

Diabetes Mellitus (E08-E13) ICD-10-CM

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Diabetes mellitus and ICD-10-CM

One of the major changes from ICD-9-CM to ICD-10-CM is the coding for diabetes mellitus (DM). This is due to the creation of combination codes that are greatly used in coding for diabetic conditions.

In ICD-10-CM, the combination code includes the type of DM, body system affected and the specific complication involving that body system. The creation of these expanded combination codes permit for multiple conditions to be reported with fewer codes.

Instead of classifying DM as controlled or uncontrolled, ICD-10-CM classifies inadequately controlled, out of control and poorly controlled as DM (by type) with hyperglycemia.

There are 5 categories for DM, broken down by type:

- 1. DM due to underlying condition (E08): Code first the underlying condition.
 - Example: DM, due to Cushing's syndrome, with diabetic nephropathy.

ICD-10-CM: Cushing syndrome (E24.9) and DM due to underlying condition with diabetic nephropathy (E08.21)

2. Drug or chemical induced DM (E09):

Code first poisoning if due to drug or toxin from category T36-T65 with fifth or sixth character 1-4 or 6. Use an additional code to identify if diabetes is an adverse effect of a drug from category T36-T50 with fifth or sixth character 5. Reference the table of drugs and chemicals in the ICD-10-CM index.

Example: The physician documents active treatment for a patient with corticosteroidinduced DM, without complications. ICD-10-CM: drug or chemical induced DM w/out complications (E09.9) and adverse effect of glucocorticoids and synthetic analogues, initial encounter (T38.0X5A)

3. Type I DM (E10):

 Example: A patient with type 1 diabetes has developed moderate nonproliferative diabetic retinopathy of the left eye.
 ICD-10-CM: Type 1 DM with moderate nonproliferative diabetic retinopathy without macular edema, left eye (E10.3392)

4. Type 2 DM (E11):

Example: Patient with diabetes and ESRD on dialysis.

ICD-10-CM: Type II DM with diabetic CKD (E11.22), ESRD (N18.6) and dialysis status (Z99.2)

 Other specified DM (E13): includes DM due to genetic defects, post-pancreatectomy, post-procedural and secondary DM (not elsewhere classified)

Note: Codes from categories E10-E13 DM are sequenced first, followed by codes for any additional complications outside of these categories, if applicable.

Some ICD-10-CM characteristics

- Diabetes codes begin with an E (for endocrine). Alpha characters are not case-sensitive.
- Diabetes codes in ICD-10-CM can have up to seven characters. The first three characters represent the category. The fourth character identifies the presence of manifestations or complications. The fifth and sixth characters identify specific types of manifestation. The seventh indicates laterality when applicable.
- If the type is unclear or not documented, type DM 2 (category E11) would be used as default.
- For categories E08-E09 and E11-E13, include instructional notes to use an additional code to identify control such as insulin (Z79.4) or oral anti-diabetic/hypoglycemic drugs (Z79.84).
- Long-term current use of insulin (Z79.4) identifies the use of insulin for diabetic management routinely used. Code Z79.4 should not be assigned if insulin is given temporarily to bring a type 2 diabetic patient's blood sugar under control during an encounter. Additionally, assigning Z79.4 with category E10 codes is unnecessary. For patients with type 1 diabetes, the use of insulin is required; therefore, reporting Z79.4 is redundant.
- New diabetic complications include diabetes w/skin complications, oral complications and arthropathy. Ophthalmic conditions are expanded as well.
- In ICD-10-CM, the classification assumes a causal relationship between diabetes and certain diseases of the kidneys, nerves and circulatory system. Although documentation is not required to link diabetes and certain conditions, it is always recommended to document to the highest degree of specificity. This includes identifying any causal relationship between two conditions, when appropriate, with linking verbiage such as "due to..."
- If the type of diabetes is not identified when diabetic ketoacidosis is documented, query the provider for the type.

ICD-10-CM provides coders with a much greater range of DM codes to choose from in categories E08-E13. As a result, providers must document additional detail to describe complications resulting from diabetes.

Comparison A 50 years old female with DM I and HTN was recently diagnosed with diabetic nephropathy.			
ICD–9-CM	ICD-10-CM		
 250.41: DMI with renal manifestations, not stated as uncontrolled 583.81: nephritis and nephropathy, not specified as acute or chronic, in diseases classified elsewhere 	E10.21: DMI with diabetic nephropathy		
401.9: HTN, unspecified	I10: essential (primary) HTN		

Coding references by system

Renal		DM I (E10)	DM II (E11)
DM	w/o coma	E10.10	E11.10
w/ketoacidosis	w/coma	E10.11	E11.11
DM w/hyperosmolarity	w/o nonketotic hyperglycemic- hyperosmolar coma		E11.00
	w/coma		E11.01
	DM w/ diabetic nephropathy	E10.21	E11.21
DM w/kidney complications	DM w/CKD* * Use additional code to identify stage of CKD	E10.22 and E11.22 Stages: • N18.1: CKD I • N18.2: CKD II • N18.3: CKD III • N18.4: CKD IV • N18.5: CKD V • N18.6: ERSD • N18.9: CKD, unsp.	
	DM w/other diabetic complications	E10.29	E11.29

Ophthalmic		DM I (E10)	DM II (E11)
DM w/ophthalmic complications	DM w/unsp. diabetic retinopathy	E10.31-	E11.31-
	DM w/mild nonproliferative diabetic retinopathy	E10.32-	E11.32-

Ophthalmic		DM I (E10)	DM II (E11)
DM w/ophthalmic	DM w/unsp. diabetic retinopathy	E10.31-	E11.31-
	DM w/mild nonproliferative diabetic retinopathy	E10.32-	E11.32-
	DM w/ moderate nonproliferative diabetic retinopathy	E10.33-	E11.33-
	DM w/severe nonproliferative diabetic retinopathy	E10.34-	E11.34-
	DM w/proliferative diabetic retinopathy	E10.35-	E11.35-
complications (cont.)	DM w/diabetic cataract	E10.36	E11.36
	DM w/diabetic macular edema, resolved following treatment	E10.37-	E11.37-
	DM w/other diabetic ophthalmic complication*	E10.39	E11.39
	* Use additional code to identify manifestation		
	A dash (-) at the end of a code indicates that additional character(s) are required for valid code assignment.		

Circulatory		DM I (E10)	DM II (E11)
DM w/circulatory complications	DM w/diabetic periperal angiopathy w/o gangrene	E10.51	E11.51
	DM w/diabetic peripheral angiopathy w/gangrene	E10.52	E11.52
	DM w/other circulatory complication	E10.59	E11.59

Neurological		DM I (E10)	DM II (E11)
DM w/neurological complications	DM w/diabetic neuropathy, unsp	E10.40	E11.40
	DM w/diabetic mononeuropathy	E10.41	E11.41
	DM w/diabetic polyneuropathy	E10.42	E11.42
	DM w/diabetic autonomic (poly)neuropathy	E10.43	E11.43
	DM w/diabetic amyotrophy	E10.44	E11.44
	DM w/other diabetic neurological complication	E10.49	E11.49

DM w/other specified complications	DM I (E10)	DM II (E11)
DM w/diabetic arthropathy	E10.61-	E11.61-
w/diabetic neuropathic arthropathy	E10.610	E11.610
w/other diabetic arthropathy	E10.618	E11.618
DM w/skin complications	E10.62-	E11.62-
w/diabetic dermatitis	E10.620	E11.620
	E10.621	E11.621
w/foot ulcer	And site L97.4-, L97.5-	
	E10.622	E11.622
w/other skin ulcer	And site L97.1- L97.9, L98.41-L98.49	
DM w/other skin complications	E10.628	E11.628
DM w/oral complications	E10.63-	E11.63-
w/eriodontal disease	E10.630	E11.630
w/other oral complications	E10.638	E11.638
DM w/hypoglycemia	E10.64-	E11.64-
w/coma	E10.641	E11.641
w/o coma	E10.649	E11.649
DM w/hyperglycemia	E10.65	E11.65
	E10.69	E11.69
DM w/other specified complications	And code for complication	
DM w/unspecified complications	E10.8	E11.8
DM w/o complication	E10.9	E11.9

Other		Category
DM due to an underlying condition	Code first the underlying condition.	E08
Drug or chemical induced DM	Code first poisoning due to drug or toxin or use an additional code for adverse effect to identify drug (when applicable).	E09
Other specified DM		E13

ICD-10-CM coding examples for diabetes

Patient has severe non-proliferative diabetic retinopathy with macular edema of both eyes due to insulin-dependent type 2 DM.

ICD-10-CM: type 2 DM with severe non-proliferative diabetic retinopathy with macular edema, bilateral (E11.3413) and long-term use of insulin (Z79.4)

Rationale: Combination DM code. No other code is needed.

Patient has type 1 DM with moderate non-proliferative diabetic retinopathy with macular edema.

ICD-10-CM: E10.3319

Rationale: Code includes the type of DM, body system involved and complications of the body system (including the specific eye involved). No additional code is necessary.

Patient has type 2 DM with diabetes-related CKD stage 3.

ICD-10-CM: type 2 DM with diabetic CKD (E11.22) and CKD, stage 3 (N18.3)

Rationale: A note under the code for type 2 DM with diabetic CKD instructs to use an additional code to identify the stage of CKD (N18.1–N18.6).

A type 2 DM patient is evaluated for a chronic diabetic right foot ulcer with necrosis of muscle; patient takes insulin daily.

ICD-10-CM: type 2 DM with foot ulcer (E11.621), non-pressure chronic ulcer of other part of right foot with necrosis of muscle (L97.513) and longterm use of insulin (Z79.4)

Rationale: Code E11.621 states to use an additional code to identify site of ulcer (L97.4-L97.5-)

Diabetes due to idiopathic acute pancreatitis; diabetic hyperglycemia started on insulin to control blood sugar.

ICD-10-CM: Code first underlying condition, idiopathic acute pancreatitis (K85.0). Code DM due to underlying condition with hyperglycemia (E08.65) as secondary.

Rationale: Long-term (current) use of insulin (Z79.4) should not be coded if insulin is given temporarily to bring the patient's blood sugar under control during an encounter.

Patient with type 2 DM is diagnosed with retinopathy, including bilateral macular edema. Patient's diabetes is not controlled.

ICD-10-CM: type 2 diabetic retinopathy with macular edema (E11.311) and diabetes with hyperglycemia (E11.65)

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