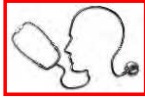# Overview of ICD-10-CM Diagnosis Coding:

What Diabetes Health Care Professionals, Educators, RDs, Coaches and Education Specialists Need To Know!

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Learning Objectives

1. State the maximum number of "characters" in an ICD-10 code and the main purpose of this larger number of characters.

2. State the chapter name, chapter number, chapter letter and 3 digit rubric in the ICD-10 manual that contains many of the codes that RDs and diabetes educators will likely use when furnishing MNT and DSME/T.

3. Explain what the 7th character of an ICD-10 code further defines, when it is added to certain diagnosis codes.

4. State what <u>additional</u> diagnosis code must always be added to make the coding valid for all PWDs on insulin (including pregnant PWDs).

Topic Outline

1. Overview
2. Electronic Transaction Standards:5010
3. ICD-10 Implementation Date
4. History of ICD-10
5. Why We Are Changing to ICD-10
6. ICD-10 Structure and Terminology
7. MNT-DSME Referral Form with ICD-10
8. ICD-10 Diabetes Codes: T1, T2 (+ Pumps)
9. ICD-10 Diabetes and Pregnancy Codes
10. ICD-10 Pregnancy Codes
11. Mapping with GEMS
12. Dietary Counseling and Surveillance + BMI Codes
13. Fast Facts for RDs and Diabetes Educators
14. ICD-10 Resources
15. References
16. Listing of Diabetes Mellitus Codes E08-E16
17. ICD-10 Codes for RDs and Diabetes Educators

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1. Overview

ICD-9-CM: International Classification of Diseases, 9th revision, Clinical Modification

ICD-10: Developed by the World Health Organization as the nomenclature for **all countries**

ICD-10-CM: International Classification of Diseases, 10th revision, Clinical Modification – **US only**

ICD-10-PCS: International Classification of Diseases, 10th revision, Procedure Classification System **Procedure** classification system developed by Centers for Medicare & Medicaid Services (CMS) for use in U.S. **for inpatient hospital settings only**. **US only**

1. Overview

- ICD-10-**CM** (**diagnoses**) will be used by all providers in every health care setting

- ICD-10-**PCS** (**procedures**) will be used only for **hospital claims** for **inpatient hospital procedures**

  o NOT used on physician claims for inpatients, nor for Ops

- ICD-10 has no impact on Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes

2. Electronic Transaction Standards: New Version 5010

- HIPAA requires that covered entities use **standardized formats** for certain electronic health transactions, such as

  o Claims

  o Remittance Advice

  o Eligibility inquiry and responses

  o Claims status inquiry requests and responses

- On 1-1-12, standards changed from **ASC X12 Version 4010**/**4010A1** to **Version 5010**

  ASC = American Standards Committee

2. Electronic Transaction Standards: New Version 5010

- **HIPAA** covered entities affected by transition to 5010 are:
  o Payers
  o Providers (physicians, non-physician practitioners)
  o Clinics
  o Hospitals
  o Dentists
  o Health plans
  o Pharmacies
  o Health care clearinghouses
  o Business associates that use transactions:
    ▪ Billing and service agents and software vendors

2. Electronic Transaction Standards: New Version 5010

- Why the change?

  o OLD version **4010:**
    ▪ Lacks functionality required by health care industry
    ▪ Does not accommodate ICD-10 codes

  o Change must occur **before** ICD-10 implementation date of **OCTOBER 1, 2015**, to allow adequate testing and implementation time

3. ICD-10 Implementation Date

Implementation date for ICD-10:

October 1, 2015

for all HIPAA-covered entities.

4. History of ICD-10

- 1990 –Endorsed by World Health Assembly (diagnosis only)

- 1994 –Release of full ICD-10 by WHO HIPAA Mandate-1996

- 2002 (October) –ICD-10 published in 42 languages (including 6 official WHO languages)

- January 1, 1999 –U.S. implemented for mortality (death certificates)

5. Why We Are Changing to ICD-10

- ICD-9 **outdated**; 30 years old....technology has changed

- Many diagnosis categories are **full**

- Not **descriptive** enough

- ICD-9 is **running out of codes**:

  o Hundreds of new dx codes submitted annually

  o ICD-10 allows for **more codes, greater specificity** and thus better epidemiological tracking

5. Why We Are Changing to ICD-10

- **Better data** will be available for:

  o Measuring the quality, safety, and efficacy of care

  o Designing payment systems and processing claims for reimbursement

  o Conducting research, epidemiological studies and clinical trials

  o Setting health policy

  o Operational and strategic planning and designing of healthcare delivery systems
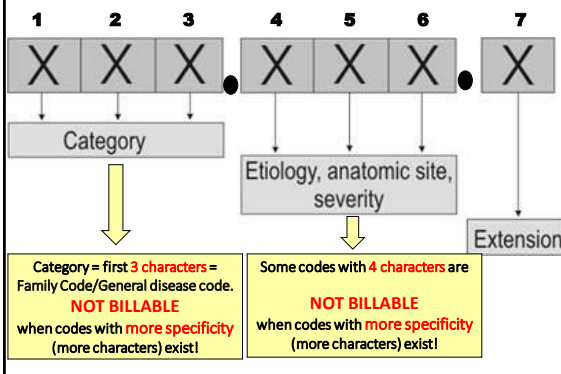
5. Why We Are Changing to ICD-10

  o Monitoring resource utilization

  o Improving clinical, financial and administrative performance

  o Preventing and detecting healthcare fraud and abuse

  o Tracking public health and risks

5. Why We Are Changing to ICD-10

- Will enhance accurate **reimbursement** for services rendered

- Will facilitate evaluation of medical processes and outcomes so as to increase **quality**

- Will have certain characteristics needed in a coding system:

  o Flexible enough to quickly **incorporate emerging diagnoses and procedures**

  o Exact enough to identify diagnoses and procedures **precisely**

    ▪ ICD-9-CM is too old to facilitate either of these

5. Why We Are Changing to ICD-10

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |

Category

Etiology, anatomic site, severity

Extension

Category = first 3 characters = Family Code/General disease code. **NOT BILLABLE** when codes with **more specificity** (more characters) exist!

Some codes with 4 characters are **NOT BILLABLE** when codes with **more specificity** (more characters) exist!

6. ICD-10 Structure and Terminology

7 Characters Spell:

C. E. A. S. E.

C = Category	**Characters 1-3**
E = Etiology	**Characters 4-6**
A = Anatomic site	**Characters 4-6**
S = Severity or other clinical detail	**Characters 4-6**
E = Extension	**Character 7**

- ▪ **Initial or subsequent encounter**
- ▪ **Laterality (left vs. right)**
- ▪ **Other clinical detail (e.g., # weeks gestation)**

6. ICD-10 Structure and Terminology

- Category = **first 3 characters** = family code/general disease code

- **NOT BILLABLE** when codes exist with **GREATER SPECIFICITY** (more characters)

  - Examples of:
    - E10 = T1 diabetes mellitus
    - E11 = T2 diabetes mellitus

6. ICD-10 Structure and Terminology

NOT BILLABLE as need GREATER SPECIFICITY:
- E11   = T2 DM
- E11.0 = T2 DM with hyperosmolarity
- E11.2 = T2 DM with kidney complications
- E11.3 = T2 DM with ophthalmic complications
- E11.4 = T2 DM with neurological complications
- E11.5 = T2 DM with circulatory complications
- E11.6 = T2 DM with other specified complications
- E11.8 = T2 DM with unspecified complications
- E11.9 = T2 DM without complications

6. ICD-10 Structure and Terminology

NOT BILLABLE as need GREATER SPECIFICITY:
- E11.4 = T2 DM w/ neurological complications

BILLABLE (5 characters!)

- E11.40 = T2 DM with diabetic neuropathy, unspecified

- E11.41 = T2 DM with diabetic mono-neuropathy

- E11.42 = T2 DM with diabetic poly-neuropathy

- E11.43 = T2 DM with diabetic autonomic (poly) neuropathy

- E11.44 = T2 DM with diabetic amyotrophy

- E11.49 = T2 DM with other diabetic neurological complication

6. ICD-10 Structure and Terminology

NOT BILLABLE as need GREATER SPECIFICITY:
- E11   = T2 DM

- E11.5 = T2 DM w/ circulatory complications

BILLABLE (5 characters!)
- E11.51 = Type 2 DM with PERIPHERAL ANGIOPATHY without GANGRENE

- E11.52 = Type 2 DM with PERIPHERAL ANGIOPATHY with GANGRENE

- E11.59 = Type 2 DM with OTHER CIRCULATORY COMPLICATION

5. Why We Are Changing to ICD-10

NOT BILLABLE as needs GREATER SPECIFICITY:
- Z71 = Persons encountering health services for other counseling & medical advice, not elsewhere classified

BILLABLE…..BUT, must use ADDITIONAL CODE!
- Z71.3 = Dietary counseling and surveillance
  - Must use ADDITIONAL CODE:
    - For any associated underlying condition
    - To identify BMI, if known (Z68._)

6. ICD-10 Structure and Terminology

Conditions that RDs and/or diabetes educators typically encounter are in RED. See Section 13 for specific codes.

Chapter (Character)	Chapter Title and (3 Character Category = Rubric) NOT BILLABLE when codes exist with greater specificity!
I. (A and B)	Certain infectious and parasitic diseases. (A00-B99)
II. (C00 to D48)	Neoplasms. (C00-D48)
III. (D50 to D89)	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism. (D50-D89)
IV. (E)	Endocrine, nutritional and metabolic diseases. (E00-E90)
V. (F)	Mental and behavioral disorders. (F01-F99)

Chapter (Character)	Chapter Title and (3 Character Category = Rubric) NOT BILLABLE when codes exist with greater specificity!
VI. (G)	**Diseases of nervous system. (G00-G99)**
VII. (H00 to H59)	Diseases of eye and adnexa. **(H00 – H59)**
VIII. (H60 to H95)	Diseases of ear and mastoid process. **(H60 – H95)**
IX. (I)	**Diseases of circulatory system. (I00 – I99)**
X. (J)	Diseases of respiratory system. **(J00 – J99)**

Chapter I codes begin with capital "I";
not to be confused with number "1"

Chapter (Character)	Chapter Title and (3 Character Category = Rubric) NOT BILLABLE when codes exist with greater specificity!
XI. (K)	**Diseases of digestive system. (K00 – K99)**
XII. (L)	Diseases of skin and subcutaneous tissue. **(L00 – L99)**
XIII. (M)	Diseases of musculoskeletal system and connective tissue. **(M00 - M99)**
XIV. (N)	Diseases of genitourinary system. **(N00 – N99)**
XV. (O)	**Pregnancy, childbirth and puerperium. (O00 = O99)**
XVI. (P)	Certain conditions originating in perinatal period. **(P00 – P99)**

Pregnancy Chapter codes begin with **capital letter "O";**
not to be confused with **number "0".**

Chapter (Character)	Chapter Title and (3 Character Category = Rubric) NOT BILLABLE when codes exist with greater specificity
XVII. (Q)	Congenital malformations, deformations and chromosomal abnormalities. **(Q00 – Q99)**
XVIII. (R)	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified. **(R00 R99)**
XIX. (S and T)	Injury, poisoning and certain other consequences of external causes. **(S00 – T98)**
XX. (V, W, X, Y)	External causes of morbidity and mortality. **(V00 – Y98)**
XXI. (Z)	**Factors influencing health status and contact with health services. (Z00-Z99)**
XXII. (U)	Special purposes. **(U00 – U00)**

6. ICD-10 Structure and Terminology

Category = first 3 characters = "Family Code".
They refer to the general disease.

NOT billable when codes with more specificity
(more characters) exist!

Example: E10 is not billable: Type 1 Diabetes Mellitus

6. ICD-10 Structure and Terminology

- **7** characters in codes provides **greatest specificity** to identify:
  - o Characters **1-3** = **Category ("Block"), Family/General Code**
    - ▪ **E10 = Type 1 diabetes mellitus**
  - o Characters **4-6** = **More Specificity**
    - ▪ **Etiology (expanded causes)**
    - ▪ **Anatomic site**
    - ▪ **Severity or other clinical detail**
  - o Character **7** = **Extension**
    - ▪ **Initial or subsequent encounter**
    - ▪ **Laterality (left vs. right)**
    - ▪ **Other clinical detail (e.g., # weeks gestation)**

6. ICD-10 Structure and Terminology

7 Characters Spell:
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E = Extension	**Character 7**

- ▪ **Initial or subsequent encounter**
- ▪ **Laterality (left vs. right)**
- ▪ **Other clinical detail (e.g., # weeks gestation)**

6. ICD-10 Structure and Terminology

NON-BILLABLE:

- **E10** = Type 1 diabetes mellitus
  - **E10.1** = Type 1 diabetes mellitus with ketoacidosis

BILLABLE:

- **E10.10** = Type 1 diabetes mellitus with ketoacidosis without coma
- **E10.11** = Type 1 diabetes mellitus with ketoacidosis with coma

6. ICD-10 Structure and Terminology

NON-BILLABLE:

- E10 = Type 1 diabetes mellitus
  - E10.2 = Type 1 diabetes mellitus with kidney complications

BILLABLE:

- E10.21 = Type 1 diabetes mellitus with diabetic nephropathy
- E10.22 = Type 1 diabetes mellitus with diabetic chronic kidney disease
- E10.29 = Type 1 diabetes mellitus with other diabetic kidney complication

6. ICD-10 Structure and Terminology

NON-BILLABLE:

- E11 = Type 2 diabetes mellitus
  - E11.0 = Type 2 diabetes mellitus with hyperosmolarity

BILLABLE:

- E11.0**0** = Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemichyperosmolar coma (NKHHC)
- E11.01 = Type 2 diabetes mellitus with hyperosmolarity with coma

6. ICD-10 Structure and Terminology

- **"Unspecified Codes"** (aka, **NOS** = **Not Otherwise Specified**)
  - Use when provider has **not** given **enough info** in documentation to select specific dx code
  - Is appropriate to:
    - Select applicable "**unspecified code**" when sufficient clinical information is **NOT** known or **NOT** available to select a more specific code
  - Example: dx of pneumonia but **not** specific type
  - **Code to HIGHEST LEVEL OF CERTAINTY**

6. ICD-10 Structure and Terminology

- Example of where more documentation required to reach a more specific code:
  - **Diabetes** documentation must include:
    - Type of diabetes
    - Body system affected
    - Complication or manifestation
    - For T2 DM on insulin, **additional code** for **long term insulin use** required:
      - ❖ **Z79.4 = Long term (current) use of insulin**
  - Early general consensus: using unspecified dx codes could prove detrimental, and mean unpaid claim

6. ICD-10 Structure and Terminology

Sequencing of codes on MR and claims

- Sequencing is discretionary, depending on:
  - Severity of conditions and reason for encounter

- Overarching sequencing rule of thumb:
  - *Code first* the principle diagnosis:
    - Defines **primary reason** for encounter
    - Is sequenced **1st** on medical record and claim
    - Determined by provider at **end** of encounter

6. ICD-10 Structure and Terminology

Sequencing codes on claims: what code gets listed 1st, 2nd ?

- **Tabular List** contains detailed instructional notes:

  o *Code First* note

  o Used for conditions with both *etiology/underlying condition* and multiple body system *manifestations*

6. ICD-10 Structure and Terminology

- **Sequencing** on claim:

  ❖ Code <u>first</u> the *etiology/underlying condition*

  ❖ Code <u>second</u> the *manifestation*

    ➢ In most cases, *manifestation codes* will have note **"In Diseases Classified Elsewhere"** (are component of **etiology** but in different category)

      ◆ Always sequenced <u>second</u> on claim

6. ICD-10 Structure and Terminology

Examples of *coding first* the *etiology/underlying condition:*

E08 Diabetes mellitus due to underlying condition

Code first the underlying condition, such as:

- Congenital rubella (P35.0)
- Cushing's syndrome (E24.-)
- Cystic fibrosis (E84.-)
- Malignant neoplasm (C00-C96)
- Malnutrition (E40-E46)
- Pancreatitis and other diseases of pancreas (K85-K86.-)

6. ICD-10 Structure and Terminology

- *Use Additional Code* instructional note:
- Instructs that 2 codes may be required to fully describe condition

Example:

E10.22 Type 1 diabetes mellitus with diabetic chronic kidney disease

➢ Type 1 diabetes mellitus with chronic kidney disease due to conditions classified to .21 and .22

➢ *Use additional code* to identify stage of CKD (N18.1-N18.6)

6. ICD-10 Structure and Terminology

Example:

E09 Drug or chemical induced diabetes mellitus

Code first (T36-T65) poisoning due to drug or toxin

Use additional code to identify drug (T36 – T50)

Use additional code to identify any insulin use (Z79.4)

6. ICD-10 Structure and Terminology

- **Laterality**:
  o **7th character** can = right or left side designations:
    - Right side = 1
    - Left side = 2
    - Bilateral = 3

      ❖ M10.01**1** = Idiopathic gout, **right shoulder**

      ❖ M10.01**2** = Idiopathic gout, **left shoulder**

6. ICD-10 Structure and Terminology

- **Morbidity**: **disease rate** of particular disease based on related group such as age range or gender

- **Mortality**: **death rate** based on related group such as age range, gender or country

6. ICD-10 Structure and Terminology

NEC = Not Elsewhere Classified

- Indicates there is **no** separate specific code available to represent condition documented

- Diagnostic statement is specific, but coding system not specific enough

NOS = Not Otherwise Specified

- Equivalent to word "unspecified"

- Indicates that documentation does **not** provide enough information to assign more specific code

6. ICD-10 Structure and Terminology

- **Combination Code:**
  - ○ Single code used to classify **2 diagnoses**, or
  - ○ Dx with associated **sign or symptom**, or
  - ○ Dx with associated **complication**
    - ▪ *Multiple codes are **not** to be used when combination code clearly IDs all of elements in the documentation*
      <u>Examples of diabetes combination codes</u>:

  E11.51 = **T2 DM w/peripheral angiopathy w/o gangrene**

  E11.52 = **T2 DM w/peripheral angiopathy w/ gangrene**

  E11.59 = **T2 DM w/ other circulatory complication**

6. ICD-10 Structure and Terminology

7 Characters Spell:
C. E. A. S. E.

C = Category	**Characters 1-3**
E = Etiology	**Characters 4-6**
A = Anatomic site	**Characters 4-6**
S = Severity or other clinical detail	**Characters 4-6**
E = Extension	**Character 7**

- ▪ **Initial or subsequent encounter**
- ▪ **Laterality (left vs. right)**
- ▪ **Other clinical detail (e.g., # weeks gestation)**

6. ICD-10 Structure and Terminology

- **4th** and **5th** characters further define:
  - ○ **E**tiology
  - ○ **A**natomic Site
  - ○ **S**everity or other clinical detail

C15 = Malignant neoplasm of esophagus

  C15.3 = malignant neoplasm of <u>**upper third**</u> **of esophagus**

  C15.4 = malignant neoplasm of <u>**middle third of esophagus**</u>

  C15.5 = malignant neoplasm of <u>**lower third of esophagus**</u>

6. ICD-10 Structure and Terminology

- **4th** and **5th** characters further define:
  - ○ **E**tiology
  - ○ **A**natomic Site
  - ○ **S**everity or other clinical detail

E11 = T2 diabetes mellitus

  E11.5 = **T2 DM w/ circulatory complications**

  E11.51 = **T2 DM w/peripheral angiopathy w/o gangrene**

  E11.52 = **T2 DM w/peripheral angiopathy w/ gangrene**

  E11.59 = **T2 DM w/ other circulatory complication**

6. ICD-10 Structure and Terminology

- **6th** character identifies most precise **specificity** level:
  - **J15.1** = **Pneumoni**a due to **pseudomonas**
  - **J15.2** = **Pneumonia** due to **staphylococcus**
    - **J15.20** = **Pneumonia** due to **staphylococcus**, **unspecified**
    - **J15.21** = **Pneumonia** due to **staphylococcus aureus**
    - **J15.211** = **Pneumonia** due to <u>**Methicillin susceptible**</u> **staphylococcus aureus**
    - **J15.212** = **Pneumonia** due to <u>**Methicillin resistant**</u> **staphylococcus aureus**

6. ICD-10 Structure and Terminology

- **7th character = Extension**
  - Have **different meanings** depending on **code Category**
  - Required on certain codes to further define:
    - Injury *site* and *type* of injury (e.g., left hip fractures)
    - Anatomical site
    - Laterality (left vs. right)
    - Severity of condition
    - External causes of injuries
    - Specificity of condition (single or multiple gestation)
    - Encounter type:
      - ❖ Initial encounter
      - ❖ Subsequent encounter (follow-up)
      - ❖ **Sequela**

6. ICD-10 Structure and Terminology

- **Sequela/late effect** requires **7th character**

  - Pathological condition resulting from disease, injury, therapy or other trauma

  - Typically is chronic condition that is **complication of acute condition** that begins during that acute condition (in contrast to a late effect)

Examples:

1. CKD and CAD is often **sequela/late effect of diabetes**

2. Neck pain is common **sequela/late effect of whiplash** or other trauma to cervical vertebrae

6. ICD-10 Structure and Terminology

Examples of **7th character**:

- M80.051**S** = Age-related osteoporosis with current pathological fracture, right femur, **sequela**
- S06.0X1**A** = Concussion with loss of consciousness of 30 minutes or less, **initial encounter**

Please tell me there are no more characters in these codes!

6. ICD-10 Structure and Terminology

- **7th character** for **Main Category O64** in chapter **Pregnancy, Childbirth and the Puerperium (O00 = O99) =**

  - **0:** for single gestations and multiple gestations where fetus is unspecified

  - **1 – 9:** for cases of multiple gestations to ID fetus for which code applies

  Code for 1 fetus with x placeholder is:

  O64.0xx1

6. ICD-10 Structure and Terminology

- **7th character** must be assigned to each code in **Main Category O64**:

  0 = not applicable or unspecified

  1 = Fetus 1

  2 = Fetus 2

  3 = Fetus 3

  4 = Fetus 4

  5 = Fetus 5

  9 = other Fetus

6. ICD-10 Structure and Terminology

- **7th character and placeholder:**

  o "X" required as "**dummy" placeholder** for certain codes to allow for **future expansion**
    - X is **not** case sensitive

  o Certain **3 character Main Categories** and **4 character Sub-Categories** have applicable 7th character requirements that must be used with:
    - All codes within the category or
    - In Tabular List is so noted

  o **Where placeholder exists, "x" must be used in order for code to be considered a valid code**

---

6. ICD-10 Structure and Terminology

Examples of **placeholder "x"** codes:

- S27.53**xS** = Laceration of thoracic trachea, **sequela**

- T27.0**xxA** = Burn of larynx and trachea, **initial encounter**

---

6. ICD-10 Structure and Terminology

√ x7th   SYMBOL INDICATES A CODE THAT REQUIRES **7TH CHARACTER**

- Codes with **<6 characters** that require 7th character must contain placeholder "x" to fill in for the missing character

- **7th** character used must be a **7th** character that is assigned to a specific code category or sub-category:

  o Ex: Cannot use a 7th character for a **pregnancy** code that has been assigned to a **fracture** code

---

7. MNT – DSME Referral Form with ICD-10 Codes

See Mary Ann's MNT-DSME REFERRAL FORM with ICD-10 Codes!

✓ **D I A G N O S I S:**

- ■ = Diagnosis for which you must **add** a diagnosed manifestation, state of disease/condition or other clinical detail.

- * = **Unacceptable** as principle diagnosis; must **add** additional diagnosis code for any associated underlying condition(s).

- ◈ = Use additional **code Z79.4** to identify any **insulin use**.

---

7. MNT – DSME Referral Form with ICD-10 Codes

E10.1◈	Type 1 DM w ketoacidosis	E10.9◈	w/o complications
and		and	
and		E11.0■◈	Type 2 DM w hyperosmolarity
E10.2■◈	w kidney complications	and	
and		E11.2■◈	w kidney complications
and		and	
E10.3■◈	w ophthalmic complications	E11.3■◈	w ophthalmic complications
and		and	
		Z71.3*	Dietary counseling & surveillance
		and	
		Z94.0*	Kidney transplant status
		and	

---

8. ICD-10 Diabetes Codes: T1 and T2

Chapter IV = Endocrine, Nutritional & Metabolic Diseases

E00-E07	DISORDER OF THYROID GLAND
E08-E13	**DIABETES MELLITUS**
E15-E16	OTHER DISORDERS OF GLUCOSE REGULATION AND PANCREATIC INTERNAL SECRETION
E20-E35	DISORDER OF OTHER ENDOCRINE GLANDS
E50-E64	**OTHER NUTRITIONAL DEFICIENCIES**
E65-E68	**OVERWEIGHT, OBESITY & OTHER HYPERALIMENTATION**
E70-E90	**METABOLIC DISORDERS**

Above are "3 character category codes"

8. ICD-10 Diabetes Codes: T1 and T2

Chapter IV:
Endocrine, Nutritional and Metabolic Diseases (E00-E90)

- **Diabetes mellitus (E10 - E14)**
  - o **E10** = T1 DM
  - o **E11** = T2 DM
  - o **E12** = Malnutrition-related DM
  - o **E13** = Other specified DM
  - o **E14** = Unspecified DM
- **Other disorders of glucose regulation and pancreatic internal secretion (E15 - E16)**
  - o **E15** = Non-diabetic hypoglycemic coma
  - o **E16** = Other disorders of pancreatic internal secretion

8. ICD-10 Diabetes Codes: T1 and T2

3 character E10 –E14 codes

cannot be used as valid diagnosis,

as codes with greater specificity exist!

Must have 4th, 5th and/or 6th character

after decimal point.

8. ICD-10 Diabetes Codes: T1 and T2

7 Characters Spell:
C. E. A. S. E.

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A = Anatomic site	**Characters 4-6**
S = Severity or other clinical detail	**Characters 4-6**
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- ▪ **Initial or subsequent encounter**
- ▪ **Laterality (left vs. right)**
- ▪ **Other clinical detail (e.g., # weeks gestation)**

8. ICD-10 Diabetes Codes: T1 and T2

- Why? These 3 character **"Category"** or **"Family Codes"** diabetes codes expanded to 4th – 6th character to include:

  - o Classification of the diabetes, and

  - o Manifestation

- o Main category for diabetes updated to reflect current clinical classification of diabetes…so:

  - ▪ *No longer classified as "controlled" or "uncontrolled"*

Z79.4 = **Long term (current) use of insulin.**
If pt on insulin, must report **Z79.4** with all codes from Category BLOCKS below:

E08 = DM Due to Underlying Conditions*
  Code **first** underlying condition…**see next slide** ➡

E09 = Drug or Chemical Induced DM*
  Code **first** (**T36 - T65**) to identify the drug or chemical

O24 = Diabetes in Pregnancy, Childbirth and the Puerperium

  > Use **"Additional Code"** from category **E10** or **E11** to identify manifestations

  > **Note:** "O" Category codes trump any other code
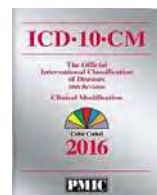
  *Types of secondary diabetes mellitus

Only Use ALPHABETICAL INDEX to Find
CHAPTER That Code is in with INSTRUCTIONAL NOTES!

ICD-10-CM INDEX TO DISEASES and INJURIES
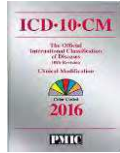
A|B|C|D|E|F|G|H|I|J|K|L|M|N|O|P|Q|R|S|T|U|V|W|X|Y|Z

A

Aarskog's syndrome Q87.1
Abandonment —see Maltreatment
Abasia (-astasia) (hysterical) F44.4
Abderhalden-Kaufmann-Lignac syndrome (cystinosis) E72.04
Abdomen, abdominal —see also condition
- acute R10.0
- angina K55.1
- muscle deficiency syndrome Q79.4
Abdominalgia —see Pain, abdominal
Abduction contracture, hip or other joint —see Contraction, joint
Aberrant (congenital) —see also Malposition, congenital
- adrenal gland Q89.1
- artery (peripheral) Q27.8
-- basilar NEC Q28.1
-- cerebral Q28.3
-- coronary Q24.5
- digestive system Q27.8
- eye Q15.8
-- lower limb Q27.8

ICD·10·CM
The Official
International Classification
of Diseases
10th Revision
Clinical Modification
2016
PMIC

Do Use TABULAR LIST to Select Billable Code(s)!

- Do **NOT** code directly from **ALPHABETICAL INDEX** in **ICD-10-CM Code Manual**

- With additional specificity, important to use **Tabular List** of diagnoses to find code with *highest level of specificity* possible based on:

  o Documentation of provider, and
  o Coding guidelines

Type 2 diabetes mellitus

2016 Non-Specific Code

Use Additional ?
- code to identify any insulin use (Z79.4)

Type 1 Excludes ?
- diabetes mellitus due to underlying condition (E08.-)
- drug or chemical induced diabetes mellitus (E09.-)
- gestational diabetes (O24.4-)
- neonatal diabetes mellitus (P70.2)
- postpancreatectomy diabetes mellitus (E13.-)
- postprocedural diabetes mellitus (E13.-)
- secondary diabetes mellitus NEC (E13.-)
- type 1 diabetes mellitus (E10.-)

Includes ?
- diabetes (mellitus) due to insulin secretory defect
- diabetes NOS
- insulin resistant diabetes (mellitus)

Do Use TABULAR LIST to Select Billable Code(s)!

Example: ICD-10 TABULAR Instructional Notes for Chapter:

Endocrine, Nutritional and Metabolic Diseases (E00-E90)

- *Excludes1* means "NOT CODED HERE!"

  o Means that code from this category should never be used at same time as a *Excludes1* code

  o Example: patient **CANNOT** have 2 conditions together, at the same time such as T1 DM and T2 DM

- Appears under all the **diabetes mellitus** categories!

Do Use TABULAR LIST to Select Billable Code(s)!

- *"Excludes2"* means "NOT INCLUDED HERE"

  o ACCEPTABLE to use **both the category code** and the *"Excludes2"* **code** TOGETHER on claim

  o Patient **CAN** have **both conditions** at SAME TIME

Do Use TABULAR LIST to Select Billable Code(s)!

- Diabetes Categories **E10 – E13** have many **coding notes**:

  o **"Code First"** instructional note:
    - Code for Etiology/Underlying Condition)
    - Sequenced FIRST on claim

  o **"Use Additional Code"** instructional note:
    - Code for Manifestation
    - Sequenced SECOND on claim
      Correct coding sequence =
      Etiology _or_ reason for visit is FIRST code.
      Manifestation is SECOND code.

Do Use TABULAR LIST to Select Billable Code(s)!

- Correct sequencing of codes on claims important!

- Differs, based on circumstances:

  o If **NO** instruction note in **Tabular List:**
    - Code **first** the primary reason for encounter
      ❖ Ex: T85.633A Leakage of insulin pump, initial encounter
    - Code **second** the etiology/underlying condition
      ❖ Ex: E10.69 Type 1 diabetes mellitus with other specified complication

Do Use TABULAR LIST to Select Billable Code(s)!

o If '**Code first**' instructional note is in **Tabular List:**

- Means that both etiology/underlying condition and manifestation occurring together
  - ❖ Code **first** the etiology/underlying condition
  - ❖ Code **second** the manifestation

Example:

- ❖ Code **first** the etiology: G20 Parkinson's disease
- ❖ Code **second** the manifestation: F02.80 Dementia in other diseases classified elsewhere without behavioral disturbance as is manifestation of Parkinson's

---

Do Use TABULAR LIST to Select Billable Code(s)!

o If '**Code first**' instructional note and
'**Use Additional Code**' note in **Tabular List:**

- Code **first** the etiology/underlying condition
- Code **second** the additional code(s)

Example using: E09 Drug or chemical-induced diabetes

- Code **first** the etiology/underlying condition from category T36 - T65 to ID poisoning due to drug or toxin
- Code **second** an **additional code** to identify drug
- Code **third** an **additional code** to identify insulin use (Z79.4)

Do Use TABULAR LIST to Select Billable Code(s)!

More on **ICD-10 TABULAR List** instructional notes in **diabetes**

- Diabetes category includes many **combination codes** which include diabetes as the etiology and the manifestation togther in one code:
  - o Type of DM (e.g., T1 or T2)
  - o Body system affected (e.g., kidneys)
  - o Complications affecting that body system (e.g., stage 3 CKD)

---

8. ICD-10 Diabetes Codes: T1 and T2

- **Diabetes** documentation and coding needs to include:
- o **Type** or **cause** of diabetes:
  - Type 1
  - Type 2
  - Due to drugs or chemicals
  - Due to underlying condition
  - Other specified diabetes
- o **Body system complications** related to diabetes, such as kidney or neurological complications

---

8. ICD-10 Diabetes Codes: T1 and T2

o Specific **body system complications**, such as:

- Chronic kidney disease
- Foot ulcer
- Hypoglycemia without coma

---

8. ICD-10 Diabetes Codes: T1 and T2

Example of **combination code:**

- **T2 DM pt on insulin** is seen for **stage 3 CKD**:

How is this coded and sequenced on claim?

- o **E11.22** = **T2 DM** with **diabetic chronic kidney disease**
- o **N18.3** = **Chronic kidney disease, stage 3 (moderate)**
- o **Z79.4** = **Long term (current) use of insulin**

8. ICD-10 Diabetes Codes: T1 and T2

Examples of **combination code**:

- **T2 DM pt** **on insulin** evaluated for a **chronic diabetic left foot ulcer** **with necrosis of muscle:**

  How is this coded and sequenced on claim?

  o **E11.621** = **Type 2 diabetes mellitus with foot ulcer**

  o **L97.523** = **Non-pressure chronic ulcer of other part of left foot with necrosis of muscle**

  o **Z79.4** = **Long term (current) use of insulin**

8. ICD-10 Diabetes Codes: T1 and T2

Examples of **combination codes**:

- **T1 DM** seen for **severe non-proliferative diabetic retinopathy** with **macular edema**

  How is this coded and sequenced on claim?

  o **E10.341** = **T1 DM with** severe **non-proliferative diabetic retinopathy with macular edema**

  o **E10.622** = **Type 1 DM with other skin ulcer**

  - Use additional code to identify **site of ulcer (L97.1-L97.9, L98.41-L98.49)**

8. ICD-10 Diabetes Codes: T1 and T2: PUMPS

Diabetes Insulin Pump Complications

8. ICD-10 Diabetes Codes: T1 and T2: PUMPS

- **Diabetes insulin pump complications:**

  o Code complication from **Chapter 19: Injury, Poisoning and Certain Other Consequences of External Causes (S00-T88), Category T85**

  - **Category T85** = Complications of other internal prosthetic devices, implants, and grafts

    ❖ Used to report diabetes insulin pump complications

    ❖ Category T85 **requires** appropriate **7th character** added to each code to describe **encounter type**:

    A = Initial encounter
    D = Subsequent encounter
    S = Sequela

8. ICD-10 Diabetes Codes: T1 and T2: PUMPS

Example:

- T1 DM pt seen in ED for initial encounter to evaluate **leakage of her insulin pump (reason for visit)**

  o Code **sequencing** on claim **(order of codes)** is:

  - **T85.633A**: **Leakage of insulin pump**, **initial encounter** plus
  - **E10.69**: T1 DM with other specified complication

    The <u>REASON</u> for the patient visit is ALWAYS the **primary** diagnosis!

8. ICD-10 Diabetes Codes: T1 and T2

- Other codes that are used in relation to DM are in *other* Chapters:

  o **Chapters 16**: Certain Conditions Originating in the Perinatal Period

  o **Chapter 18**: Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified

  o **Chapter 21**: Factors Influencing Health Status and Contact with Health Services
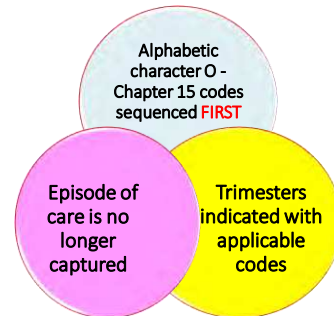
9. ICD-10 Diabetes and Pregnancy Codes

Baby on Board!

---

9. ICD-10 Diabetes and Pregnancy Codes

Chapter 15: Pregnancy, Childbirth and Puerperium (O00 - O99)

- Alphabetic character O – Chapter 15 codes sequenced FIRST
- Episode of care is no longer captured
- Trimesters indicated with applicable codes

---

9. ICD-10 Diabetes and Pregnancy Codes

O00 - O99 Pregnancy, Childbirth and the Puerperium*

- Codes used:
  - Only on maternal records….*never on newborn records*
  - For conditions related to/aggravated by pregnancy, childbirth or the puerperium

Excludes1: Supervision of normal pregnancy (in Z34.-)
NOTE: Z30 - Z39 = Persons encountering health services in circumstances related to reproduction

*Puerperium is period between childbirth and return of uterus to normal size

---

9. ICD-10 Diabetes and Pregnancy Codes

O00 - O99 Pregnancy, Childbirth and the Puerperium

Excludes2:
- **Means both category code and *Excludes2* code can occur together**
  - Mental and behavioral disorders associated w/puerperium (in F53)
  - Obstetrical tetanus (in A34)
  - Postpartum necrosis of pituitary gland (in E23.0)
  - Puerperal osteomalacia (in M83.0)

---

9. ICD-10 Diabetes and Pregnancy Codes

Trimesters counted from 1st day of last menstrual period.

- **1st trimester = less than 14 weeks 0 days**

- **2nd trimester = 14 weeks 0 days to less than 28 weeks 0 days**

- **3rd trimester = 28 weeks 0 days until delivery**

---

9. ICD-10 Diabetes and Pregnancy Codes

ICD-10 vs. ICD-9 Classification Differences

ICD-10-CM: Trimester	• First trimester • Second trimester • Third trimester
ICD-9-CM: Episode of Care	• Antepartum • Postpartum • Delivered or not

9. ICD-10 Diabetes and Pregnancy Codes

Chapter contains following blocks. *Note: diabetes found in O20-O29:

O00-O08	Pregnancy with abortive outcome
O09	Supervision of high risk pregnancy
O10-O16	**Edema, proteinuria and hypertensive disorders in pregnancy, childbirth and the puerperium**
O20-O29	**Other maternal disorders predominantly r/t pregnancy**
O30-O48	Maternal care related to fetus and amniotic cavity and possible delivery problems
O60-O77	Complications of labor and delivery
O80-O82	Encounter for delivery
O85-O92	Complications predominantly related to the puerperium
O94-O9A	Other obstetric conditions, not elsewhere classified

Source: http://www.cdc.gov/nchs/icd/icd10cm.htm
FY 2015 release of ICD-10-CM, Tabular Index, PDF Zip File, 14.8 MB

O20-O29 = Other maternal disorders predominantly r/t pregnancy

O24.0 = Pre-existing DM, T1 in pregnancy, childbirth and puerperium

> Use **ADDITIONAL CODE** from **category E10** to further ID any manifestations

O24.01 = Pre-existing DM, T1, in pregnancy

O24.011 = **Pre-existing DM, T1**, **in pregnancy, 1st trimester**

O24.012 = **Pre-existing DM, T1**, **in pregnancy, 2nd trimester**

O24.013 = **Pre-existing DM, T1**, **in pregnancy, 3rd trimester**

O24.019 = **Pre-existing DM, T1**, **in pregnancy, unspecified trimester**

O24.02 = **Pre-existing DM, T1, in childbirth**

O24.03 = **Pre-existing DM, T1, in the puerperium**

---

9. ICD-10 Diabetes and Pregnancy Codes

Example:

- 32 y/o female pt with T1 DM is G2, P1, 26 weeks and is seen to evaluate her diabetes in pregnancy
- Codes are:

  o **O24.012**: Pre-existing DM, type 1, in pregnancy, second trimester

  plus

  o **Z3A.26**: 26 weeks gestation of pregnancy

O24.1 = Pre-existing DM, T2, in pregnancy, childbirth and the puerperium. Insulin-resistant DM in pregnancy, childbirth and the puerperium

> Use **ADDITIONAL CODE** (for) from **category E11** to further identify any manifestations for **long-term (current) use of insulin (Z79.4)**

O24.11 = **Pre-existing DM, T2, in pregnancy**

O24.111 = **Pre-existing DM, T2, in pregnancy, 1st trimester**

O24.112 = **Pre-existing DM, T2, in pregnancy, 2nd trimester**

O24.113 = **Pre-existing DM, T2, in pregnancy, 3rd trimester**

O24.119 = **Pre-existing DM, T2, in pregnancy, unspecified trimester**

O24.12 = **Pre-existing DM, T2, in childbirth**

O24.13 = **Pre-existing DM, T2, in the puerperium**

O24.3 = Unspecified pre-existing DM in pregnancy, childbirth and puerperium

> Use **ADDITIONAL CODE** (for) from **category E11** to further ID any manifestations for **long-term (current) use of insulin (Z79.4)**

O24.31 = Unspecified pre-existing DM in pregnancy

O24.311 = Unspecified pre-existing DM in pregnancy, 1st trimester

O24.312 = Unspecified pre-existing DM in pregnancy, 2nd trimester

O24.313 = Unspecified pre-existing DM in pregnancy, 3rd trimester

O24.319 = Unspecified pre-existing DM in pregnancy, unspecified trimester

O24.32 = Unspecified pre-existing DM in childbirth

O24.33 = Unspecified pre-existing DM in the puerperium

---

9. ICD-10 Diabetes and Pregnancy Codes

- Must also report code from **Category Z3A…weeks of gestation**….to identify specific week of pregnancy
- **Z3A** is always followed by 4th and 5th characters to identify weeks of gestation

Example:

- GDM patient seen by OB/GYN for her routine visit at 29 weeks 6/7 days; is doing well and her GDM is well controlled with diet….coding is:

  o **O24.410** = **GDM in pregnancy, diet-controlled**

  o **Z3A.29** = **Gestation of pregnancy, 29 weeks**

9. ICD-10 Diabetes and Pregnancy Codes

- **Z79.4 = Long term (current) insulin use**

  o Code to be assigned if pt treated with insulin

  o Exception to rule is **category O24.410 GDM in pregnancy**, **diet-controlled**

  o Official ICD-10 guidelines state that code **Z79.4**

  NOT to be added to codes in sub-category **O24.4**

---

9. ICD-10 Diabetes and Pregnancy Codes

O24.8 = Other pre-existing DM in pregnancy, childbirth, and the puerperium

> Use **ADDITIONAL CODE** (for):from **categories E08, E09 and E13** to further ID any manifestation **long-term (current) use of insulin (Z79.4)**

Continues as in previous slides

---

9. ICD-10 Diabetes and Pregnancy Codes

O24.9 = Unspecified DM in pregnancy, childbirth and the puerperium

> Use **ADDITIONAL CODE** for long-term (current) use of insulin **(Z79.4)**

Continues as in previous slides

---

9. ICD-10 Diabetes and Pregnancy Codes

O25 = Malnutrition in pregnancy, childbirth and the puerperium

  O25.1 = Malnutrition in pregnancy

   O25.10 = Malnutrition in pregnancy, unspecified trimester

   O25.11 = Malnutrition in pregnancy, 1st trimester

   O25.12 = Malnutrition in pregnancy, 2nd trimester

   O25.13 = Malnutrition in pregnancy, 3rd trimester

  O25.2 = Malnutrition in childbirth

  O25.3 = Malnutrition in the puerperium

---

9. ICD-10 Diabetes and Pregnancy Codes

O26 = Maternal care for other conditions predominantly r/t pregnancy

  O26.0 = Excessive weight gain in pregnancy

  O26.5 = Maternal hypotension syndrome
       Supine hypotensive syndrome

  O26.8 = Other specified pregnancy related conditions

       O26.81 = Pregnancy related exhaustion and fatigue

       O26.83 = Pregnancy related renal disease

       Use additional code to identify the specific disorder

       O99.31 = Alcohol use complicating pregnancy, childbirth, and the puerperium

       O99.33 = Smoking (tobacco) complicating pregnancy, childbirth, and the puerperium

---

9. ICD-10 Diabetes and Pregnancy Codes: GDM

- **O24.4 = Gestational diabetes (sub-category)**

  o Code **NOT** used with any other code from **Category O24**: DM in Pregnancy, Childbirth and Puerperium

  o Needs specification of:

   ▪ **Diet controlled, or**
   ▪ **Insulin controlled**

     ❖ Default: If **BOTH** diet and insulin controlled, ICD-10 code for **insulin controlled** will be assigned

9. ICD-10 Diabetes and Pregnancy Codes: GDM

O24.4 = GDM. DM arising in pregnancy. GDM NOS

  O24.41 = GDM in pregnancy

    O24.410 = GDM in pregnancy, diet controlled

    O24.414 = GDM in pregnancy, insulin controlled

    O24.419 = GDM in pregnancy, unspecified control

  O24.42 = GDM in childbirth

    O24.420 = GDM in childbirth, diet controlled

    O24.424 = GDM in childbirth, insulin controlled

    O24.429 = GDM in childbirth, unspecified control

  O24.43 = GDM in the puerperium

    O24.430 = GDM in the puerperium, diet controlled

    O24.434 = GDM in the puerperium, insulin controlled

    O24.439 = GDM in the puerperium, unspecified control

9. ICD-10 Diabetes and Pregnancy Codes

- Must also report code from **Category Z3A...weeks of gestation**....to identify **specific week of pregnancy**

  o **Z3A** is always followed by 4th and 5th characters to identify weeks of gestation

- Example: T1 DM pt is 16 weeks pregnant....coding is:

  o O24.012 = Pre-existing T1 DM in pregnancy, 2nd trimester

  o **Z3A.16** = 16 weeks gestation of pregnancy

9. ICD-10 Diabetes and Pregnancy Codes

7th character to identify fetus number

0 – not applicable or unspecified

1 – fetus 1	4 – fetus 4
2 – fetus 2	5 – fetus 5
3 – fetus 3	9 – other fetus

9. ICD-10 Diabetes and Pregnancy Codes

- **Pre-existing hypertension in pregnancy**

  o Category **O10** = pre-existing hypertension complicating pregnancy, childbirth and puerperium ...incl. codes for:

  - Hypertensive heart
  - Hypertensive chronic kidney disease

    ❖ When assigning 1 of above codes, must use **ADDITIONAL CODE** from appropriate **hypertension category** to specify:

    ➢ Type of heart failure or
    ➢ Chronic kidney disease

    ✓ **See Section 1.C.9. = hypertension**

9. ICD-10 Diabetes and Pregnancy Codes

- **Abnormal glucose tolerance in pregnancy:**

  o Assigned code is from **subcategory O99.81 = Abnormal glucose complicating pregnancy, childbirth, and the puerperium**

9. ICD-10 Diabetes and Pregnancy Codes

- Other codes that are used in relation to pregnancy and DM are in:

  o **Chapters 16**: Certain Conditions Originating in the Perinatal Period

  o **Chapter 18**: Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified

  o **Chapter 21**: Factors Influencing Health Status and Contact with Health Services

10. ICD-10 Pregnancy Codes

Z codes/categories for obstetrical and reproductive services:

- Z30 = Encounter for contraceptive management
- Z31 = Encounter for procreative management
    - Z32.2 = Encounter for childbirth instruction
    - Z32.3 = Encounter for childcare instruction
- Z33 = Pregnant state
- **Z34 = Encounter for supervision of normal pregnancy**
- Z36 = Encounter for antenatal screening of mother
- Z3A = weeks of gestation of pregnancy
- Z37 = Outcome of delivery
- Z39 = Encounter for maternal postpartum care and exam
- Z76.81 = Expectant parent(s) prebirth pediatrician visit

10. ICD-10 Pregnancy Codes

- Routine prenatal OP visits for pts with high-risk pregnancies
    - **O09, Supervision of High-Risk Pregnancy** = FIRST dx
        - Secondary chapter 15 codes may be used in conjunction with these codes if appropriate

11. Mapping ICD-9 Codes to ICD-10 with GEMS

- **GEMS = General Equivalence Mappings** = tool used to convert data from ICD-9 to ICD-10 and vice versa
- Can be used for:
    - Tracking quality
    - Recording morbidity/mortality
    - Calculating reimbursement or
    - Converting ICD-9 application to ICD-10-CM/PCS
- Mapping **not** precise correlation between ICD-9 v. 10 codes
    - Linkages between code sets fairly close – at times 1:1
    - However, in many cases, direct linkage is **not** possible

12. Dietary Counseling and Surveillance + BMI Codes

Z00-Z99: Factors influencing health status and contact with health services.

- **Z71** = Persons encountering health services for other counseling and medical advice, not elsewhere classified
    - **Z71.3 = Dietary counseling and surveillance**
        - **Use Additional:**
            - **Code for any associated underlying condition**
            - **Code to identify BMI, if known (Z68._)**
    - **Z94.0** = Kidney transplant status

12. Dietary Counseling and Surveillance + BMI Codes

For Medicare Intensive Behavioral Therapy (IBT) for Obesity Benefit

Z68.30 BMI 30.0-30.9, adult	Z68.38 BMI 38.0-38.9, adult
Z68.32 BMI 32.0-32.9, adult	Z68.39 BMI 39.0-39.9, adult
Z68.33 BMI 33.0-33.9, adult	Z68.41 BMI40.0-44.9, adult
Z68.34 BMI 34.0-34.9, adult	Z68.42 BMI 45.0-49.9, adult
Z68.35 BMI 35.0-35.9, adult	Z68.43 BMI50.0-59.9, adult
Z68.36 BMI 36.0-36.9, adult	Z68.44 BMI 60.0-69.9, adult
Z68.37 BMI 37.0-37.9, adult	Z68.45 BMI > 70.0, adult

12. Dietary Counseling and Surveillance + BMI Codes

ICD-10-CM Index entries contain back-references to **Z71**.**3:**

- Admission (for) - see also Encounter (for)
    - *dietary surveillance and counseling Z71.3*
- Counseling
    - *see also Counseling dietary Z71.3*
- Allergy, allergic (reaction) (to) T78.40, food (any) (ingested) T78.1
    - *dietary counseling and surveillance Z71.3*
- Colitis (acute) (catarrhal) (chronic) (noninfective) (hemorrhagic) - see also Enteritis K52.9
    - *dietary counseling and surveillance (for) Z71.3*
- Counseling (for) Z71.9
    - *dietary Z71.3*
- Diabetes, diabetic (mellitus) (sugar) E11.9
    - *dietary counseling and surveillance Z71.3*

12. Dietary Counseling and Surveillance + BMI Codes

- Dietary surveillance and counseling Z71.3
- Gastritis (simple) K29.70
  - *dietary counseling and surveillance Z71.3*
- Hypercholesterolemia (essential) (familial) (hereditary) (primary) (pure) E78.0
  - *dietary counseling and surveillance Z71.3*
- Hypoglycemia (spontaneous) E16.2
  - *dietary counseling and surveillance Z71.3*
- Intolerance food K90.4
  - *dietary counseling and surveillance Z71.3*
- Obesity E66.9
  - *dietary counseling and surveillance Z71.3*

12. Dietary Counseling and Surveillance + BMI Codes

- Supervision (of) dietary (for) Z71.3
  - *allergy (food) Z71.3*
  - *colitis Z71.3*
  - *diabetes mellitus Z71.3*
  - *food allergy or intolerance Z71.3*
  - *gastritis Z71.3*
  - *hypercholesterolemia Z71.3*
  - *hypoglycemia Z71.3*
  - *intolerance (food) Z71.3*
  - *obesity Z71.3*
  - *specified NEC Z71.3*
- Surveillance (of) (for) - see also Observation
  - *dietary Z71.3*

13. Fast Facts for RDs and Diabetes Educators

Fast Facts Spell:

I.C.D.S.

M.N.T.

D.S.M.E.

R.D.S.

C.D.E.S.

ICD-10 codes increase from ~14,000 (in ICD-9) to >69,000 in ICD-10 standardized set for diagnoses

- More logical, organized, accurate
- Highly specific

Increased codes

Codes categorized by diseases, medical conditions and non-medical conditions into:

- Chapters with 3 characters:
  - 1 alphabet + 2 numbers
  - Consider "family code" to define general disease
  - NOT billable when other codes with more specificity exist…examples:
    - E10 = T1 Diabetes Mellitus
    - E11 = T2 Diabetes Mellitus

Codes categorized by diseases

Date of service on claims determines requirement to use ICD-10 code…..NOT date on referral

- Date of service = on or after **OCT. 1, 2015**

Date of service determines ICD-10 use

D

Determination by Medicare (CMS) to give a grace period for using highest level of specificity of code

- Through **10-1-2016** claims NOT denied if highest level of dx code specificity NOT on claims submitted by physicians or other practitioners for claims billed under **Part B** Physician Fee Schedule as long as claim has valid code from **RIGHT FAMILY of CODES**
- Ex: MNT, DSMT, Evaluation & Management codes for provider office visits

https://www.cms.gov/Medicare/Coding/ICD10/Downloads/ICD-10-guidance.pdf

Determination by CMS for grace period

S

Several "combination codes" exist

- Multiple diagnosis codes not to be used when **combination code** clearly identifies all of elements in provider's documentation
- Examples:
  o E11.51 = T2 DM w/peripheral angiopathy w/o gangrene
  o E11.52 = T2 DM w/peripheral angiopathy w/ gangrene
  o E11.59 = T2 DM w/ other circulatory complication

Several combination codes exist

M

Maximum number of characters in code = 7

- More characters in code means more specificity
- Thus, providers who diagnose need to supply more detail in their documentation to support accurate & valid diagnosis code assignment by:
  ▪ Providers
    ➢ Physicians
    ➢ NPs, PAs, Clinical Nurse Specialists
    ➢ Clinical psychologists
  ▪ Licenses medical coders

Maximum number of characters = 7

N

No specific diagnosis codes (for other than illness or injury) also exist...examples:

Z00 - Z99: Factors influencing health status and contact with health services.

Z71.3 Dietary counseling and surveillance

- Instructional note in **Tabular Index** states:
  o Use additional code for any associated underlying medical condition
  o Use additional code to identify BMI, if known (Z68.-)
    Z68.30 **BMI** 30.0-30.9, adult
    Z68.32 **BMI** 32.0-32.9, adult
    Z68.33 **BMI** 33.0-33.9, adult
    Z68.34 **BMI** 34.0-34.9, adult
    Z68.35 **BMI** 35.0-35.9, adult
    Z68.36 **BMI** 36.0-36.9, adult
    Z68.37 **BMI** 37.0-37.9, adult

No specific diagnosis codes also exist

T

Track MNT – DSME claims regularly every 3 months...retrospective:

- To determine if claims denied, rejected or paid
  o If denied or rejected, the reason why
  o If reason why is internal,
    ▪ Take required action to:
      ➢ Fix any/all internal problems causing denial or rejection
      ➢ Re-bill claims

Track MNT – DSME claims

D

Develop working relationship with billers/coders in your facility to:

- Keep up-to-date on rules and regulations
- Identify ICD-10 challenges in your area
- Help resolve challenges on a timely basis
- Help correct errors on denied/rejected claims
- Help ensure corrected claims are re-billed... and re-billed on timely basis (within 12 months from date of service)

Develop working relationship with billers

S Scope of practice for RDs does **not** allow RDs to make diagnosis, or select diagnosis code to insert on claim

- Exception:
  - CAN select a **BMI** code as it is:
    - Not a medical diagnosis
    - Not based on a medical evaluation
    - Based on a mathematical calculation

Scope of practice for RD

Make sure to take advantage of the many online ICD-10 electronic coding tools and search engines

M Insert URL into browser…not search bar:

- *ICD-10-CM Tabular Lists of Diseases and Injuries:*
  - file:///C:/Users/Asus%20Admin/Documents/ICD%2010%20Diagnosis%20Codes/ICD%2010%20Tabular%20List-of-Diseases-and-Injuries_2015_From%20CMS%20Site%20Link.pdf

- *ICD-10 look up by code or name:* **www.icd10data.com**

- *ICD-10 look up on CMS site:*
  - www.cms.gov/medicare-coverage-database/staticpages/icd-10-code-lookup.aspx
- *ICD-10-CM INDEX TO DISEASES and INJURIES*
  - http://cdn.roadto10.org/wp-uploads/2014/08/2015-ICD-10-CM-Index-to-Diseases-and-Injuries.pdf

Make sure to use online coding tools

Extra specificity ICD-10 codes required for certain diagnoses. Example: **E11 = T2 DM**

E
- Refers to general disease
- NOT BILLABLE as is a NON-SPECIFIC DX CODE
- BUT, these 5 character codes ARE billable codes

  - **E11.40** = T2 DM w/ diabetic neuropathy, unspecified
  - **E11.41** = T2 DM w/ diabetic mononeuropathy
  - **E11.42** = T2 DM w/ diabetic polyneuropathy
  - **E11.43** = T2 DM w/ diabetic autonomic (poly) neuropathy
  - **E11.44** = T2 DM w/diabetic amyotrophy
  - **E11.49** = T2 DM w/ other diabetic neurological complication

Extra codes required for other codes

Research what specific ICD-10 codes authorized by private payers for **RD**-related benefits:

- MNT
- DSME/T
- Nutrition counseling
- IBT for Obesity benefit

Research codes authorized by private payers for RD-related benefits

---

D **D**esign referral form and super-bill for RD-related benefits with appropriate ICD-10 codes

Design referral form with ICD-10 codes

Specific ICD-10 rules to be followed:

- **Sequencing**: Code first **etiology** *or* reason for visit; code second **manifestation** (but sometimes etiology coded second, if reason for visit not for illness/injury, such as leakage of insulin pump):

  - Code first etiology: G20: Parkinson's disease
  - Code second manifestation: F02.80: Dementia in other diseases not classified elsewhere w/o behavioral disturbance

- **Combination codes** also exist which don't require more codes, if pt not on insulin

  - **E10.341** = **T1 DM** with **severe non-proliferative diabetic retinopathy w/macular edema**

Specific ICD-10 rules to be followed

S | Specific ICD-10 rules to be followed

- **Code Also** can be instructional note in Tabular Index
  - o 2 codes may be required to fully describe condition
  - o Sequencing of 2 codes is discretionary
- **Additional Code**: required for specific diagnoses
  - o Ex: If pt is on insulin, must use additional code **Z79.4, Long term (current) use of insulin**
- **Unspecified Codes** (NOS or Not Otherwise Specified Code)
  - o Use when provider has **not** given enough info in documentation to select dx code

C | Check billing software and clearinghouse contracts

Check your **EHR**, billing software and clearinghouse contracts to insure they are 100% ICD-10 compliant!

Very low level of personal hygiene..? There's a code for that! (ICD-10) R46.0

D | Discuss with payers affect of ICD-10 on contracts

Discuss with insurers if ICD-10 has affected your **contracts** (in-network or out-of-network), **payment schedules** or other **requirements.**

E | Entering 3 character code will cause claim rejections

Entering **3 character** "family/general" Main Category ICD-10 code on claim will likely cause claim to be rejected for payment

- Examples:
  - o E10 = T1 diabetes mellitus
  - o E11 = T2 diabetes mellitus

S | Share these silly ICD-10 codes

Share these 16 silly, crazy, harebrained ICD-10 codes with your colleagues!

1. V97.33XD: Sucked into jet engine, subsequent encounter
2. W51.XXXA: Accidental striking against or bumped into by another person, sequela
3. Y93.D: Activities involved arts and handcrafts

S | Share these silly ICD-10 codes

4. Z99.89: Dependence on enabling machines and devices, not elsewhere classified
5. Y92.146: Swimming-pool of prison as the place of occurrence of the external cause
6. S10.87XA: Other superficial bite of other specified part of neck, initial encounter
7. W55.41XA: Bitten by pig, initial encounter

S

8.   W61.62XD: Struck by duck, subsequent encounter

9.   Z63.1: Problems in relationship with in-laws

10. W220.2XD: Walked into lamppost, subsequent encounter

11. Y93.D: V91.07XD: Burn due to water-skis on fire, subsequent encounter

12. W55.29XA: Other contact with cow, subsequent encounter

S

13. W22.02XD: V95.43XS: Spacecraft collision injuring occupant, sequela

14. W61.12XA: Struck by macaw, initial encounter

15. R46.1: Bizarre personal appearance

16. V00.01XD: Pedestrian on foot injured in collision with roller-skater, subsequent encounter.

14. ICD-10 Resources

- http://www.icd10data.com

- AAPC Website
  o http://www.aapc.com/ICD-10/index.aspx

- CMS Website on ICD 10:
  o https://www.cms.gov/Medicare/Coding/ICD10/2014-ICD-10-CM-and-GEMs.html
  o https://www.cms.gov/ICD10/01_Overview.asp#TopOfPage
  o www.CMS.gov/ICD10

- https://implementicd10.noblis.org/

14. ICD-10 Resources

- www.AHIMA.org
- www.ICD10watch.com
- www.AAPC.com
- www.WEDI.org
- www.humanservices.Arkansas.gov/ICD10
- http://www.himss.org/ASP/topics_icd10playbook.asp
- For ICD-10 Coding of DIABETES MELLITUS:

  o http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_049595.hcsp?dDocName=bok1_049595

- For Automatic Conversion of ICD-9 Codes to ICD-10 Codes:
  o http://www.icd9data.com/2014/Volume1/240-279/249-259/250/default.htm

14. ICD-10 Resources

15. References

1. Moczygemba, Jackie, and Susan H. Fenton. "Lessons Learned from an ICD-10-CM Clinical Documentation Pilot Study." Perspectives in Health Information Management. Winter 2012. http://perspectives.ahima.org

2. Centers for Medicare and Medicaid Services. "2012 ICD-10-CM and GEMs." https://www.cms.gov

3. Centers for Disease Control and Prevention. "2011 National Diabetes Fact Sheet." www.cdc.gov/diabetes/pubs

4. National Center for Health Statistics. "ICD-10-CM Official Guidelines for Coding and Reporting 2012." Available under "Tools and Resources" at www.cdc.gov/nchs

5. National Center for Health Statistics. "ICD-10-CM Index and Tabular." 2007. Available online at www.cdc.gov/nchs/about/otheract/icd9/icd10cm.htm.

6. AHIMA. ICD-10-CM Coder Training Manual. Chicago, IL: AHIMA Press, 2012

7. Kostick, Karen M. "Coding Diabetes Mellitus in ICD-10-CM: Improved coding for Diabetes Mellitus Complements Present Medical Science." Journal of AHIMA 83, no.5 (May '12): 56-58 http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_049595.hcsp?dDocName=bok1_049595

8. FY 2015 release of ICD-10-CM, Tabular Index, PDF Zip File, 14.8 MB http://www.cdc.gov/nchs/icd/icd10cm.htm

16. Listing of All Diabetes Mellitus Codes E08-E16

E08 Diabetes mellitus due to underlying condition
Code First:
- the underlying condition, such as:
- congenital rubella (P35.0)
- Cushing's syndrome (E24.-)
- cystic fibrosis (E84.-)
- malignant neoplasm (C00-C96)
- malnutrition (E40-E46)
- pancreatitis and other diseases of the pancreas (K85-K86.-)
Use Additional:
- **code to identify any insulin use (Z79.4)**
Excludes1:
- drug or chemical induced diabetes mellitus (E09.-)
- gestational diabetes (O24.4-)
- neonatal diabetes mellitus (P70.2)
- postpancreatectomy diabetes mellitus (E13.-)
- postprocedural diabetes mellitus (E13.-)
- secondary diabetes mellitus NEC (E13.-)
- type 1 diabetes mellitus (E10.-)
- type 2 diabetes mellitus (E11.-)

E09 Drug or chemical induced diabetes mellitus
Code First:
- poisoning due to drug or toxin, if applicable (T36-T65 with fifth or sixth character 1-4 or 6)
Use Additional:
- code for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character 5)
- code to identify any insulin use (Z79.4)
Excludes1:
- diabetes mellitus due to underlying condition (E08.-)
- gestational diabetes (O24.4-)
- neonatal diabetes mellitus (P70.2)
- postpancreatectomy diabetes mellitus (E13.-)
- postprocedural diabetes mellitus (E13.-)
- secondary diabetes mellitus NEC (E13.-)
- type 1 diabetes mellitus (E10.-)
- type 2 diabetes mellitus (E11.-)

E10 Type 1 diabetes mellitus
Excludes1:
- diabetes mellitus due to underlying condition (E08.-)
- drug or chemical induced diabetes mellitus (E09.-)
- gestational diabetes (O24.4-)
- hyperglycemia NOS (R73.9)
- neonatal diabetes mellitus (P70.2)
- postpancreatectomy diabetes mellitus (E13.-)
- postprocedural diabetes mellitus (E13.-)
- secondary diabetes mellitus NEC (E13.-)
- type 2 diabetes mellitus (E11.-)
Includes
- brittle diabetes (mellitus)
- diabetes due to autoimmune process
- diabetes due to immune mediated pancreatic islet beta-cell destruction
- idiopathic diabetes (mellitus)
- juvenile onset diabetes
- ketosis-prone diabetes

E10 Type 1 diabetes mellitus

E10.1 Type 1 diabetes mellitus with ketoacidosis

E10.10 …… without coma

E10.11……..with coma

E10.2 Type 1 diabetes mellitus with kidney complications

E10.21 Type 1 diabetes mellitus with diabetic nephropathy

E10.22 Type 1 diabetes mellitus with diabetic chronic kidney disease

E10.29 Type 1 diabetes mellitus with other diabetic kidney complication

E10 Type 1 diabetes mellitus

E10.3 Type 1 diabetes mellitus with ophthalmic complications

E10.31 Type 1 diabetes mellitus with unspecified diabetic retinopathy

E10.311 …… with macular edema

E10.319 …… without macular edema

E10.32 Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy

E10.321 …… with macular edema

E10.329 …… without macular edema

E10 Type 1 diabetes mellitus

E10.33 Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy

E10.331 …… with macular edema

E10.339 …… without macular edema

E10.36 Type 1 diabetes mellitus with diabetic cataract

E10.39 Type 1 diabetes mellitus with other diabetic ophthalmic complication

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E10 Type 1 diabetes mellitus

E10.4 Type 1 diabetes mellitus with neurological complications

E10.40 Type 1 diabetes mellitus with diabetic neuropathy, unspecified

E10.41 Type 1 diabetes mellitus with diabetic mononeuropathy

E10.42 Type 1 diabetes mellitus with diabetic polyneuropathy

E10.43 Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy

E10.44 Type 1 diabetes mellitus with diabetic amyotrophy

E10.49 Type 1 diabetes mellitus with other diabetic neurological complication

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E10 Type 1 diabetes mellitus

E10.5 Type 1 diabetes mellitus with circulatory complications

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

E10.52 Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene

E10.59 Type 1 diabetes mellitus with other circulatory complications

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E10 Type 1 diabetes mellitus

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

E10.618 Type 1 diabetes mellitus with other diabetic arthropathy

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E10 Type 1 diabetes mellitus

E10.62 Type 1 diabetes mellitus with skin complications

E10.620 Type 1 diabetes mellitus with diabetic dermatitis

E10.621 Type 1 diabetes mellitus with foot ulcer

E10.622 Type 1 diabetes mellitus with other skin ulcer

E10.628 Type 1 diabetes mellitus with other skin complications with other specified complication

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E10 Type 1 diabetes mellitus

E10.63 Type 1 diabetes mellitus with oral complications

E10.630 Type 1 diabetes mellitus with periodontal disease

E10.638 Type 1 diabetes mellitus with other oral complications

E10.64 Type 1 diabetes mellitus with hypoglycemia

E10.641 …… with coma

E10.649 …… without coma

E10.65 Type 1 diabetes mellitus with hyperglycemia

E10.69 Type 1 diabetes mellitus with other specified complication

E10 Type 1 diabetes mellitus

E10.8 Type 1 diabetes mellitus with unspecified complications

E10.9 Type 1 diabetes mellitus without complications

E11 Type 2 diabetes mellitus

Use Additional:
- **code to identify any insulin use (Z79.4)**

Excludes1:
- diabetes mellitus due to underlying condition (E08.-)
- drug or chemical induced diabetes mellitus (E09.-)
- gestational diabetes (O24.4-)
- neonatal diabetes mellitus (P70.2)
- postpancreatectomy diabetes mellitus (E13.-)
- postprocedural diabetes mellitus (E13.-)
- secondary diabetes mellitus NEC (E13.-)
- type 1 diabetes mellitus (E10.-)

Includes:
- diabetes (mellitus) due to insulin secretory defect
- diabetes NOS
- insulin resistant diabetes (mellitus)

E11 Type 2 diabetes mellitus

E11.0 Type 2 diabetes mellitus with hyperosmolarity

E11.00 …… without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)

E11.01 …… with coma

E11.2 Type 2 diabetes mellitus with kidney complications

E11.21 Type 2 diabetes mellitus with diabetic nephropathy

E11.22 Type 2 diabetes mellitus with diabetic chronic kidney disease

E11.29 Type 2 diabetes mellitus with other diabetic kidney complication

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E11 Type 2 diabetes mellitus

E11.3 Type 2 diabetes mellitus with ophthalmic complications

E11.31 Type 2 diabetes mellitus with unspecified diabetic retinopathy

E11.311 …… with macular edema

E11.319 …… without macular edema

E11.32 Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy

E11.321 …… with macular edema

E11.329 …… without macular edema

E11 Type 2 diabetes mellitus

E11.33 Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy

E11.331 …… with macular edema

E11.339 …… without macular edema

E11.34 Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy

E11.341 …… with macular edema

E11.349 …… without macular edema

E11 Type 2 diabetes mellitus

E11.35 Type 2 diabetes mellitus with proliferative diabetic retinopathy

E11.351 …… with macular edema

E11.359 …… without macular edema

E11.36 Type 2 diabetes mellitus with diabetic cataract

E11.39 Type 2 diabetes mellitus with other diabetic ophthalmic complication

E11 Type 2 diabetes mellitus

E11.4 Type 2 diabetes mellitus with neurological complications

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 Type 2 diabetes mellitus

E11.5 Type 2 diabetes mellitus with circulatory complications

E11.51 Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene

E11.52 Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene

E11.59 Type 2 diabetes mellitus with other circulatory complications

---

E11 Type 2 diabetes mellitus

E11.6 Type 2 diabetes mellitus with other specified complications

E11.61 Type 2 diabetes mellitus with diabetic arthropathy

E11.610 Type 2 diabetes mellitus with diabetic neuropathic arthropathy

E11.618 Type 2 diabetes mellitus with other diabetic arthropathy

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E11 Type 2 diabetes mellitus

E11.62 Type 2 diabetes mellitus with skin complications

E11.620 Type 2 diabetes mellitus with diabetic dermatitis

E11.621 Type 2 diabetes mellitus with foot ulcer

E11.622 Type 2 diabetes mellitus with other skin ulcer

E11.628 Type 2 diabetes mellitus with other skin complications

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E11 Type 2 diabetes mellitus

E11.63 Type 2 diabetes mellitus with oral complications

E11.630 Type 2 diabetes mellitus with periodontal disease

E11.638 Type 2 diabetes mellitus with other oral complications

E11.64 Type 2 diabetes mellitus with hypoglycemia

E11.641 …… with coma

E11.649 …… without coma

E11.65 Type 2 diabetes mellitus with hyperglycemia

E11.69 Type 2 diabetes mellitus with other specified complication

---

E11 Type 2 diabetes mellitus

E11.8 Type 2 diabetes mellitus with unspecified complications

E11.9 Type 2 diabetes mellitus without complications

E13 Other specified diabetes mellitus
Use Additional:
• code to identify any insulin use (Z79.4)
Excludes1:
• diabetes due to autoimmune process (E10.-)
• diabetes due to immune mediated pancreatic islet beta-cell destruction (E10.-)
• diabetes mellitus due to underlying condition (E08.-)
• drug or chemical induced diabetes mellitus (E09.-)
• gestational diabetes (O24.4-)
• neonatal diabetes mellitus (P70.2)
• type 2 diabetes mellitus (E11.-)
Includes:
• diabetes mellitus due to genetic defects of beta-cell function
• diabetes mellitus due to genetic defects in insulin action
• postpancreatectomy diabetes mellitus
• postprocedural diabetes mellitus
• secondary diabetes mellitus NEC

E15 Nondiabetic hypoglycemic coma

Includes:
• drug-induced insulin coma in nondiabetic
• hyperinsulinism with hypoglycemic coma
• hypoglycemic coma NOS

E16 Other disorders of pancreatic internal secretion

E16.0 Drug-induced hypoglycemia without coma

E16.1 Other hypoglycemia

E16.2 Hypoglycemia, unspecified

E16.3 Increased secretion of glucagon

E16.4 Increased secretion of gastrin

E16.8 Other specified disorders of pancreatic internal secretion

E16.9 Disorder of pancreatic internal secretion, unspecified

17. ICD-10 Codes for RDs and Diabetes Educators

E00-E90: Endocrine, nutritional and metabolic diseases.
For Weight Management:
E66.0 Obese due to excess calories
E66.01 Morbid (severe) obesity due to excess calories
E66.1 Drug induced obesity
E66.2 Extreme obesity with alveolar hypoventilation (Pickwickian Syndrome)
E66.3 Overweight
E66.8 Other obesity
E66.9 Obesity, unspecified - obesity NOS

17. ICD-10 Codes for RDs and Diabetes Educators

E00-E90: Endocrine, nutritional and metabolic diseases.
E03.9   Hypothyroidism, unspecified
E05.90 Thyrotoxicosis, unspecified
E16.1   Other hypoglycemia
E16.2   Hypoglycemia, unspecified
E28.2   Polycystic ovarian syndrome
E73.0   Congenital lactase deficiency
E73.1   Secondary lactase deficiency
E73.8   Other lactose intolerance
E73.9   Lactose intolerance, unspecified
E84   Cystic fibrosis

17. ICD-10 Codes for RDs and Diabetes Educators

E00-E90: Endocrine, nutritional and metabolic diseases.
For Lipid Disorders and Metabolic Syndrome:
E78.0   Pure hypercholesterolemia
E78.1   Pure hyperglyceridemia
E78.2   Mixed hyperlipidemia
E78.3   Hyperchylomicronemia
E78.4   Other hyperlipidemia
E78.5   Hyperlipidemia, unspecified
E78.8   Other disorders of lipoprotein metabolism
E78.9   Disorder of lipoprotein metabolism, unspecified
E88.81 Metabolic syndrome

17. ICD-10 Codes for RDs and Diabetes Educators

E43   Unspecified severe protein-calorie malnutrition
E44.0 Moderate protein-calorie malnutrition
E44.1 Mild protein-calorie malnutrition
E45   Retarded development following protein-calorie malnutrition
E46   Unspecified protein-calorie malnutrition
E64.0 Sequelae of protein-calorie malnutrition

17. ICD-10 Codes for RDs and Diabetes Educators

R00 - R99: Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified.

For Weight Management:
R62.51 Failure to thrive, child
R63.4 Abnormal weight loss
R63.5 Abnormal weight gain - not during pregnancy
R63.6 Underweight
R73.01 Impaired fasting glucose
R73.02 Impaired glucose tolerance test (oral)
R73.09 Other abnormal fasting glucose (pre-diabetes)

17. ICD-10 Codes for RDs and Diabetes Educators

N00 – N99: Diseases of genitourinary system.

N18.5 Chronic kidney disease, stage 5
N18.4 Chronic kidney disease, stage 4
N18.3 Chronic kidney disease, stage 3
N18.2 Chronic kidney disease, stage 2
N18.1 Chronic kidney disease, stage 1
N20.0 Calculus of kidney

17. ICD-10 Codes for RDs and Diabetes Educators

I00 – I99: Diseases of circulatory system.

I10   Essential (primary) hypertension
I11.0   Hypertensive heart disease with (congestive) heart failure
I11.9   Hypertensive heart disease without (congestive) heart failure
I12   Hypertensive chronic kidney disease
I25   Chronic ischemic heart disease
I50   Heart failure

17. ICD-10 Codes for RDs and Diabetes Educators

F01-F99: Mental and behavioral disorders.

F50.00 Anorexia nervosa, unspecified
F50.01 Anorexia nervosa, restricting type
F50.02 Anorexia nervosa, binge eating/purging type
F50.2 Bulimia nervosa
F50.8 Other eating disorder
F50.9 Eating disorder, unspecified

17. ICD-10 Codes for RDs and Diabetes Educators

K00 – K99: Diseases of digestive system.

K21.0 Gastroesophageal reflux disease with esophagitis
K21.9 Gastroesophageal reflux disease without esophagitis
K25   Gastric ulcer
K27   Peptic ulcer, site unspecified
K29.2 Alcoholic gastritis
K29.5 Unspecified chronic gastritis
K29.7 Gastritis, unspecified
K44   Diaphragmatic hernia

17. ICD-10 Codes for RDs and Diabetes Educators

K50.0 Crohn's disease of small intestine
K50.1 Crohn's disease of large intestine
K50.8 Crohn's disease of both small and large intestine
K50.9 Crohn' disease, unspecified
K51   Ulcerative colitis
K57.1 Diverticulosis of small intestine w/o perforation or abscess
K57.3 Diverticulosis of large intestine w/o perforation or abscess
K58   Irritable bowel syndrome

17. ICD-10 Codes for RDs and Diabetes Educators

K52.2 Allergic and dietetic gastroenteritis and colitis

K59   Constipation
K59.1 Functional diarrhea
K70.3 Alcoholic cirrhosis of liver
K86.0 Alcohol-induced chronic pancreatitis
K86.1 Other chronic pancreatitis
K90.0 Celiac disease

17. ICD-10 Codes for RDs and Diabetes Educators

O00 - O99: Pregnancy, childbirth and puerperium.

O21.0   Mild hyperemesis gravidarum
O21.1   Hyperemesis gravidarum with metabolic disturbance
O21.2   Late vomiting of pregnancy
O24.01 Pre-existing diabetes mellitus, type 1, in pregnancy
O24.11 Pre-existing diabetes mellitus, type 2, in pregnancy

17. ICD-10 Codes for RDs and Diabetes Educators

O24.410   Gestational diabetes mellitus, diet-controlled
O24.414   Gestational diabetes mellitus, insulin-controlled
O26.00   Excessive weight gain in pregnancy, unspecified trimester
O26.10   Low weight gain in pregnancy, unspecified trimester
O99210   Obesity complicating pregnancy, unspecified trimester

17. ICD-10 Codes for RDs and Diabetes Educators

M00 - M99: Diseases of musculoskeletal system and connective tissue.
M1A.3 Chronic gout due to renal impairment
M1A.9 Chronic gout, unspecified
M10.3 Gout due to renal impairment
M10.4 Other secondary gout
M10.9 Gout, unspecified
M81.0 Age-related osteoporosis w/o current pathological fracture
M81.8 Other osteoporosis w/o current pathological fracture

17. ICD-10 Codes for RDs and Diabetes Educators

D50-D89: Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism.

D50.8 Other iron deficiency anemias (due to inadequate iron intake)
D50.9 Iron deficiency anemia, unspecified
D51.3 Other dietary vitamin B12 deficiency anemia (vegan anemia)
D52.0 Dietary folate anemia
D53.0 Protein deficiency anemia
D53.9 Nutrition anemia, unspecified (simple chronic anemia)
D64.9 Anemia, unspecified

17. ICD-10 Codes for RDs and Diabetes Educators

G00-G99: Diseases of nervous system.

G47.30 Sleep apnea, unspecified

G47.33 Obstructive sleep apnea

17. ICD-10 Codes for RDs and Diabetes Educators

A00 - B99: Certain infectious and parasitic diseases.

B20 HIV disease