Diabetes Mellitus

Diabetic Foot and Ankle Care, Peripheral Neuropathy — Neurological Evaluation

Coding Specifications

Codes required to document patient has diabetes mellitus and a visit occurred:

A line item ICD-9-CM diagnosis code for diabetes mellitus and a CPT code are required to identify patients to be included in this measure.

All measure-specific coding should be reported ON THE SAME CLAIM.

Diabetes mellitus line item ICD-9-CM diagnosis codes

- 250.00, 250.01, 250.02, 250.03 (diabetes mellitus without mention of complication),
- 250.10, 250.11, 250.12, 250.13 (diabetes with ketoacidosis),
- 250.20, 250.21, 250.22, 250.23 (diabetes with hyperosmolarity),
- 250.30, 250.31, 250.32, 250.33 (diabetes with other coma),
- 250.40, 250.41, 250.42, 250.43 (diabetes with renal manifestations),
- 250.50, 250.51, 250.52, 250.53 (diabetes with ophthalmic manifestations),
- 250.60, 250.61, 250.62, 250.63 (diabetes with neurological manifestations),
- 250.70, 250.71, 250.72, 250.73 (diabetes with peripheral circulatory disorders),
- 250.80, 250.81, 250.82, 250.83 (diabetes with other specified manifestations),
- 250.90, 250.91, 250.92, 250.93 (diabetes with unspecified complication)

AND

CPT codes

- 11040, 11041, 11042, 11043, 11044 (debridement),
- 11055, 11056, 11057 (paring or cutting of benign hyperkeratotic lesion),
- 11719 (trimming of nondystrophic nails),
- 11720, 11721 (debridement of nail(s) by any method(s)),
- 11730 (avulsion of nail plate, partial or complete, simple; single),
- 11740 (evacuation of subungual hematoma),
- 97001, 97002 (physical therapy evaluation),
- 97802, 97803 (medical nutrition therapy),
- 99201, 99202, 99203, 99204, 99205 (office new patient),
- 99212, 99213, 99214, 99215 (office established patient),
- 99241, 99242, 99243, 99244, 99245 (outpatient consult),
- 99251, 99252, 99253, 99254, 99255 (inpatient consult),
- 99304, 99305, 99306, 99307, 99308, 99309, 99310 (nursing facility care),
- 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337 (domiciliary),
- 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350 (home visit)

Quality codes for this measure:

G-code descriptors

(Data collection sheet should be used to determine appropriate code.)

- **G8404:** Lower extremity neurological exam performed and documented
- *G8406:* Clinician documented that patient was not an eligible candidate for lower extremity neurological exam measure
- G8405: Lower extremity neurological exam not performed