

## **Diabetes Documentation and Coding Questions Log**

## **Purpose**

The purpose of this document is to outline questions asked during the presentation and document the answers that were given by the presenters.

This webinar was launched live at 12pm on March 11<sup>th</sup>, 2020.

## Questions

1. If the patient has Type I diabetes and is on insulin, should Z79.4: Long term current use of insulin be captured on the claim?

<u>Answer:</u> No, if the patient is a Type 1 diabetic, it is assumed they are on insulin, since they can't make their own to survive, so Z79.4: long term (current) use of insulin does not need captured on the claim.

2. If a patient has more than one complication related to diabetes, what should be coded?

<u>Answer:</u> If a patient has more than one complication relating to diabetes, all should be documented in the record with supporting documentation, and each complication should be coded using a diabetic complication code. There is no limit to the amount of complication codes used for diabetes; there should be as many used as needed to capture all diabetic complications.

3. If diabetes is due to an underlying condition, should the underlying condition be coded along with the diabetes?

<u>Answer:</u> The answer is yes, if the diabetes is due to an underlying condition, the underlying condition should be documented in the record, and coded along with the diabetes code.