THREE-PART WEBINAR SERIES

PDPM coding:
Avoid these common traps

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Common Trap #1: Fractures

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Fractures—Basic Concepts

- Fractures are coded with 7th characters of A, D and various other 7th characters.
- The fracture is still coded (not aftercare) when surgeries are performed to repair the fracture, i.e. ORIF and joint replacement.

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Fractures

- Classifications of fractures:
  - Open or closed
    - Default is closed
    - Gustilo grade, if open
  - Displaced or non-displaced
    - Default is displaced
- Traumatic or pathological
  - Traumatic: bone breaks due to fall or injury
  - Pathological: bone breaks due to a disease of the bone, a tumor or infection

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7th Character Convention

- 7th characters are not used in all ICD-10-CM chapters – Used in Musculoskeletal, Obstetrics, Injuries, External Causes chapters
  - Eyes for laterality, Gout for tophi and Coma
- Different meaning depending on section where it is being used (Go up to the box)
- Must always be used in the 7th character position
- When 7th character applies, codes missing 7th character are invalid

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Application of 7th Characters in Chapter 19

- Most, BUT NOT ALL, categories in chapter 19 have a 7th character requirement for each applicable code.

- A = Initial encounter
- D = Subsequent encounter
- S = Sequela

A for Awful or Active

D is the Default

S is for Sometimes
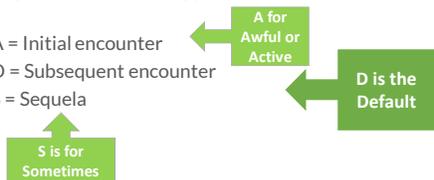
- More choices for 7th characters for fractures

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Chapter 19 Guideline A vs D

- While the patient may be seen by a new or different provider over the course of treatment for an injury, assignment of the 7th character is based on whether the patient is undergoing active treatment and not whether the provider is seeing the patient for the first time.
- Whether or not the patient is still receiving active treatment is key
- A = Initial encounter

Disregard "initial"

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Chapter 19 Guideline A vs D

• For complication codes, active treatment refers to treatment for the condition described by the code, even though it may be related to an earlier precipitating problem. For example, code T84.50XA, Infection and inflammatory reaction due to unspecified internal joint prosthesis, initial encounter, is *used when active treatment is provided for the infection, even though the condition relates to the prosthetic device, implant or graft that was placed at a previous encounter.*

• 7th character "A", initial encounter is used for each encounter where the patient is receiving active treatment for the condition.

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7th Character A

• This wording and these examples are no longer in the guidelines.

• ~~7th character "A," initial encounter is used while the patient is receiving active treatment for the condition. Examples of active treatment are: surgical treatment, emergency department encounter, and evaluation and continuing treatment by the same or a different physician.~~

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A vs D

• 7th character "A," initial encounter is used for each encounter where the patient is receiving active treatment for the condition.

• A as the 7th character will rarely be used outside the acute setting.

Examples of "initial" encounter (examples of active treatment)

• Antibiotic therapy for postoperative infection

• Wound vac treatment of wound dehiscence
   • Side note: NO Z code for wound vac!!!

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A vs D

- 7th character "D" subsequent encounter is used for encounters after the patient has completed active treatment of the condition and is receiving routine care for the condition during the healing or recovery phase.
- The aftercare Z codes should not be used for aftercare for conditions such as injuries or poisonings, where 7th characters are provided to identify subsequent care.
  - For example, for aftercare of an injury, assign the acute injury code with the 7th character "D" (subsequent encounter).

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7th Character D Examples

- Rehabilitative therapy encounters (e.g., physical therapy, occupational therapy)
- Suture removal
- Follow-up visits to assess healing status (regardless of whether the follow-up is with the same or a different provider)
- Routine dressing changes and other aftercare

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Fracture Guidelines

Trauma	Pathologic
• S Codes	• M codes
• A code from M80, not a trauma fracture code, should be used for any patient with known osteoporosis who suffers a fracture, even if the patient had a minor fall or trauma if that fall or trauma would not usually break a normal, healthy bone.	• Category M80, Osteoporosis with current pathological fracture, is for patients who have a current pathologic fracture at the time of an encounter. The codes under M80 identify the site of the fracture. *A code from category M80, not a traumatic fracture code, should be used for any patient with known osteoporosis who suffers a fracture, even if the patient had a minor fall or trauma, if that fall or trauma would not usually break a normal, healthy bone.*
• 7th characters include open fracture choices (except greenstick and torus)	• 7th characters do not include open fracture choices

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Osteoporosis without pathological fracture

Category M81, Osteoporosis without current pathological fracture, is for use for patients with osteoporosis who do not currently have a pathologic fracture due to the osteoporosis, even if they have had a fracture in the past. For patients with a history of osteoporosis fractures, status code Z87.310, Personal history of (healed) osteoporosis fracture, should follow the code from M81.

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7th Character Open Fractures

Look at 7th character for S72

- Type I
- Type II
- Type IIIA
- Type IIIB
- Type IIIC
- Appropriate to assign the 7th character for open fracture Type I or II (7th characters E, H, M or Q) as a default when a patient presents for a subsequent visit and the original Gustilo-Anderson classification is not known. (1st Q 2016)
  - Now part of the coding guidelines

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Gustilo Grade	Definition
I	Open fracture, clean wound, wound <1 cm in length
II	Open fracture, wound > 1 cm in length without extensive soft-tissue damage, flaps, avulsions
III	Open fracture with extensive soft-tissue laceration, damage, or loss or an open segmental fracture. This type also includes open fractures caused by farm injuries, fractures requiring vascular repair, or fractures that have been open for 8 hr prior to treatment
IIIA	Type III fracture with adequate periosteal coverage of the fracture bone despite the extensive soft-tissue laceration or damage
IIIB	Type III fracture with extensive soft-tissue loss and periosteal stripping and bone damage. Usually associated with massive contamination. Will often need further soft-tissue coverage procedure (i.e. free or rotational flap)
IIIC	Type III fracture associated with an arterial injury requiring repair, irrespective of degree of soft-tissue injury.

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Traumatic Hip Fracture Example

Patient admitted for care of traumatic right hip (neck of femur) fracture after falling out of wheelchair

- S72.001D Subsequent encounter for closed fracture of unspecified part of neck of right femur with routine healing
- W05.0xxD Fall from wheelchair (optional)
     - Can be coded based on documentation other than the physician's
- Note: A fracture not indicated as opened or closed should be coded to closed
- Note: A fracture not indicated as displaced or non-displaced is coded to displaced

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Scenario

- Patient was pulled down by her large dog while walking and has an open oblique fracture of the shaft of the right radius. ORIF and admitted to LTC for therapy and wound care.
- S52.331E Displaced oblique fracture of shaft of right radius, subsequent encounter for open fracture, type I or type II with routine healing

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Ms. Yappie

Ms. Yappie tripped over a crack in the sidewalk when walking her Pomeranian and has a fracture of the left patella and left elbow (olecranon process). She has an ORIF of both and is admitted to LTC for therapy and wound care. The therapist documents abnormality of gait and decreased range of motion in the elbow. Other diagnoses include osteoporosis.

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Ms. Yappie

- M80.062D Age-related osteoporosis with current pathological fracture, left lower leg, subsequent encounter
- M80.032D Age-related osteoporosis with current pathological fracture, left forearm, subsequent encounter

- Symptoms routinely associated with the definitive diagnosis are not coded separately.
- Fall from standing height or less

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Change Ms. Yappie to Mr. Yuppie

- Mr. Yuppie was walking his Mastiff when the dog saw a cat sitting on a fence and took off, pulling Mr. Yuppie off of his feet and slamming him on the sidewalk. He has fractures of the left patella (comminuted) and left elbow (olecranon process). He has an ORIF of both and is admitted to LTC for therapy and wound care. The therapist documents abnormality of gait and decreased range of motion in the elbow. Other diagnoses include osteoporosis.

- These are not osteoporosis fractures, although osteoporosis will impact healing and rehab.
- S82.042D Displaced comminuted fracture of left patella, subsequent, routine healing
- S52.022D Displaced fracture of olecranon process without intraarticular extension of left ulna, subsequent, routine healing
- M81.0 Age related osteoporosis without current pathological fracture

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Complications

- Care for complications of surgical treatment for fracture repairs during the healing or recovery phase should be coded with the appropriate complication codes.
- Meaning…continue to code the complication code with a D during the healing or recovery phase.
- Stop coding it only when it is healed.

Example: ORIF for fracture and surgical site is infected.

- T81.49xA Post operative infection, initial encounter
- S52.331E Displaced oblique fracture of shaft of right radius, subsequent encounter for open fracture, type I or type II with routine healing

- No longer infected…T81.49xD

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Fracture

- Mrs. Kuhlmann is a cool Mimi and broke her right humerus at mid shaft (comminuted) in a go cart accident when riding with her grandson who was demonstrating how he could 'drift' when it turned over. She has an ORIF.

- S42.351D Displaced comminuted fracture of shaft of humerus, right arm, subsequent encounter for routine healing
- V86.69xD Passenger of other special all-terrain or other off road motor vehicle injured in nontraffic accident

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Complication of Internal Fixation Device

- Same patient…She has an ORIF and the fixation device has come loose resulting in a nonunion of the fracture. Stabilization until surgical intervention to replace fixation device can be scheduled.
- Should you code the nonunion or the complication first??

- Use additional code to identify the specified condition resulting from the complication.

- *Loosening of internal fixation devices cannot be assumed a complication. A little loosening is expected, especially in those that are expected to come out.*

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Complication of Internal Fixation Device

- T84.120*A* Displacement of internal fixation device of right humerus
- S42.351K Displaced comminuted fracture of shaft of humerus, right arm, nonunion
- V86.69xA Passenger of other special all-terrain or other off road motor vehicle injured in nontraffic accident

Now, it's been fixed…providing surgical aftercare in addition to the care for the fracture

- T84.120D Displacement of internal fixation device of right humerus, subsequent
- S42.351D Displaced comminuted fracture of shaft of humerus, right arm, subsequent

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Fracture of the Hip

- Patient fell off the bed when his foot got caught in the covers and he has a fracture of the right greater trochanter.

- S72.111D Fracture of greater trochanter of right femur, subsequent encounter for closed fracture with routine healing
- W06.xxxD Fall from bed, subsequent encounter

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Fracture of the Hip

- The patient with the broken hip refused a joint replacement. His fracture has healed but his right leg is significantly shorter than his left. Admitted for rehab

- M21.751 Unequal limb length (acquired), right femur
- S72.111S Fracture of greater trochanter of right femur, sequela
- W06.xxxS Fall from bed, sequela

Sequela: A residual condition after the original injury healed.

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Joint Replacements for Fractures

- A total hip replacement was done to treat a traumatic fracture of the hip. The fracture is now in the healing and recovery phase after surgical treatment. Assign code S72.141D, Displaced intertrochanteric fracture of right femur, subsequent encounter for closed fracture with routine healing, as principal diagnosis. Assign also code Z96.641, Presence of right artificial hip joint.

- Code the fracture itself with 7th character D to indicate healing/resolving and the status code for the presence of the prosthesis

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Joint Replacements for Fractures

The intent of ICD-10-CM's seventh character for fracture and other injuries is to track treatment through the various stages, as well as to track resource utilization and outcomes. There are clinical differences in joint replacement surgery performed because of a traumatic fracture versus elective joint replacement surgery. For example, an injury resulting in unexpected surgery might require more intensive rehabilitation than a hip replacement due to degenerative osteoarthritis of the hip.

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Joint Replacements or Any Kind of Surgery for Repair of Fractures

• This rule applies for traumatic and pathologic fractures.

• Z47 Orthopedic aftercare

    Excludes 1 aftercare for healing fracture—code to fracture with 7th character D

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Complication of Joint Prosthesis

• The patient's new right hip prosthesis is infected with Staph aureus. IV antibiotics continue.

• Complication, joint prosthesis, infection, hip

• T84.51xA Infection and inflammatory reaction due to internal right hip prosthesis
• B95.61 Staph aureus

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What about Z47.3?

• Z47.3- aftercare following explantation of joint prosthesis

Aftercare following explantation of joint replacement, *staged procedure*

Encounter for joint prosthesis *insertion following prior explantation* of joint prosthesis

• If the damaged prosthesis is taken out and replaced in the same procedure, the Z47.3- codes are not appropriate. Continue to code the complication with a D.
• If the infected prosthesis is taken out, the patient is treated with antibiotics and the infection is completely resolved, then the patient gets a new prosthesis, the appropriate code is aftercare Z47.3-.

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Mr. Perk

Mr. Perk is a 79-year-old male who was born with congenital dysplasia of the hips. He has had several hip replacements over the years. He underwent his 6th on his right hip 6 weeks ago. He began experiencing increased pain followed by edema and redness at the site. The joint prosthesis was removed and replaced with an antibiotic spacer. The wound was left open to drain and exudate grew MRSA. He will be receiving IV antibiotics. He is scheduled for surgery for a new prosthesis in 2-4 weeks. Otherwise he is in good health.

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Answers for Your Admission

• T84.51xA Infection and inflammatory reaction due to internal right hip prosthesis
• Q65.89 Congenital dysplasia of hips (or history)
• Z89.621 Acquired absence of right hip joint
• Z96.642 Presence of artificial hip joint, left
• Z45.2 Fitting and adjustment of infusion catheter (???)

• Patient returns home (infection resolved) prior to next surgery T84.51xD

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Resumption of Care after Surgery

- Mr. Perk's surgery went well. The physician removed the spacer and used cadaver bone graft to build up the femur because it wasn't long enough. He's being readmitted with a new hip prosthesis on the right.

- Z47.32 Aftercare following explantation of hip joint prosthesis

- Staged procedures only

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M97 Periprosthetic Fractures

Excludes2: fracture of bone following insertion of orthopedic implant, joint prosthesis or bone plate (M96.6-)

breakage (fracture) of prosthetic joint (T84.01-)

7th characters for: A initial encounter; D subsequent encounter; S sequela

  M97.01 Periprosthetic fracture around internal prosthetic right hip joint

  M97.02 Periprosthetic fracture around internal prosthetic left hip joint

  M97.11 Periprosthetic fracture around internal prosthetic right knee joint

  M97.12 Periprosthetic fracture around internal prosthetic left knee joint

Also code the type of fracture.

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Fracture with Spinal Cord Injury

- Patient had an unstable burst fracture of the 1st lumbar vertebra resulting in a complete lesion at L1. He is paraplegic as a result. He is being discharged to LTC for rehab.
- G82.21 Complete paraplegia
- S34.111S Complete lesion of L1 level of lumbar spinal cord
- S32.012S Unstable burst fracture of 1st lumbar vertebra

- Code first any associated spinal cord and spinal nerve injury (S34.-)
- Multiple levels of cord injury—code to highest level of each (cervical, thoracic, lumbar)

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7th Characters for Pathological Fractures

• 7th character A is for use as long as the patient is receiving active treatment for the fracture. ~~Examples of active treatment are: surgical treatment, emergency department encounter, evaluation and treatment by a new physician.~~

• 7th character, D is to be used for encounters after the patient has completed active treatment.

D is the Default

• The other 7th characters, listed under each subcategory in the Tabular List, are to be used for subsequent encounters for treatment of problems associated with the healing, such as malunions, nonunions, and sequelae.

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Fractures in the M Chapter

• Osteoporosis fractures M80.0-
• Stress fractures M84.3-
• Pathological fractures, NEC M84.4-
• Neoplastic fractures M84.5-
• Atypical femoral fracture (M84.75-)

• All have 7th characters
• Default of D (subsequent encounter for fracture with routine healing)

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Osteoporosis With Fracture Example

• Mrs. Boniva admitted for pathological fractured vertebra due to osteoporosis. Documentation indicates patient had previous healed pathological fracture of humerus due to osteoporosis

• What if the physician just says osteoporosis??

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Osteoporosis With Fracture Answer

- M80.08xD Age related osteoporosis with current pathological fracture, vertebra subsequent encounter
- Z87.310 Personal history of healed osteoporosis fracture

  Osteoporosis

- Note: Age related osteoporosis is separate category from other osteoporosis. Age related osteoporosis is the default.

- Note: Pathological fracture is separate category from osteoporosis fracture

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NO Z CODES

No Z aftercare codes for fractures	No Z47.1 for joint replacement

No Z47.89 for other surgical aftercare

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Q&A

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