

ICD-10-CM Road Map

This month's focus is understanding the ICD-10-CM draft guidelines for endocrine, nutritional, and metabolic diseases.

Within this category are the following blocks:

• E00–E07 Disorders of the thy roid gland

• E08-E14 Diabetes mellitus

• E15–E16 Other disorders of glu-

cose regulation and pancreatic internal

secretion

The biggest change in the guidelines from ICD-9-CM to ICD-10-CM is coding for diabetes mellitus.

Diabetes mellitus codes in ICD-10-CM are combination codes that include:

- Type of diabetes mellitus
- Body system affected
- Complications affecting that body system

There are six diabetes mellitus categories in the ICD-10-CM. They are:

- E08 Diabetes mellitus due to an underlying condition
- E09 Drug or chemical induced dia betes mellitus
- E10 Type I diabetes mellitus
- E11 Type 2 diabetes mellitus
- E13 Other specified diabetes mel litus
- E14 Unspecified diabetes mellitus

All the categories above (with the exception of E10) include a note directing users to use an additional code to identify any insulin use, which is Z79.7. The concept of insulin and non-insulin is a component of the diabetes mellitus categories in ICD-10-CM. Code Z79.7 (long-term current use of insulin) is

added to identify the use of insulin for diabetic management, even if the patient is not insulin-dependent in code categories E08–E09 and E11–E14.

The fourth character under these categories refer to underlying conditions with specified complications, whereas the fifth character defines the specific manifestation such as neuropathy, angiopathy, etc.

Definitions for the types of diabetes mellitus are included in the "includes notes" under each diabetes mellitus category. Sequencing of diabetes codes from categories E08–E09 have a "code first" note indicating that diabetes is to be sequenced after the underlying condition, drug, or chemical that is responsible for the diabetes. Codes from categories E-10–E14 (diabetes mellitus) are sequenced first, followed by B codes for any additional complications outside of these categories, if applicable.

Review this example of ICD-9-CM with a comparison to ICD-10-CM:

A Type I diabetic patient with Kimmelstiel-Wilson disease visited his endocrinologist in follow-up.

ICD-9-CM		ICD-10-CM	
250.41	Diabetes with renal manifestations, Type I [juvenile	E10.21	Type 1 diabetes mellitus with diabetic nephropathy
	type], not stated as uncontrolled	Type 1 diabetes mellitus with Kimmelstiel-Wilson disease	
581.81	Nephropathy, not otherwise specified	E8.21	Diabetes mellitus due to underlying condition with diabetic nephropathy

Diabetes Mellitus in Pregnant Patient

Codes for pregnancy, childbirth, and the puerperium, which are located in Chapter 15 of ICD-10-CM, are always sequenced first on the medical record. A patient who has a preexisting diabetes mellitus who becomes pregnant should be assigned a code from category O24 (Diabetes Mellitus in Pregnancy, Childbirth, and the Puerperium followed by the diabetes code from Chapter 4 of ICD-10-CM.

These codes have been expanded in ICD-10-CM. The fourth character subcategory codes identify the type of diabetes as preexisting Type I or Type 2, unspecified, or gestational. The fifth character indicates whether the diabetes is treated during pregnancy, childbirth, or the puerperium. The sixth character indicates the trimester during which treatment is sought. With gestational diabetes, the sixth character identifies if the gestational diabetes is diet-controlled, insulin controlled, or unspecified control.

Review this example:

A 25-year-old patient with diabetes mellitus Type 1 in her second trimester visited her OB/GYN for her routine follow-up visit. The patient's blood sugar was well controlled and the patient indicated she was doing well with her diet and exercise regimen. The physician scheduled the patient for follow-up in one month.

ICD-9-CM	ICD-10-CM
648.03 Maternal diabetes mellitus, antepartum 250.01 Diabetes mellitus without mention of complication, Type I [juvenile type], not stated as uncontrolled	O24.012 Preexisting diabetes mellitus, Type 1, in pregnancy, second trimester E10.69 Type 1 diabetes mellitus with other specified complication

Review this example:

A 27-year-old patient developed gestational diabetes in her third trimester. The patient's condition is controlled with diet and exercise.

ICD-9-CM	ICD-10-CM	
648.8 Abnormal glucose tolerance- gestational diabetes	O24.41 Gestational diabetes mel- litus in pregnancy	
648.83 Abnormal maternal glu- cose tolerance, antepartum	O24.410 Gestational diabetes mel- litus in pregnancy, diet- controlled	

Diabetic patients who receive a new pancreas for treatment of DM may no longer require insulin or other care for their diabetes mellitus, but preexisting complications from the diabetes may still exist after transplant. Codes from the DM categories are still applicable to describe the complication is these cases. A transplant status code should be used with the diabetes code in this circumstance.

Example:

ICD-9-CM	ICD-10-CM	
V42.83 Pancreas replaced by transplant	Z94.83 Pancreas transplant status	

ICD-10-CM Legislative Update: The House and Senate adjourned without completing action on health information technology legislation—reconciling HR 4157, the "Health Information Technology Promotion Act," and S. 1418, the "Wired for Healthcare Quality Act." This legislation is likely to be finalized by congress when they return for their session on November 9 following the elections. The \$650 million in grant authority provided for in S. 1418 was problematic for House negotiators as HR 4157 only provided for \$40 million. Negotiations will con-

tinue over the next month with the intention of developing a final version of health information technology legislation. This could ultimately delay implementation. Lawmakers now are hammering out compromises on this and several other differences in the bills.

The AMA has urged that implementation of ICD-10-CM not occur until 2012 due to the cost and challenges associated with implementing new clinical information technology systems, along with the additional costs physician offices could face in upgrading practice management systems, and the necessity of retraining billing and coding staff.

Next month's focus: The ICD-10-CM draft guidelines for mental health.

