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 additional diagnosis code must always be added to make the coding valid for all PWDs on insulin (including pregnant PWDs).

Topic Outline
1. Overview
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3. ICD-10 Implementation Date
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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
• 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:
  - Hundreds of new dx codes submitted annually
  - 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:
  - Measuring the quality, safety, and efficacy of care
  - Designing payment systems and processing claims for reimbursement
  - Conducting research, epidemiological studies and clinical trials
  - Setting health policy
  - Operational and strategic planning and designing of healthcare delivery systems

5. Why We Are Changing to ICD-10

- Monitoring resource utilization
- Improving clinical, financial and administrative performance
- Preventing and detecting healthcare fraud and abuse
- 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:
  - Flexible enough to quickly incorporate emerging diagnoses and procedures
  - 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

- Family Code/General disease code.
- NOT BILLABLE when codes with more specificity (more characters) exist!

6. ICD-10 Structure and Terminology

7 Characters Spell:

- 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
  - 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:
  - E11.5 = T2 DM w/ circulatory complications
  - 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
  - Z71.3 = Dietary counseling and surveillance
  - Must use ADDITIONAL CODE:
    - For any associated underlying condition
    - To identify BMI, if known (Z68.3)

6. ICD-10 Structure and Terminology

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

<table>
<thead>
<tr>
<th>Chapter (Character)</th>
<th>Chapter Title and (3 Character Category = Rubric)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. (A and B)</td>
<td>Certain infectious and parasitic diseases. (A00-B99)</td>
</tr>
<tr>
<td>II. (C00 to D48)</td>
<td>Neoplasms. (C00-D48)</td>
</tr>
<tr>
<td>III. (D50 to D89)</td>
<td>Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism. (D50-D89)</td>
</tr>
<tr>
<td>IV. (E)</td>
<td>Endocrine, nutritional and metabolic diseases. (E00-E90)</td>
</tr>
<tr>
<td>V. (F)</td>
<td>Mental and behavioral disorders. (F01-F99)</td>
</tr>
</tbody>
</table>
### 6. ICD-10 Structure and Terminology

**7 characters in codes provides greatest specificity to identify:**

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

**Example:** E10 is not billable: Type 1 Diabetes Mellitus
6. ICD-10 Structure and Terminology

NON-BILLABLE:

• E10 = Type 1 diabetes mellitus
  o 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

NON-BILLABLE:

• E11 = Type 2 diabetes mellitus
  o E11.0 = Type 2 diabetes mellitus with hyperosmolarity

BILLABLE:

• E11.00 = Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic hyperosmolar coma (NKHHC)
• E11.01 = Type 2 diabetes mellitus with hyperosmolarity with coma

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

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

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 1\textsuperscript{st}, 2\textsuperscript{nd}?

- **Tabular List** contains detailed instructional notes:
  - **Code First** note
  - Used for conditions with both etiology/underlying condition and multiple body system manifestations.

### 6. ICD-10 Structure and Terminology

#### Sequencing on claim:

- Code **first** the etiology/underlying condition
- Code **second** the manifestation

  - In most cases, manifestation codes will have note “In Diseases Classified Elsewhere” (are component of etiology but in different category)
  - Always sequenced **second** on claim

#### 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.-)

#### 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)

#### Laterality:

- 7\textsuperscript{th} character can = right or left side designations:
  - Right side = 1
  - Left side = 2
  - Bilateral = 3
  - M10.011 = Idiopathic gout, right shoulder
  - M10.012 = 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

Examples of diabetes combination codes:

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

- 4th and 5th characters further define:
  - Etiology
  - Anatomic Site
  - Severity or other clinical detail

C15 = Malignant neoplasm of esophagus

C15.3 = malignant neoplasm of upper third of esophagus
C15.4 = malignant neoplasm of middle third of esophagus
C15.5 = malignant neoplasm of lower third of esophagus

6. ICD-10 Structure and Terminology

- 4th and 5th characters further define:
  - Etiology
  - Anatomic Site
  - Severity 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 = Pneumonia 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 *Methicillin susceptible staphylococcus aureus*
    - J15.212 = Pneumonia due to *Methicillin resistant staphylococcus aureus*

- **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

- **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

- **6th 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

Please tell me there are no more characters in these codes!
6. **ICD-10 Structure and Terminology**

   - **7th character and placeholder:**
     - “X” required as “dummy” placeholder for certain codes to allow for future expansion
       - X is not case sensitive
     - 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
     - Where placeholder exists, “X” must be used in order for code to be considered a valid code

   Examples of placeholder “x” codes:
   - S27.53xS = Laceration of thoracic trachea, sequela
   - T27.0xxA = Burn of larynx and trachea, initial encounter

6. **ICD-10 Structure and Terminology**

   - **✓7th 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:
     - 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!

   - **DIAGNOSIS:**
     - = 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**

   - ** ✓40  ●  E00-E07 DISORDER OF THYROID GLAND **
   - ** E08-E13 DIABETES MELLITUS **
   - ** E15-E16 OTHER DISORDERS OF GLUCOSE REGULATION AND PANCREATIC INTERNAL SECRETION **
   - ** E20-E29 DISORDER OF OTHER ENDOCRINE GLANDS **
   - ** E30-E64 OTHER NUTRITIONAL DEFICIENCIES **
   - ** E65-E68 OVERWEIGHT, OBESITY & OTHER HYPERALIMENTATION **
   - ** E70-E90 METABOLIC DISORDERS **

   Above are “3 character category codes”
Chapter IV: Endocrine, Nutritional and Metabolic Diseases (E00-E90)

- Diabetes mellitus (E10 - E14)
  - E10 = T1 DM
  - E11 = T2 DM
  - E12 = Malnutrition-related DM
  - E13 = Other specified DM
  - E14 = Unspecified DM

- Other disorders of glucose regulation and pancreatic internal secretion (E15 - E16)
  - E15 = Non-diabetic hypoglycemic coma
  - 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.

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)

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:
  - Classification of the diabetes, and
  - Manifestation
  - 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
**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:
  - Documentation of provider, and
  - Coding guidelines

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**Example: ICD-10 TABULAR Instructional Notes for Chapter: Endocrine, Nutritional and Metabolic Diseases (E00-E90)**

- **Excludes1** means "NOT CODED HERE!"
  - Means that code from this category should never be used at same time as a **Excludes1** code
  - 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!

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

- **"Excludes2"** means "NOT INCLUDED HERE"
  - ACCEPTABLE to use both the **category code** and the **"Excludes2" code** TOGETHER on claim
  - Patient **CAN** have both conditions at **SAME TIME**

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

- Diabetes Categories **E10 – E13** have many **coding notes**:
  - **"Code First"** instructional note:
    - Code for Etiology/Underlying Condition)
    - Sequenced FIRST on claim
  - **"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.

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**Type 2 diabetes mellitus**

**2016 Non-Specific Code**

- Use Additional
  - Code to identify any insulin use (279.4)

**Type 1 Excludes**
- diabetes mellitus due to underlying condition (E09. -)
- drug or chemical induced diabetes mellitus (E10. -)
- gestational diabetes (024.4 -)
- neonatal diabetes mellitus (P78.2)-
- postpancreatectomy diabetes mellitus (E13. -)
- postprocedural diabetes mellitus (E11. -)
- secondary diabetes mellitus NEC (E13. -)
- type 1 diabetes mellitus (E11. -)

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

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

- Correct sequencing of codes on claims important!

- **D**iffers, based on circumstances:
  - **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)!

- 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)!

- 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 together in one code:
  - Type of DM (e.g., T1 or T2)
  - Body system affected (e.g., kidneys)
  - 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:
  - Type or cause of diabetes:
    - Type 1
    - Type 2
    - Due to drugs or chemicals
    - Due to underlying condition
    - Other specified diabetes
  - Body system complications related to diabetes, such as kidney or neurological complications

8. ICD-10 Diabetes Codes: T1 and T2

- Specific body system complications, such as:
  - Chronic kidney disease
  - Foot ulcer
  - Hypoglycemia without coma

Example of combination code:
- T2 DM pt on insulin is seen for stage 3 CKD:
  How is this coded and sequenced on claim?
  - E11.22 = T2 DM with diabetic chronic kidney disease
  - N18.3 = Chronic kidney disease, stage 3 (moderate)
  - 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?
  - E11.621 = Type 2 diabetes mellitus with foot ulcer
  - L97.523 = Non-pressure chronic ulcer of other part of left foot with necrosis of muscle
  - 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
  - E10.341 = T1 DM with severe non-proliferative diabetic retinopathy with macular edema
  - 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

Example:
- T1 DM pt seen in ED for initial encounter to evaluate leakage of her insulin pump (reason for visit)
  - 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 REASON for the patient visit is ALWAYS the primary diagnosis!

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

- Diabetes insulin pump complications:
  - 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

- Other codes that are used in relation to DM are in other Chapters:
  - Chapters 16: Certain Conditions Originating in the Perinatal Period
  - Chapter 18: Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified
  - Chapter 21: Factors Influencing Health Status and Contact with Health Services
Baby on Board!

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 Z34.0-

NOTE: Z30 - Z39 = Persons encountering health services in circumstances related to reproduction

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

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)

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

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-O99** Other obstetric conditions, not elsewhere classified

Source: [http://www.cdc.gov/nchs/icd/icd10cm.htm](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

---

O24 = 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)
  - **O24.1** = Pre-existing DM, T2, in pregnancy
  - **O24.11** = 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

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:
  - **O24.012** = Pre-existing DM, type 1, in pregnancy, second trimester
  - plus
  - **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
  - **O24.112** = 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

---

O24.0 = 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:

- 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:
  - **O24.410** = GDM in pregnancy, diet-controlled
  - **Z3A.29** = Gestation of pregnancy, 29 weeks
9. ICD-10 Diabetes and Pregnancy Codes

- **Z79.4 = Long term (current) insulin use**
  - Code to be assigned if pt treated with insulin
  - Exception to rule is category **O24.410 GDM in pregnancy, diet-controlled**
  - 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

- **O24.4 = Gestational diabetes (sub-category)**
  - Code **NOT** used with any other code from Category **O24**: DM in Pregnancy, Childbirth and Puerperium
  - 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
     - O24.411 = GDM in pregnancy, insulin controlled
     - O24.413 = GDM in pregnancy, unspecified control
   - O24.42 = GDM in childbirth
     - O24.420 = GDM in childbirth, diet controlled
     - O24.421 = GDM in childbirth, insulin controlled
     - O24.423 = GDM in childbirth, unspecified control
   - O24.43 = GDM in the puerperium
     - O24.430 = GDM in the puerperium, diet controlled
     - O24.431 = GDM in the puerperium, insulin controlled
     - O24.433 = 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
  - Z3A is always followed by 4th and 5th characters to identify weeks of gestation

- Example: T1 DM pt is 16 weeks pregnant....coding is:
  - O24.012 = Pre-existing T1 DM in pregnancy, 2nd trimester
  - 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
  - 2 – fetus 2
  - 3 – fetus 3
  - 4 – fetus 4
  - 5 – fetus 5
  - 9 – other fetus

9. ICD-10 Diabetes and Pregnancy Codes

- Abnormal glucose tolerance in pregnancy:
  - Assigned code is from subcategory O99.81 = Abnormal glucose complicating pregnancy, childbirth, and the puerperium

9. ICD-10 Diabetes and Pregnancy Codes

- Pre-existing hypertension in pregnancy
  - 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

- Other codes that are used in relation to pregnancy and DM are in:
  - Chapters 16: Certain Conditions Originating in the Perinatal Period
  - Chapter 18: Symptoms, Signs, and Abnormal Clinical and Laboratory Findings, Not Elsewhere Classified
  - 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
- 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

200-299: 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

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>BMI Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Z68.30 BMI 30.0-30.9</td>
<td>adult</td>
<td>Z68.38 BMI 38.0-38.9</td>
</tr>
<tr>
<td>Z68.32 BMI 32.0-32.9</td>
<td>adult</td>
<td>Z68.39 BMI 39.0-39.9</td>
</tr>
<tr>
<td>Z68.33 BMI 33.0-33.9</td>
<td>adult</td>
<td>Z68.41 BMI40.0-44.9</td>
</tr>
<tr>
<td>Z68.34 BMI 34.0-34.9</td>
<td>adult</td>
<td>Z68.42 BMI 45.0-49.9</td>
</tr>
<tr>
<td>Z68.35 BMI 35.0-35.9</td>
<td>adult</td>
<td>Z68.43 BMI50.0-59.9</td>
</tr>
<tr>
<td>Z68.36 BMI 36.0-36.9</td>
<td>adult</td>
<td>Z68.44 BMI 60.0-69.9</td>
</tr>
<tr>
<td>Z68.37 BMI 37.0-37.9</td>
<td>adult</td>
<td>Z68.45 BMI &gt; 70.0</td>
</tr>
</tbody>
</table>

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

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

Date of service determines ICD-10 use

- 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
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


Several “combination codes” exist

- Multiple diagnosis codes not to be used when combination code clearly identifies all of elements in provider’s documentation
- Examples:
  - 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

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

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:
      - Use additional code for any associated underlying medical condition
      - Use additional code to identify BMI, if known (Z68.4)
        - 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

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

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

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)
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

---

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

Insert URL into browser...not search bar:

- **ICD-10 CM Tabular Lists of Diseases and Injuries:**

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

- **ICD-10 look up on CMS site:**

- **ICD-10 CM INDEX TO DISEASES and INJURIES**

---

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

- 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

---

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

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

---

**Design referral form and super-bill for RD-related benefits with appropriate 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

- **Code Also** can be instructional note in Tabular Index
  - 2 codes may be required to fully describe condition
  - Sequencing of 2 codes is discretionary
- **Additional Code**: required for specific diagnoses
  - 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)
  - Use when provider has not given enough info in documentation to select dx code

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

Check billing software and clearinghouse contracts

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

**Entering 3 character** “family/general” Main Category ICD-10 code on claim will likely cause claim to be rejected for payment
- Examples:
  - E10 = T1 diabetes mellitus
  - E11 = T2 diabetes mellitus

Entering 3 character code will cause claim rejections

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
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

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7. W55.41XA: Bitten by pig, initial encounter

Share these silly ICD-10 codes
8. W61.62XD: Struck by duck, subsequent encounter
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

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
- CMS Website on ICD 10:
  - https://www.cms.gov/ICD10/01_Overview.asp#TopOfPage
  - www.CMS.gov/ICD10
- https://implementicd10.nobilis.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:
  - For Automatic Conversion of ICD-9 Codes to ICD-10 Codes:

15. References

### 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
- E10.3 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
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<tr>
<th>E10 Type 1 diabetes mellitus</th>
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<tr>
<td>E10.33 Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy</td>
<td>E10.4 Type 1 diabetes mellitus with neurological complications</td>
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<tr>
<td>E10.331 ..... with macular edema</td>
<td>E10.40 Type 1 diabetes mellitus with diabetic neuropathy, unspecified</td>
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<tr>
<td>E10.339 ..... without macular edema</td>
<td>E10.41 Type 1 diabetes mellitus with diabetic mononeuropathy</td>
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<td>E10.36 Type 1 diabetes mellitus with diabetic cataract</td>
<td>E10.42 Type 1 diabetes mellitus with diabetic polyneuropathy</td>
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<td>E10.39 Type 1 diabetes mellitus with other diabetic ophthalmic complication</td>
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<tr>
<td>E10.5 Type 1 diabetes mellitus with circulatory complications</td>
<td>E10.6 Type 1 diabetes mellitus with other specified complications</td>
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<tr>
<td>E10.51 Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene</td>
<td>E10.61 Type 1 diabetes mellitus with diabetic arthropathy</td>
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<tr>
<td>E10.52 Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene</td>
<td>E10.610 Type 1 diabetes mellitus with diabetic neuropathic arthropathy</td>
</tr>
<tr>
<td>E10.59 Type 1 diabetes mellitus with other circulatory complications</td>
<td>E10.618 Type 1 diabetes mellitus with other diabetic arthropathy</td>
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<tr>
<td>E10.6 Type 1 diabetes mellitus with other specified complications</td>
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<tr>
<td>E10.61 Type 1 diabetes mellitus with diabetic arthropathy</td>
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<tr>
<td>E10.610 Type 1 diabetes mellitus with diabetic neuropathic arthropathy</td>
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<tr>
<td>E10.62 Type 1 diabetes mellitus with skin complications</td>
<td>E10.63 Type 1 diabetes mellitus with oral complications</td>
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<tr>
<td>E10.620 Type 1 diabetes mellitus with diabetic dermatitis</td>
<td>E10.630 Type 1 diabetes mellitus with periodontal disease</td>
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<tr>
<td>E10.621 Type 1 diabetes mellitus with foot ulcer</td>
<td>E10.638 Type 1 diabetes mellitus with other oral complications</td>
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<tr>
<td>E10.622 Type 1 diabetes mellitus with other skin ulcer</td>
<td>E10.64 Type 1 diabetes mellitus with hypoglycemia</td>
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<tr>
<td>E10.628 Type 1 diabetes mellitus with other skin complications with other specified complication</td>
<td>E10.641 ..... with coma</td>
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<tr>
<td>E10.628 Type 1 diabetes mellitus with other skin complications with other specified complication</td>
<td>E10.649 ..... without coma</td>
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<tr>
<td>E10.64 Type 1 diabetes mellitus with hypoglycemia</td>
<td>E10.65 Type 1 diabetes mellitus with hyperglycemia</td>
</tr>
<tr>
<td>E10.641 ..... with coma</td>
<td>E10.69 Type 1 diabetes mellitus with other specified complication</td>
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<td>E10.649 ..... without coma</td>
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<tr>
<td>E10.65 Type 1 diabetes mellitus with hyperglycemia</td>
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</tbody>
</table>
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

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
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  - 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
  - E11.35 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
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- E11.5 Type 2 diabetes mellitus with circulatory complications
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    - E11.628 Type 2 diabetes mellitus with other skin complications

- E11.8 Type 2 diabetes mellitus with unspecified complications
  - E11.81 Type 2 diabetes mellitus with unspecified complication

- E11.9 Type 2 diabetes mellitus without complications

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
**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

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**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

**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

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

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

**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's 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  

**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

**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

**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

A00 - B99: Certain infectious and parasitic diseases.
B20 HIV disease

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