



# Focus on Diabetes

November is American Diabetes Month

## Facts about Diabetes

**Sixty percent of all diabetics have some complication of this devastating disease.**

### Diabetes with renal manifestations

Since diabetic nephropathy occurs in up to 40% of individuals with diabetes, annual screening for proteinuria in all diabetics and calculation of the Glomerular Filtration Rate (GFR) should be performed.

#### ICD-9-CM<sup>1</sup>

- **250.4x** Diabetes w/ Renal Manifestations

If Chronic Kidney Disease (CKD) use additional codes: 585.1-585.9

There is no presumed linkage between diabetes and CKD. The linkage must be stated specifically (i.e., diabetic nephropathy) or addressed as a causal relationship (i.e., chronic kidney disease due to diabetes).

### Diabetes with ophthalmic manifestations

Screening: a dilated and comprehensive eye examination by an ophthalmologist or optometrist shortly after the diagnosis of diabetes. Subsequent eye exams should be repeated annually.

#### ICD-9-CM<sup>1</sup>

- **250.5x** Diabetes w/ Ophthalmic Manifestations

Use additional code to identify the manifestation

### Diabetes with peripheral circulatory manifestations

Screening for peripheral arterial disease (PAD) is best achieved by both obtaining a history for claudication and performing an ankle-index (ABI) on all diabetic patients. Patients with ABI between 0.9 and 0.8 can be managed by the primary care physician with improved glucose control, supervised exercise regimens, and reduction of other risk factor (i.e., tobacco cessation). Specialized referrals are required for patients with ABIs >1.2 or <0.8.

#### ICD-9-CM<sup>1</sup>

- **250.7x** Diabetes w/ Peripheral Circulatory Disorders

Use additional code to identify the manifestation

### Diabetes with neurological manifestations

Screening for peripheral neuropathy: A foot examination should include inspection, assessment of foot pulses, and testing for loss of protective sensation, assessing for changes in vibratory sensation and deep tendon reflexes (ankle), and identifying foot ulcers and amputations.

Screening for autonomic neuropathy: obtain a history of gastrointestinal symptoms consistent with gastroparesis and other dysmotility problems (i.e., intermittent constipation and diarrhea).

#### ICD-9-CM<sup>1</sup>

- **250.6x** Diabetes w/ Neurological Manifestations

use additional code to identify the manifestation

#### ICD-10-CM Coding Categories for Diabetic manifestations<sup>2</sup>

- E08 Diabetes mellitus due to underlying cause\*
- E09 Drug or chemical induced diabetes mellitus\*
- E10 Type 1 diabetes mellitus
- E11 Type 2 diabetes mellitus
- E13 Other specified diabetes mellitus\*

\*types of secondary diabetes mellitus

*These are categories only. Please consult the code set for further information.*

If type of Diabetes not documented – assign Type 2

- Long-term use of insulin
  - ICD-9-CM V58.67
  - ICD-10-CM Z79.4

Combination codes include:

- Type of diabetes
- Body system affected
- Complications affecting that body system
  - NO 5th digits as in ICD-9-CM
- Note in the index for inadequately controlled, out of control, poorly controlled, coded by type with hyperglycemia

Example of combination code:

- E10.331 Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema

Code includes

- Type of diabetes
- Body system involved
- Complications of the body system

<sup>1</sup> World Health Organization, Professional: ICD-9-CM for Physicians—Volumes 1 & 2. 2013 Alexandria, VA: Optum, 2012.

<sup>2</sup> Optum 2013 ICD-10-CM The Complete Official Draft Code Set <[www.optumcoding.com/ICD10](http://www.optumcoding.com/ICD10)>