Medicare Risk Adjustment Coding Focus

Diabetes mellitus with ophthalmic complications

Diabetes mellitus is a chronic disease that occurs when the body cannot maintain normal blood sugar. High levels of blood sugar can cause various complications, such as ophthalmic conditions. Ophthalmic complications can affect diabetic patients of any age. According to the National Institutes of Health (NIH), an estimated 285 million diabetics worldwide have signs of diabetic retinopathy, which is the leading cause of vision loss globally.¹

**Cause**
Diabetic retinopathy occurs when high blood sugar levels damage the tiny blood vessels in the retina. This damage can result in fluid leakage, hemorrhage of the retina, or an advanced stage of abnormal blood vessel proliferation. There are four stages of this progressive disease, which include mild nonproliferative diabetic retinopathy (NPDR), moderate NPDR, severe NPDR, and proliferative diabetic retinopathy (PDR).¹

Additionally, diabetic retinopathy can lead to diabetic macular edema (DME) which is a build-up of fluid in the macula. Diabetes may also cause other ophthalmic complications such as glaucoma and cataracts.

**Signs and symptoms**
Diabetic retinopathy is a chronic condition of the eye that has no evident symptoms at its earliest stage. As the disease progresses, visual symptoms may occur, usually affecting both eyes, some of which include:²
- Decreased visual acuity
- Blurry vision
- Holes or black spots in visual field
- Blindness

**Risk factors**
There are several risk factors correlated with the development of diabetic ophthalmic complications such as poorly controlled blood sugar levels, high blood pressure, ethnicity, pregnancy, elevated blood lipid levels, and duration of diabetes. The longer a person has diabetes, the higher their risk of developing diabetic complications.

**Treatment**
Early detection of retinopathy in diabetic patients helps reduce the potential for worsening effects of the disease and therefore, routine screenings are key. Treatment is geared towards the underlying cause, i.e. control of blood sugar and blood pressure, and, depending on the disease phase, may include injection therapy or laser surgery.³

**Coding guidance**
Diabetic ophthalmic complications are highly detailed codes. These codes include specific information regarding the type of ophthalmic complication, such as its severity, the presence of macular edema, whether it’s nonproliferative or proliferative and laterality information. The medical record must include this same level of detail in order to code to the highest degree of specificity.⁴

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**Resources**

Reference the ICD-10-CM Codebook, CMS-HCC Risk Adjustment Model(s) and AHA Coding Clinic for complete code sets and official coding guidance.

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