

# Medicare Risk Adjustment Coding Focus

## Diabetes Mellitus with Neurological Complications



### Overview

Diabetes mellitus is a disorder that affects how the body processes and uses sugar. When diabetes is not adequately controlled, it can lead to excess sugar in the blood. Having higher than normal sugar levels can cause damage to major organs, including the heart, lungs, eyes, and kidneys. It can also damage the tiny vessels that supply blood to the nerves, resulting in diabetic neuropathy<sup>1</sup>.

According to the National Institutes of Health (NIH), diabetic neuropathy is the most common diabetic complication, occurring in approximately 50% of all diabetics over the course of their lifetime<sup>2</sup>.

### Types and Symptoms

There are four main types of diabetic neuropathy: peripheral, autonomic, amyotrophy and mononeuropathy<sup>1</sup>. It is possible to have more than one type of neuropathy and the symptoms will vary, depending upon the type.

Peripheral neuropathy is the most common type and affects the legs and feet first, followed by the arms and hands. Symptoms include numbness and tingling, sharp pains, increased

sensitivity to touch and loss of balance and reflexes.

Autonomic neuropathy can affect major organs such as the heart, stomach, bladder and intestines. There is a wide range of symptoms that can include bladder and bowel problems, gastroparesis, difficulty controlling body temperature, trouble swallowing and sexual dysfunctions.

Diabetic amyotrophy, also known as radiculoplexus neuropathy, is more common among type 2 diabetics. Symptoms typically affect one side of the body and include weakness and shrinking of the thigh muscles, sharp pains in the hip and buttock area and weight loss.

Diabetic mononeuropathy is characterized by damage to a specific nerve in the face, torso or leg. Depending on the affected nerve, symptoms may include pain in the foot, thigh or chest or possibly double vision, trouble focusing and unilateral facial paralysis (known as Bell's palsy).

### Causes & Treatment

The exact cause of each type of neuropathy can vary, but primarily elevated blood sugar levels over time will lead to nerve damage. Other factors include inflammation, genetics, smoking, and alcohol abuse<sup>1</sup>.

There is no cure for diabetic neuropathy, so treatment is directed at slowing the progression of the disease. Treatment includes keeping control of blood sugar levels with routine monitoring and blood tests, as well as relieving pain symptoms

with medications and working to restore normal function to affected organs.

### Coding Guidance

ICD-10-CM contains combination codes for diabetic complications, which can be found in chapter four<sup>3</sup>. The code set for neurological complications contains specific details regarding the type of neuropathy. Medical record documentation will need to include this same level of detail in order to code to the highest level of specificity.

#### Type 2 Diabetes Mellitus with Neurological Complications (HCC 18)

- E11.40 – neuropathy, unspecified**
- E11.41 – mononeuropathy**
- E11.42 – polyneuropathy**
- E11.43 – autonomic (poly)neuropathy**
- E11.44 – amyotrophy**
- E11.49 – other neurological complication**

### Resources:

<sup>1</sup> Mayo Clinic (n.d.). Diabetic Neuropathy. Accessed August 20, 2018 from [mayoclinic.org](http://mayoclinic.org)

<sup>2</sup> National Institutes of Health (2016). Updates in Diabetic Peripheral Neuropathy. Accessed August 20, 2018 from [nih.gov](http://nih.gov)

<sup>3</sup> Schmidt, A. & Patterson, L. (2018). ICD-10-CM Expert for Physicians. Optum Insight Inc.