

Chronic Condition – DIABETES MELLITUS (DM)

Documentation & Coding Tips:

- Document if patient is seeing a specialist or if another provider is treating the diabetes
- Document and review all medications, especially those pertaining to diabetes
- Document and review all tests ordered and follow up with results
- Based on the "with" ICD-10-CM guidelines, DM complicated listed after the term "with" in the alphabetic index has a presumed casual relationship and does not have to be linked by the provider. If the condition is unrelated the provider should document as such that the condition is "unrelated".
 - *However, complications listed as not elsewhere classified, "NEC", does require the provider to link the diseases together in the documentation.*

- In the documentation use terms that specify:

TYPE I Diabetes Mellitus (E10.-)

- Type I, without complications (E10.9)
- Type I, Inadequately controlled, Poorly controlled, Uncontrolled (Hyperglycemia) (E10.65)
- Type I, Uncontrolled, Hypoglycemia without coma (E10.649)

TYPE II Diabetes Mellitus (E11.-)

- Type II, without complications (E11.9)
- Type II, Inadequately controlled, Poorly controlled, Uncontrolled (Hyperglycemia) (E11.65)
- Type II, Uncontrolled Hypoglycemia without coma (E11.649)

Diabetes Mellitus, due to underlying conditions (E08.-)

- Document **first** any underlying conditions, and include documentation to support the type of diabetes:
- Congenital rubella (P35.0)
 - Cushing's Syndrome (E24.-)
 - Cystic fibrosis (E84.-)
 - Malignant neoplasm (C00 - C96)
 - Malnutrition (E40 - E46)
 - Diseases of the pancreas (K85.-, K86.-)

Example: Secondary DM due to pancreatic malignancy (C25.9 + E08.9)

INSULIN USE and Other Oral Diabetic Medications

- Long term (current) use of insulin (Z79.4)
- Oral Antidiabetic Drugs (Z79.84)
- Oral Hypoglycemic Drugs (Z79.84)

Diabetic Nephropathy and Chronic Kidney Disease (CKD):

- Type I (E10.21)
- Type II (E11.21)
- Type I with CKD (E10.22)
- Type II with CKD (E11.22)
- Type I with Other Diabetic Kidney Complication (E10.29)
- Type II with Other Diabetic Kidney Complication (E11.29)

! ALSO document Stage of Chronic Kidney Disease (CKD):

- CKD, Stage 3, moderate (N18.3)
- CKD, Stage 4, severe (N18.4)
- CKD, Stage 5 (N18.5)
- End Stage Renal Disease, requiring chronic diaylsis (N18.6)
- Acute Kidney Failure (N17.9)

! IN ADDITION document...if applicable

- Dialysis status (Z99.2)

Diabetic Neurologic Complication:

If peripheral neuropathy is only documented, codes default to the polyneuropathy diagnosis.

- | | |
|--|---|
| <input type="checkbox"/> Type I DM neuropathy, unspecified(E10.40) | <input type="checkbox"/> Type II DM neuropathy, unspecified(E11.40) |
| <input type="checkbox"/> Type I DM Mononeuropathy(E10.41) | <input type="checkbox"/> Type II DM Mononeuropathy(E11.41) |
| <input type="checkbox"/> Type I DM Polyneuropathy(E10.42) | <input type="checkbox"/> Type II DM Polyneuropathy(E11.42) |
| <input type="checkbox"/> Type I Diabetic (poly)neuropathy(E10.43) | <input type="checkbox"/> Type II Diabetic (poly)neuropathy(E11.43) |
| <input type="checkbox"/> Type I DM with amyotrophy(E10.44) | <input type="checkbox"/> Type II DM with amyotrophy(E11.44) |
| <input type="checkbox"/> Type I DM with other Diabetic
Neurological Complication (E10.49) | <input type="checkbox"/> Type II DM with other Diabetic
Neurological Complication (E11.49) |

! **IN ADDITION** document the manifestation of the disease, i.e. gastroparesis

Diabetic Ophthalmic Complication:

The 6th character identifies if macular edema is present or not

.--1 = macular edema .--9 = without macular edema

The 7th character identifies the laterality of the disease

....1 = right eye2 = left eye3 = bilateral9 = unspecified eye

- | | |
|--|---|
| <input type="checkbox"/> Type I Unspecified Diabetic Retinopathy (E10.31-) | <input type="checkbox"/> Type II Unsp. Diabetic Retinopathy(E11.31-) |
| <input type="checkbox"/> Type I Mild Nonproliferative
Retinopathy (E10.32-) | <input type="checkbox"/> Type II Mild Nonproliferative
Retinopathy (E11.32-) |
| <input type="checkbox"/> Type I Moderate Nonproliferative
Retinopathy (E10.33-) | <input type="checkbox"/> Type II Moderate Nonproliferative
Retinopathy (E11.33-) |
| <input type="checkbox"/> Type I Severe Nonproliferative
Retinopathy (E10.34-) | <input type="checkbox"/> Type II Severe Nonproliferative
Retinopathy (E11.34-) |
| <input type="checkbox"/> Type I Proliferative Diabetic
Retinopathy (E10.35-) | <input type="checkbox"/> Type II Proliferative Diabetic
Retinopathy (E11.35-) |
| <input type="checkbox"/> Type I Proliferative DM Retinopathy
Stable (E10.3551-E10.3559) | <input type="checkbox"/> Type II Proliferative DM Retinopathy
Stable (E11.3551-E11.3559) |
| <input type="checkbox"/> Type I Diabetic Cataract (E10.36) | <input type="checkbox"/> Type II Diabetic Cataract (E11.36) |
| <input type="checkbox"/> Type I Other Diabetic Ophthalmic
Complication (E10.39) | <input type="checkbox"/> Type II Other Diabetic Ophthalmic
Complication (E11.39) |
| <input type="checkbox"/> Type I Diabetic Glaucoma (H40-H42 code series) | <input type="checkbox"/> Type II Diabetic Glaucoma (N/A for CMS) |

! **ALSO** document the laterality of the disease

! **IN ADDITION** document the ophthalmic condition related to the diabetes

Diabetic Skin Complication:

- | | |
|--|---|
| <input type="checkbox"/> Type I DM with Other Specified
Conditions (E10.69) | <input type="checkbox"/> Type II DM with Other Specified
Conditions (E11.69) |
| <input type="checkbox"/> Type I Diabetic Foot Ulcer (E10.621) | <input type="checkbox"/> Type II Diabetic Foot Ulcer (E11.621) |

! **IN ADDITION** document the site of the ulcer (L97.4-, L97.5-)

- | | |
|---|--|
| <input type="checkbox"/> Type I Diabetic Other Skin Ulcer (E10.622) | <input type="checkbox"/> Type II Diabetic Other Skin Ulcer (E11.622) |
|---|--|

! **IN ADDITION** document the site of the ulcer (L97.1-L97.9, L98.41-L98.49)

Diabetes Mellitus in Pregnancy, Childbirth, & Puerperium: (O24.- code series in addition to below):

- | | |
|---|--|
| <input type="checkbox"/> Type I DM (E10.1- E10.9) | <input type="checkbox"/> Type II DM (E11.1- E11.9) |
| <input type="checkbox"/> Other DM due to underlying condition (E08.0 - E08.9) | |
| <input type="checkbox"/> Drug or Chemical Induced DM (E09.0 - E09.9) | |
| <input type="checkbox"/> Other Specified DM (E13.0 - E13.9) | |

! **In ADDITION** document the trimester when the patient is pregnant

! **In ADDITION** document the manifestation, if applicable, and select the appropriate code from the following code series: **E08.-** , **E09.-** , **E10.-** , **E11.-** , **E13.-**