

Risk Coding Tips and Tools Diabetes and Vascular Disease

Diabetes affects the lining around cells in the blood vessels, causing them to weaken and narrow. Coding diabetes and vascular disease together requires a combination code to capture the diabetic complication and a second code to specify the type of vascular disease.

What is important to document?



- Type of diabetes (type I, type II, other)
- Type of vascular disease (examples: peripheral vascular disease, venous insufficiency)
- The **link** between the two conditions (see physician documentation examples)

Support the documentation with DSP: Diagnosis, Status or Symptoms, Plan

- Diagnoses: Both the diabetes type and vascular disease type need to be documented with linking verbiage
- Status/Symptoms: Examples – well controlled, worsening symptoms, A1C value is XX
- Plan: Examples – medication renewals or continuation, referrals to specialists, orders for labs or diagnostic testing, lifestyle changes, and/or recommendations

Documentation Tips

- Code titles cannot be used as supporting documentation
- Code titles that contain “other” or “other specified” must have documentation specifying and linking the complication


E11.59 - Type 2 diabetes mellitus (DM) with other circulatory complications <ul style="list-style-type: none">• Continue metformin and a low carb diet	
E11.59 - Type 2 diabetes mellitus with other circulatory complications <ul style="list-style-type: none">• Heart disease due to DM, continue metformin and a low carb diet	
I51.9 - Heart disease, unspecified	





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Physician Documentation Examples

Example 1: Specific documentation and linking of DM with complications 

HPI: Patient here for chronic condition management. She has type II DM, hypertension and vascular disease of the lower extremities caused by diabetes. Seeing endocrinologist twice yearly.

Assessment:

Diagnosis – Type II DM with peripheral vascular disease

Status – last A1C stable at 6.2, pedal pulses diminished on physical exam

Plan – continue metformin, recommend regular exercise, will consider a statin

Example 2: Specific documentation and linking of DM with complications 

HPI: Patient here for chronic condition management. He has type I DM, hyperlipidemia, cardiomyopathy due to DM, and a history of prostate cancer. Reviewing medications today.

Assessment:

Diagnosis – Cardiomyopathy complicating Type I DM

Status – DM controlled with Insulin pump, slight leg edema today, no SOB

Plan – continue carvedilol and low sodium diet, follow up with endocrinology for pump refill

Example 3: Insufficient documentation and no linking of DM complications 

HPI: UTI symptoms today. Patient has DM, HTN and venous insufficiency.

Assessment:

Diagnosis – DM with other specified circulatory complications (see documentation tips)

Orders: Urinalysis and CBC

Centers for Medicare & Medicaid Services. (2023). ICD-10-CM official guidelines for coding and reporting FY 2023. CMS.gov. <https://www.cms.gov/files/document/fy-2023-ICD-10-cm-coding-guidelines-updated-01/11/2023.pdf>

You can find this resource and others like it in the OHN Risk Coding Corner at www.OrlandoHealth.com/Network/Resources.

You can also contact us at RiskCoding@OrlandoHealth.com for additional questions or support needs.