Diabetes with Manifestations

Many codes are now combination codes. Please be sure to review your ICD 10 book to determine if a secondary code is required.

- **E11.5** DMII with Circulatory Disorders
  - E11.51 w/Peripheral Angiopathy without gangrene
  - E11.40 Diabetic Neuropathy
  - E11.43 Diabetic Autonomic Gastroparesis
  - E11.31 to E11.35 with Retinopathy
  - E11.2 DMII with Renal Manifestations
  - E11.22 + N18. with CKD

- **E11.6** DMII with Other Specified Complication
  - E11.61 with Arthropathy
  - E11.65 with Diabetic Ulcer
  - E11.649 with Hyperglycemia
  - E11.69 with Other Specified Complication * must document causal relationship with complication

- **Z79.4** Long term use of insulin
- **R73.09** Abnormal Glucose
- **R73.03** Pre-Diabetes

Cardiovascular

- **I25.119** CAD w/ unspecified Angina
- **I25.709** CAD s/p CABG w/unspecified Angina
- **I20.9** Angina
- **I50.9** CHF
- **I42.9** Cardiomyopathy
- **I27.2** Pulmonary Hypertension

- **I47.1** Supraventricular Tachycardia (PSVT)
- **I49.5** Sick Sinus Syndrome (Sinoatrial dysfunction)
- **I48.91** Atrial Fibrillation
- **I21.9** MI (acute) NOS, <4 weeks old
- **Z79.01** Long Term Anticoagulation

Chronic Kidney Disease - Check GFR and Microalbuminuria at least twice a year.

- **N18.1** CKD I GFR > 90 w/ Microalbumin
- **N18.2** CKD II GFR 80-89 w/ Microalbumin
- **N18.3** CKD III GFR 30-59
- **N18.4** CKD IV GFR 15-29
- **N18.5** CKD V GFR <15
- **N18.6** ESRD on Dialysis
- **N18.25** Dialysis Noncompliance
- **Z99.2** Dialysis Status/presence of AV shunt
- **N25.81** Secondary Hyperparathyroidism, Renal

Circulatory / Vascular

- **I71.4** Abdominal Aortic Aneurysm – AAA w/o rupture
- **I70.0** Aortic Atherosclerosis (as on CXR)
- **I77.819** Aortic Ectasia, unspecified site
- **I77.1** Tortuous Artery
- **I70.209** Atherosclerosis, Extremities (plaque is atherosclerosis)

- **L89.9** Pressure Ulcer - Document location and stage
- **I83.0** Venous Stasis Ulcer
- **I82.5** Chronic DVT (on long term anticoagulation)
- **I73.9** Peripheral Vascular Disease (PVD)

Dermatology

- **C43.9** Malignant Melanoma
- **D03.9** Melanoma in Situ
- **Z85.820** H/O Malignant Melanoma
- **D69.2** Senile Purpura

Gastroenterology

- **K70.9** Alcoholic Liver Disease
- **K70.30** Alcoholic Cirrhosis
- **K72.9** End Stage Liver Disease

- **B18.2** Chronic Viral Hepatitis C
- **K73.9** Chronic Hepatitis, unspecified
- **K56.41** Fecal Impaction

Hematology

- **D70.9** Neutropenia
- **D61.8** Pancytopenia
- **D45.9** Polycythemia Vera
- **D47.3** Thrombocytopenia
- **D69.6** Thrombocytopenia

Validated HCC Coding requires documenting:

- Diagnosis
- Status of Condition
- Plan of Action

For example:

“CHF, stable, continue current meds” (document current medication member is taking for condition)

“Diabetic CKD III controlled, continue current meds, follow up appt, labs 6 months”

Once a Year, **Document Chronic Active Conditions** commonly not documented

**COAST** - Do NOT use the words “HISTORY OF” if patient has active disease currently being treated.

- Chronic Dx: CHF, COPD, DM, Residual effects of Stroke/CVA: I69.
- Ostomy: Colostomy: Z93.3 / Cystostomy: Z93.50 / Ileostomy: Z93.2 / Gastrostomy: Z93.1
- Amputations: including toes and lower limbs: Z89.
- Seizures/Epilepsy: G40.90 / Spinal Disorders: Paraplegia: G82.20 / Quadriplegia: G82.50
- Transplants: Stem cell, liver, heart, lung: Z94.

= additional digit(s) required

Always make sure that you are using the current year ICD -10 codes

Once a Year, **Document Chronic Active Conditions** commonly not documented

**COAST** - Do NOT use the words “HISTORY OF” if patient has active disease currently being treated.

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= additional digit(s) required
### Oncology
- **Document cancer as ACTIVE if:**
  - undergoing tx (including hormones like Tamoxifen/Lupron)
  - waiting for tx, watchful waiting, refuses tx: C00.
  - to D48.
- **Use "HISTORY OF" codes for cancers that are cured/show no evidence of disease**
  - C77. to C80.
- **Secondary Malignant Neoplasm (Metastases) – Document by location of metastisis**
  - C83. to C88.
- **LYMPHOMA documented as "IN REMISSION" is coded as active**
  - C91. to C95.1
- **Do not code LEUKEMIA as "history of" rather as "IN REMISSION"**

### Ophthalmology
- **Exudative Macular Degeneration**
  - H35.32
- **Vitreous Hemorrhage**
  - H43.1

### Neurology
- **Do not code acute CVA (usually ER or INPT only).**
- **Polyneuropathy in:**
  - G62.1 - Alcoholic
  - G62.0 - Due to Drugs
  - M32.19 - Lupus
  - M05.5 - RA
  - G63 - Other Diseases - Document a link- such as:
  - due to, caused by (B12 def, Chronic Hep, CKD IV, ESRD, ESLD, HIV/AIDS, IBD, Malignancies, Pre-Diabetes)

### Ophthalmology
- **Exudative Macular Degeneration**
  - H35.32
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  - H43.1

### Psychiatric
- **Document chronic lifetime conditions.**
- **Schizophrenia**
  - F20.
- **Bipolar**
  - F31.
- **Major Depression** - Do NOT write “depression”. Instead, document as “major depression” with a specific descriptor:
  - mild, moderate, severe, partial or full remission.
- **Single Episode**
  - F32.
- **Recurrent, lifetime**
  - F33.
- **Avoid Abuse and Dependence** - Do NOT code “abuse” when a patient has chronic dependence/use.
- **Alcohol Dependence / Alcoholism**
  - F10.2
  - F10.9
- **Benzodiazepines**
  - F13.2
- **Opioid Dependence**
  - F11.2
- **Chronic Opiate Use**
  - Z79.891

### Dementia
- **Check MMSE/SLUMS.**
- **Senile Dementia / Dementia with Depression**
  - F03.9
  - G30.9
- **Alzheimer’s**
  - F03.90
  - G30.9 + F02.80
- **Dementia with Psychosis (delusions, hallucinations)**
  - Dementia in Alzheimers

### Respiratory
- **Document to the highest specificity and include type of asthma or bronchitis.**
- **Simple Chronic Bronchitis (smokers cough)**
  - J41.0
- **Chronic Obstructive Asthma**
  - J44.9
- **COPD**
  - J44.9
- **Emphysema**
  - J43.9
- **Chronic Respiratory Failure - consider in COPD if Pulse Ox is <88% on room air**
  - J96.10
- **Post inflammatory Pulmonary Fibrosis (interstitial scarring) Lung Granuloma**
  - J84.10
- **Long Term Oxygen Use - be sure to document chronic pulmonary condition**
  - Z99.81

### Urology
- **Hyperoxaluria (Calcium oxalate kidney stones)**
  - E72.53
- **Leakage of other urinary catheter**
  - T83.098
- **Infection and inflammatory reaction due to indwelling urethral catheter**
  - T83.511
- **Mechanical complication of other urinary catheter**
  - T83.098

### Morbid Obesity
- **Obese, due to excess calories (BMI ≥40)**
  - E66.01
- **BMI 40 or greater**
  - Z68.4
- **BMI 35 - 39.99 w/ comorbid conditions (must document causal relationship)**
  - Diabetes, HTN, Hyperlipidemia, CHF, CAD, DJD of knee/hip, Sleep apnea
- **BMI 35 - 39.99**
  - Z68.3
- **BMI 25 - 34.99**
  - Z68.2

### Musculoskeletal
- **Inflammatory polyarthropathy**
  - M06.4
- **Chronic postrheumatic arthropathy**
  - M12.08
- **Chronic pain in prosthetic joint (initial encounter)**
  - T84.84XA
- **Inflammatory spondylopathies**
  - M46.
- **Sacroiliitis - (must document SI joint abnormality on imaging)**
  - M46.1

### Opioid Use Disorder
- **Benzodiazepines**
  - F13.2
- **Opioid Dependence**
  - F11.2
- **Chronic Opiate Use**
  - Z79.891

### Malnutrition
- **Protein Calorie Malnutrition**
  - E44. to E46
- **Chronic Morbid Obesity, due to excess calories (BMI ≥40)**
  - E66.01
- **BMI 40 or greater**
  - Z68.4
  - **Note:** Always code BMI ≥40 as Morbid Obesity.
- **Chronic Morbid Obesity, due to excess calories (BMI ≥40) **
  - Z68.3
  - **BMI 35 - 39.99 w/ comorbid conditions (must document causal relationship)**
  - Diabetes, HTN, Hyperlipidemia, CHF, CAD, DJD of knee/hip, Sleep apnea

### Morbid Obesity
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- **BMI 40 or greater**
  - Z68.4
  - **Note:** Always code BMI ≥40 as Morbid Obesity.
- **BMI 35 - 39.99 w/ comorbid conditions (must document causal relationship)**
  - Diabetes, HTN, Hyperlipidemia, CHF, CAD, DJD of knee/hip, Sleep apnea
  - Z68.3
- **BMI 35 - 39.99**
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