive tx
 - Unable to produce insulin
 - Prone to ketoacidosis
 - Focus Treatment: Insulin
 - Complication Prevention



Type 2 Diabetes

- **90 % of diagnosed diabetics : E11**
- **Usually older than 30 years**
- **Decreased Insulin Production**
- **Insulin Resistance**
- **Not prone to ketoacidosis**
- **Gradual onset of symptoms or no symptoms**
- **80% overweight**
- **20% lean**
- **Treatments: Exercise; Nutrition; Medications;**
Complication Prevention



Gestational Diabetes

- **2-5% Pregnant Woman Diagnosed with DM: O24.4**
 - 6th character: diet controlled, insulin controlled; unspecified
- **Most common in second & third trimester**
- **Complications similar to DM**
- **Code O24.4 Diabetes mellitus in pregnancy, childbirth & puerperium**
 - O24.4 Includes Codes for diet or insulin controlled
 - If gestational DM is treated with diet & insulin, only use code for insulin-controlled
- **Code Z79.4, L-T use of insulin, should not be used with codes from O24.4**

Quick Check

- ICD-10-CM Guidelines direct coders to assign E10 for Type 1 diabetes *if a patient is receiving insulin*.
 - True
 - False
- If the type of diabetes mellitus is *not* documented, default to Type 2 diabetes.
 - True
 - False
- Secondary diabetes is rare, and therefore *not* considered a main type of diabetes.
 - True
 - False

Diabetic Code Selections

- Code Selection Based on Clinical Documentation
 - *Default to Type 2 if Unknown*
- Type of Diabetes
 - Body System Effected
 - 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

More on Diabetes Codes

■ Complications

- Problems *with* the disease process
- Types of Diabetic Complications
 - Diabetic ketoacidosis
 - Hyperosmolar nonketotic state
 - Hypoglycemia
 - Hyperglycemia
 - Diabetic coma
 - Diabetic gastroparesis
 - Underdosing/overdosing of insulin due to insulin pump failure

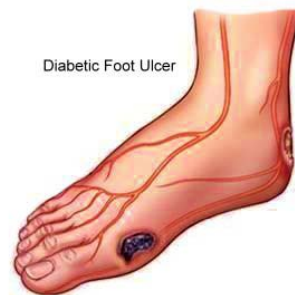
■ Manifestations

- Problem *because of the* disease process

More on Diabetes Codes

■ Manifestations

- Problem *because of the* disease process
- Types of Diabetic Manifestations
 - Cardiomyopathy
 - Nephropathy
 - Neuropathy
 - Retinopathy
 - Angiopathy
 - Diabetic foot ulcer
 - Diabetic encephalopathy



E08: DM due to underlying....

- **Code first the underlying condition**
 - Congenital rubella P35.0
 - Cushings Syndrome E24-
 - Cystic fibrosis E84-
 - Malignant neoplasm C00-C96
 - Malnutrition E40-E46
 - Pancreatitis K85-K86-
- **One Example**
 - Diabetes due to pancreatic malignancy
 - C25.4 Pancreatic neoplasm
 - E08.9 DM due to an underlying condition without complications

E09: DM Induced by Drug or Chemical

- **Code first the identified drug or chemical**
 - T36-T65: Identified Drug or Chemical
 - Use additional code to identify insulin use (Z79.4)
- **One Common Example**
 - Steroid induced diabetes mellitus due to prolonged use of corticosteroids; Insulin management
 - T38.0x1D Poisoning by glucocorticoids and synthetic analogues, accidental (unintentional) subsequent encounter
 - E09.9 Drug or chemical induced DM without complications
 - Z79.4 Long term (current) use of insulin

More on DM Codes

- **E10: Type 1**
 - Juvenile DM
 - DM due to autoimmune process
- **E11: Type 2**
 - DM NOS
 - Insulin-resistant DM
- **E13: Other Specified DM**
 - DM due to genetic defects
 - DM due to genetic defects in insulin action
 - Post-pancreatectomy (Whipple procedure)
 - Post-procedural diabetes mellitus
 - **Secondary DM NEC**

O24: Gestational Diabetes

- **024.0-024.03 Pre-existing, Type 1, by trimester**
- **024.1-024.13 Pre-existing, Type 2, by trimester**
- **024.3-024.33 & 024.8-024.93 Pre-existing, unspecified type, by trimester**
- **024.4-024.439 Pregnancy induced DM, level of control**
- **Example**
 - Patient is 26 weeks pregnant and presenting with complaints of abnormal thirst and hunger. Oral glucose tolerance test revealed gestational diabetes mellitus. Food diary and diet plan to control symptoms. Monitor blood sugar levels daily.
 - **024.410 Gestational diabetes mellitus in pregnancy, diet controlled**

Let's Code

- 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

401.9 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

Case Scenario

- Patient admitted to home health post right hip replacement. SVN for PT/INR & dressing changes. PT for gait training, home safety, muscle strengthening and assistive device. DM; HTN.

- **ICD-9-CM**

V54.81 A/C Joint Replacement

781.2 Abnormal gait

401.9 HTN

250.00 Diabetes

V58.83 Enctr. Drug monitoring

V58.61 Long term Use of anticoags

V58.31 Dressing Changes

V43.65 Joint Replaced, Hip

- **ICD-10-CM**

Z47.1 A/C joint replacement

Z96.641 Right artificial hip joint

I10 HTN

E11.9 Type 2 DM w/o complications

Z51.81 Enctr. therap. drug mn.

Z79.01 LT use anticoagulants

Z48.01 Surgical dressing changes

How to Code This?

- **BID insulin patient who cannot self-inject due to diabetic polyneuropathy**

- **ICD-9-CM**

250.60 DM w/ neurologic manifestations

357.2 polyneuropathy

V58.67 Long term current use of insulin

- **ICD-10-CM**

E11.42 Type 2 diabetes with diabetic polyneuropathy

Z79.4 Long term (current) use of insulin

Home Health Case Scenario

- **Patient admitted home health with a Stage 3 pressure ulcer on her right heel. DM, HTN, CHF.**
- L89.613 Pressure ulcer of right heel, Stage 3
- **E11.9** Type 2 Diabetes without complications
- I50.9 Congestive Heart Failure NOS
- I10 Essential (Primary) Hypertension

What's the Code Guideline Here?

Another Scenario

- **Patient has insulin dependent Type II diabetes, legally blind due to diabetic retinopathy, CHF. Skilled nursing care to include wound care to a diabetic ulcer of the great toe on the left foot, diabetic care and teaching, and monitoring med regimen.**
- **E11.621** Type 2 diabetes mellitus with foot ulcer
- **L97.529** Non-pressure chronic ulcer of other part of left foot with unspecified severity
- **I50.9** Congestive Heart Failure NOS
- **E11.319** Type 2 Diabetes with unspecified diabetic retinopathy without macular edema
- **H54.8** Legal Blindness as defined in USA
- **Z79.4** Long term (current) use of insulin

Case Scenario

- **Type 1 diabetic admitted post hospitalization for management of new insulin pump. Diabetes is poorly controlled, and patient is struggling to maintain glucose control.**

E10.65 Diabetes mellitus, Type 1, with hyperglycemia

Z46.81 Encounter for fitting and adjustment of insulin pump (Encounter for insulin pump titration; Encounter for insulin pump instructions and training)

Another DM Case Scenario

- Patient admitted post hospitalization for left foot amputation due to diabetic peripheral 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 without gangrene

E11.43 Type 2 diabetes with gastroparesis

J44.9 COPD

E03.9 Hypothyroidism, unspecified

Z79.4 Long term (current use) of insulin

Z89.432 Absence of (complete or partial) left foot (acquired)

Another DM 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, right ankle

E10.51 Type 1 diabetes with peripheral angiopathy without gangrene

I12.9 Chronic hypertensive kidney disease (Stage 1-4)

N18.4 Stage 4 (severe) CKD

E78.0 Hypercholesterolemia

Z89.52 Absence, left limb, below the knee (acquired)

Code These Scenarios

- Type 2 diabetic with Stage 3 CKD

- Type 1 diabetic with diabetic peripheral angiopathy without gangrene

Code These Scenarios

- Type 2 diabetic with Stage 3 CKD
 - E11.22 Type 2 diabetes mellitus with diabetic chronic kidney disease
 - N18.3 Chronic kidney disease, Stage 3 (moderate)

- Type 1 diabetic with diabetic peripheral angiopathy without gangrene
 - E10.51 Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene

One More DM Scenario

- Patient admitted post hospitalization for pseudomonas pneumonia. Antibiotics to continue for 5 more days at home. Parkinson's; mild asthma; diabetes controlled by oral hypoglycemics.

J15.1 Pneumonia due to Pseudomonas

G20 Parkinson's Disease

J45.909 Asthma

E11.9 Diabetes, Type 2, without complications

Common DM Errors

- Excluding Manifestations and/or Complications
 - Neuropathy
 - Ulcers
 - Amyotrophy
- Coding a patient as a Type I diabetic since they are on insulin
- Coding a Type 1 Diabetic based on age alone
- Forgetting the Z79.4 code for Type 2 or unspecified diabetics on long term current insulin
- Coding long term insulin use for a Type 1 diabetic
- Coding additional *required* code(s) (ex. CKD)

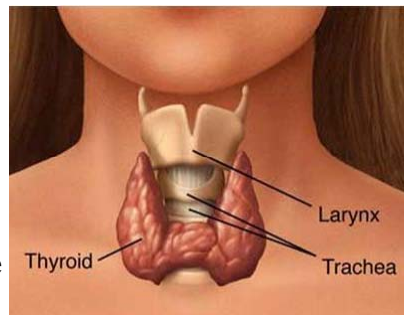


Thyroid Disorders

- **Hyperthyroidism**
 - Thyroid releases *too much* of its hormones thyroxine (T4) and/or triiodothyronine (T3) over a short or long period of time
- **Hypothyroidism**
 - Thyroid releases *too little* of its hormones thyroxine (T4) and/or triiodothyronine (T3)
- **Regulates metabolism, growth, sexual maturation, and brain development during childhood**
- **Graves Disease: Form of hyperthyroidism**
 - Thyroid Storm or
 - Thyrotoxic Crisis

Pathophysiology Review

- **Thyroid**: Butterfly shaped organ
- **Endocrine Gland**: Produces Thyroid Hormones
 - Hormones contain iodine
- **Locations**: Below Adams Apple
 - Under
- **Controlled by**
 - Pituitary Gland (TSH)
- **Functions**
 - Secretes T3 & T4
 - Maintains body temperature
 - Regulates metabolism



More on Thyroid Disorders

- **E00-E07 Disorders of the Thyroid**
 - E00 Congenital iodine-deficiency syndrome
 - E01 Iodine-deficiency related thyroid disorders and allied conditions
 - E03 Other Hypothyroidism
 - E04 Other nontoxic goiter
 - E05 Thyrotoxicosis (hyperthyroidism)
 - E06 Thyroiditis
 - E07 Other disorders of thyroid
- **Note Code First and Code Also Instructions**
- **All neoplasms are classified in Chapter 2**
 - Codes from Chapter 4 may be additional codes

More on Thyroid Disorders

- **E00-E07 Disorders of the Thyroid**
 - **E03 Other Hypothyroidism**
 - E03.0 Congenital hypothyroidism with diffuse goiter
 - E03.1 Congenital hypothyroidism without goiter
 - E03.2 Hypothyroidism due to medicaments and other exogenous substances
 - E03.3 Postinfectious hypothyroidism
 - E03.4 Atrophy of thyroid (acquired)
 - E03.5 Myxedema coma
 - E03.8 Other specified hypothyroidism
 - E03.9 Hypothyroidism, unspecified
- **Unspecified categories used as indicated**

One Case Scenario

- **Patient admitted post hospitalization for congestive heart failure, HTN, atrial fib, peripheral vascular insufficiency, and hypothyroidism. SNV for observation, medication management.**

I50.9 Congestive Heart Failure

I48.0 Atrial Fibrillation

I10 Essential (primary) HTN

I73.9 Insufficiency, vascular, peripheral

E03.9 Hypothyroidism (acquired)

What About Coding Clinic?

- **Coding Clinic to be refreshed at the implementation date**
 - New Format and Guidance
 - Greater complexity inherent in ICS-10-CM Code Set
- **Retire ALL Other Coding Clinics**
 - Retire with ICD-9-CM Code Set
 - Dissolve all previous Code Guidances
 - Assumption Codes: DM and Gangrene
 - Use of Abnormal Gait
- **ICD-10 is the Property of WHO**
 - Additional Guidance requires WHO Approval
 - Must meet current definitions

Consider Coder Challenges

- **Back to Basics**
 - Utilize 10 Steps of Code Assignment
 - Use both Alphabetic and Tabular Index
 - Visit: www.who.int.classifications/icd/en
 - Access searchable database of codes
- **Cannot Rely on Coding Guidance**
 - All Previous Guidances Retired with ICD-9-CM
 - Instructions embedded in Tabular Index
- **ICD-10 is the Property of WHO**
 - Additional Guidance requires WHO Approval
 - Stay tuned for more information on this process

More Challenges

- **Documentation Needs**
 - Requires increased specificity in the clinical documentation
- **Specific Documentation Needs**
 - *Laterality; Severity; Specific Affected site*
 - **Example:**
 - Type 2 diabetes with right midfoot diabetic ulcer: E11.621
 - L97.411 Non-pressure chronic ulcer of right heel and midfoot limited to breakdown of skin
 - L97.412with fat layer exposed
 - L97.413with necrosis of muscle
 - L97.414...with necrosis of bone
 - L97.419...with unspecified severity

Other Documentation Challenges

- **More on Specific Documentation Needs**
 - Metabolic disorders require greater detail related to specific amino acid, carbohydrates, or lipid enzyme deficiency responsible for the metabolic disorder
 - Cushing's syndrome is now differentiated by type and cause
 - Secondary diabetes now requires documentation related to whether the condition is due to an underlying condition or whether it is a drug or chemically induced
 - More specific information is required to code disorders of the parathyroid gland
 - Vitamins, mineral, and other nutritional deficiencies require more information on the specific vitamin/minerals

Agency Risk Areas



- **Lack of access to ICD-10-CM Resources**
- **Lack of supporting physician documentation for accurate primary and secondary diagnoses and code assignment**
 - Lack of access to precise clinical documentation
- **Lack of substantiating clinician documentation in the OASIS assessment to support the selection and sequencing of primary and secondary diagnoses**
- **Not following ICD-10-CM code convention and Code Guidelines**

Resource Web Sites

www.cms.hhs.gov/ICD10
Centers for Medicare & Medicaid Services
ICD-10 Web Site

www.cdc.gov/nchs/icd/icd10cm.htm#10update
Centers for Disease Control
Official ICD-10-CM Code Guidelines

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

www.cms.hhs.gov/ICD9ProvidersDiagnosticCodes/03_meetings.asp
ICD-9-CM Coordination & Maintenance Committee Meetings

www.medicalspecialtycoding.com
Board of Medical Specialty Coding



Available Education Programs as Webcasts and DVDs

- ICD-10-CM Transition - 6 Part Series
- Part 1: Fundamentals, Part 2: Diabetes, Part 3: Cardiovascular, Part 4: Pulmonary, Part 5: Rehabilitation, Part 6: Wounds
- Infection Control for Home Care and Hospice
- ACOs: What Impact Do They Have on The Health Care System and Home Care?
- Home Health Care Reform in NY - Live Webcast on 4/18/12 (1 - 2pm EST)
- Health Care Reform, Palliative Care and Quality of Life Issues - Live Webcast on 6/13/12 (1 - 2pm EST)
- Patient Centered Medical Home - Live Webcast on 7/18/12 (1 - 2pm EST)
- ICD-9-CM 2012 Code Updates
- ICD-9-CM Code Series (Beginner; Intermediate; Advanced)
- FREE Program - Home Health Audit Priorities
- FREE Program - ICD-10-CM: Coming to Home Health in 2013

For more information on our education programs and products go to:
<http://education.rbclimited.com/store.php>

ABOUT RBC LIMITED

Our satisfied customers rely on us for our expertise in:

- PPS and OASIS Training (Integrated OASIS Solutions™);
- ICD-9-CM Coding;
- Report Code Scans & Audits;
- Corporate and Regulatory Compliance;
- Preparation for Accreditation;
- 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
- HIPAA.

RBC Limited Healthcare & Management Consultants • *“Timely, insightful guidance”*

P: 845-889-8128 • E: rbc@netstep.net • www.rbclimited.com

This program was brought to you by:



Produced by: RBC Management Group