

## Coding & Documentation<sup>1</sup>

Specificity	"With"	Use additional code (if applicable)		
Document	DM complications listed after the term "with" in the alphabetic index have a presumed causal relationship and do not have to be linked by the provider.	Use of Insulin, Oral Hypoglycemics and Injectable Non-insulin Drugs		
<ul><li>Type of diabetes (type 1, type 2 or other)</li><li>Body System Affected</li></ul>		IF documentation indicates	THEN assign code(s):	
• Complication/Manifestation affecting the body system (See table on page 2)		Insulin & Diabetes (type unspecified)	E11-Type 2 diabetes mellitus Z79-, Long-term (current) use of insulin or oral hypoglycemic drugs	
"History of"	<ul> <li>Do not link conditions when</li> </ul>			
Avoid using the phrase "history of" when the condition is being monitored.	documentation clearly states they are unrelated or when another guideline exists	Oral antidiabetic medications & insulin	<b>Z79.4</b> , Long-term (current) use of insulin	
<ul> <li>Incorrect: "Patient has a history of diabetes."</li> </ul>	that specifically requires a documented linkage between two conditions.	Insulin & injectable non-insulin antidiabetic drug <b>NEW</b>	<b>Z79.4</b> , Long term (current) use of insulin <b>Z79.899</b> , Other long term (current)	
• Correct: "Patient has type 2 diabetes	For conditions not specifically linked by the relational term "with" the provider documentation must link the conditions in order to code them as related.		drug therapy	
currently controlled with insulin."		Oral hypoglycemic drugs & injectable non-insulin antidiabetic drug NEW	Z79.84, Long term (current) use of oral hypoglycemic drugs Z79.899, Other long term (current) drug therapy	

The educational material herein complies with accepted ICD-10 guidelines and is for general supplemental purposes only. The information herein is not guaranteed to be complete, free of errors, or the most current revision. It is the responsibility of the provider to document accurate and complete codes, clinical rationale, and medical services rendered to support appropriate ICD-10 code(s) according to official billing and coding guidelines, procedures, and regulations.

<sup>1</sup>2021 ICD-10-CM Official Guidelines for Coding and Reporting https://www.cdc.gov/nchs/data/icd/10cmguidelines-FY2021.pdf



## Coding & Documentation¹ (Continued)

Diabetes Type	ICD-10-CM	Use combination codes and additional codes when appropriate. Follow ICD-10 coding guidelines for code assignment and sequencing. (Examples below are not all not all inclusive. Codes are assigned based upon provider documentation of condition and diagnosis.)					
<u>Primary</u>	Category	4 <sup>th</sup>	System Complication	Conditions with Assumed Relationship	Condition & Link MUST be Documented	Code Also (if applicable)	
		.0-	hyperosmolarity	hyperosmolarity w/wo coma			
Type 1	E10	.1-	ketoacidosis	Ketoacidosis w/wo coma			
Туре 2	E11	.2-	kidney	chronic kidney disease, glomerulonephrosis, glomerulosclerosis, Kimmelsteil-Wilson disease, nephropathy, renal tubular degeneration	renal complications NEC, microalbuminemia, proteinuria	CKD Stage (N18.1-N18.6) Acute Renal Failure (N17.9)	
Other	E13	.3-	ophthalmic	Cataract, retinopathy, macular edema, retinal detachment	ophthalmic complication NEC, blindness, glaucoma, Retinal ischemia, vitreous hemorrhage, rubeosis iridis	Glaucoma (H40-H42)	
		.4-	neurological	Amyotrophy, autonomic (poly)neuropathy, gastroparalysis, gastroparesis, loss of protective sensation(LOPS), mononeuropathy, myasthenia, neuralgia, neuropathy, polyneuropathy	neurologic complication NEC, cranial nerve palsy, neuropathic ulcer		
Secondary		.5-	circulatory	Gangrene, peripheral angiopathy, (PVD/PAD) w/wo gangrene	Circulatory complication NEC, Ischemic or stasis ulcer, atherosclerosis, coronary artery disease		
Due to other condition	E08	.6-	other	Charcot's joints, dermatitis, foot ulcer, hyperglycemia, hypoglycemia, necrobiosis lipoidica, neuropathic arthropathy, osteomyelitis, periodontal disease	Arthropathy NEC, oral complication NEC, skin complication NEC, other specified complication NEC, cellulitis, erectile dysfunction, limited joint mobility, obesity, high cholesterol, hypertension	Site of ulcer (L97, L98)	
Drug/chemical induced	E09	.8-	unspecified				
		.9-	without complication				

Assign as many codes as needed to identify all associated conditions the patient has at the time of the encounter.

<sup>&</sup>lt;sup>2</sup> AHA Coding Clinic, First Quarter 2013, Page 3, Bilateral Peripheral Neuropathy



## Coding & Documentation<sup>1</sup> (Continued)

## Example 1:

"Diabetes Type II and Cellulitis of Lower Left Leg" documented.

- If the provider DOES make the link that cellulitis is due to diabetes

  CODE: E11.628 Type 2 diabetes mellitus with other skin complications and L03.116 Cellulitis of left lower limb
- If the provider does NOT make the link that cellulitis is due to diabetes **CODE:** E11.9 Type 2 diabetes mellitus and LO3.116 Cellulitis of left lower limb

Rationale: Cellulitis is not listed as a specific condition under the word "with" and instead falls under "skin complication NEC".

#### Example 2:

## Peripheral Neuropathy and Diabetes

- If provider does not indicate "mono" or "poly", search for MEAT to support the appropriate code selection, otherwise **CODE: Exx.40**, Diabetes mellitus with diabetic neuropathy, unspecified
- If **peripheral neuropathy** is documented, default to **polyneuropathy**<sup>2</sup> provided MEAT indicates location of the symptoms. (In the alphabetic index, unspecified peripheral neuropathy is coded to G62.9 for polyneuropathy, unspecified.) **CODE:** Exx.42, Diabetes mellitus with diabetic polyneuropathy
  - If diabetic autonomic peripheral neuropathy is specifically documented **CODE: Exx.43**, Diabetes mellitus with diabetic autonomic (poly)neuropathy

Rationale: An automatic link can be made to code DM with neurologic complications if both conditions have been documented "active or current".

**Polyneuropathy** is damage or disease affecting peripheral nerves in roughly the same areas on both sides of the body. It usually begins in the hands and feet and may progress to the arms and legs and sometimes to other parts of the body where it may affect the autonomic nervous system.

Mono - damage or abnormal sensation to one nerve, i.e. "one foot"

Poly - damage or abnormal sensation to multiples nerves, i.e. "both feet", "both hands", or "all extremities"



#### **HEDIS®**

### **Annual HbA1c Testing**

< 8% is controlled (Submit lab values)

**CPT**® 83036, 83037

**CPT II**® 3044F, 3051F

Members ages 18–75 with diabetes (type 1 and type 2) who were compliant with HbA1C control ( $\leq$ 8.0)

## **Statin Therapy**

### **Recieved Statin Therapy**

Dispensed at least one statin medication of any intensity

#### Statin Adherence 80%

Remained on statin medication of any intensity for at least 80% of treatment period.

Members ages 40–75 with diabetes who do not have clinical atherosclerotic cardiovascular disease (ASCVD)

## **Attention for Nephropathy**

ICD-10 Specific coding can be used to close gaps

#### Urine Test

CPT 81000-81003, 81005, 82042-82044, 84156

**CPT II** 3060F-3062F

## Nephropathy Treatment

ACE/ARB, Dx of ESRD/Stage 4 CKD, kidney transplant status, in care of a nephrologist

**CPT II** 3066F, 4010F

Members ages 18-75 with diabetes (type 1 and type 2) who had medical attention for nephropathy

#### **HEDIS**

#### **Blood Pressure Control**

BP, < 140/90 Controlled

**CPT** 

Diastolic < 80, 3078F

Diastolic 80-89, 3079F

Systolic < 130, 3074F

Systolic < 130-139, 3075F

#### Remote Blood Pressure Monitoring

**CPT** 93784, 93788, 93790, 99091, 99453, 99454, 99457, 99473, 99474

Members ages 18–75 with diabetes (type 1 and type 2) who had BP control (< 140/90 mm Hg)

#### Eye Exam

## **Retinal Screening**

**CPT** 67028, 67030, 67031, 67036, 67039-67043, 67101, 67105, 67107, 67108, 67110, 67113, 67121, 67141, 67145, 67208, 67210, 67218, 67220, 67221, 67227, 67228, 92002, 92004, 92012, 92014, 92018, 92019, 92134, 92225-92228, 92230, 92235, 92240, 92250, 92260, 99203-99205, 99213-99215, 99242-99245 **CPT II** 2022F, 2023F-2026F, 2033F For 3072F

## Unilateral Eye Enucleation

CPT 65091, 65093, 65101, 65103, 65105, 65110, 65112, 65114

Members ages 18–75 with diabetes (type 1 and type 2) who had an eye exam (retinal) performed

## Kidney Health Evaluation for Patients With Diabetes

Estimated Glomerular Filtration Rate (eGFR) CPT 80047, 80048, 80050, 80053, 80069, 82565

## Urine Albumin-Creatinine Ration (uACR)

**CPT** 82043, 82570

Members 18–85 years of age with diabetes (type 1 and type 2) who received a kidney health evaluation, defined by an estimated glomerular filtration rate (eGFR) **and** a urine albumin-creatinine ratio (uACR)