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Coding Tips

This is one in a series of tip sheets focusing on accurate coding for specific conditions.



DIABETES MELLITUS

Tips on How to Code Diabetes Mellitus

The diabetes mellitus codes are combination codes that include:

1. The type of diabetes mellitus
2. The body system(s) affected
3. The complications affecting the body system(s)

When coding diabetes mellitus, you should use as many codes from categories E08-E13* as necessary to describe all of the complications and associated conditions of the disease. These categories are listed below:

ICD-10-CM Code Category	ICD-10-CM Description	Note:
E08*	Diabetes mellitus due to underlying condition	Code first the underlying condition Use additional code to identify any insulin use
E09*	Drug or chemical induced diabetes mellitus	Code first poisoning due to drug or toxin, if applicable Use additional code for adverse effect, if applicable, to identify drug Use additional code to identify any insulin use
E10*	Type 1 diabetes mellitus	An additional code to identify insulin use may be applied
E11*	Type 2 diabetes mellitus	Use additional code to identify any insulin use
E13*	Other specified diabetes mellitus	Use additional code to identify any insulin use

- If a patient has not previously been diagnosed with diabetes and is being seen for a screening, it is **not** appropriate to assign a diabetic diagnosis. You would assign ICD-10-CM code Z13.1, Encounter for screening for diabetes mellitus. This code can be found under "Screening" in the Alphabetical Index of the ICD-10-CM book.
- If a member has been diagnosed with prediabetes, or has had a previous diagnosis of diabetes and the disease is now considered latent or dormant (per the provider's documentation) the ICD-10-CM code R73.09, Other abnormal glucose, should be assigned. This code can be found under "Diabetes" and then "latent," or under "Abnormal" and then "glucose" in the Alphabetical Index of the ICD-10-CM book.



- Diabetes codes are no longer classified as controlled or uncontrolled. Use the alphabetic index in the ICD-10-CM book to correctly code the status of the diabetes.
- Certain diabetes codes require additional codes in order to identify the manifestation further, such as diabetes with foot ulcer to identify the site of the ulcer, or diabetes with chronic kidney disease to identify the stage of chronic kidney disease.
- The type of diabetes mellitus should always be clearly documented in the medical record for each date of service; however, if the type of diabetes mellitus is not documented in the medical record the default ICD-10-CM diagnosis code is E11.x, Type 2 diabetes mellitus.
- ICD-10-CM Code Z79.4, Long-term (current) use of insulin should be assigned to indicate that the patient uses insulin.
- Diabetes Mellitus in pregnancy is coded using codes from category 024*.

ICD-10-CM Code Category	ICD-10-CM Description	Note:
024.0*	Pre-existing diabetes mellitus, type 1, in pregnancy, childbirth and the puerperium	Use additional code from category E10 to further identify any manifestations. An additional code to identify insulin usage may be applied.
024.1*	Pre-existing diabetes mellitus, type 2, in pregnancy, childbirth and the puerperium	Use additional code from category E11 to further identify any manifestations or to indicate long-term (current) use of insulin (Z79.4)
024.3*	Unspecified pre-existing diabetes mellitus, in pregnancy, childbirth and puerperium	Use additional code from category E11 to further identify any manifestation or to indicate long-term (current) use of insulin (Z79.4)
024.4*	Gestational diabetes mellitus	
024.8*	Other pre-existing diabetes mellitus in pregnancy, childbirth and puerperium	Use additional code from category E08, E09, and E13 to further identify any manifestation or to indicate long-term (current) use of insulin (Z79.4)
024.9*	Unspecified diabetes mellitus in pregnancy, childbirth and puerperium	Use additional code for long-term (current) use of insulin (Z79.4)



Diabetes Mellitus

ICD-10-CM Code Category	ICD-10-CM Description	Assign this code when:
E08-13.9	Specified type of Diabetes Mellitus without complications	No complications are listed or documented as being directly related to the disease
E08-13.8	Specified type of Diabetes Mellitus with unspecified complications	The documentation states that there is a complication directly related to the disease but no specific complication has been listed. This code should not be used often.
E08-13.10–E08-13.65	Specified type of Diabetes Mellitus with specified complications	Documentation supports the presence of a complication linked to diabetes in the tabular or alphabetic index.
E08-13.69	Specified type of Diabetes Mellitus with other specific complications	Documentation supports the presence of a complication that is not listed as linked to diabetes in the tabular or alphabetic index. An additional code (or codes) must be used to identify the specific complication.

Although most of the diabetes mellitus codes in ICD-10-CM include manifestations, specific ICD-10-CM diabetes mellitus require additional codes in order to identify the manifestation further.

Example: Member has Type 2 diabetes mellitus and is being evaluated for a chronic diabetic left foot ulcer with necrosis of muscle. The patient also takes insulin on a daily basis. Below is the correct coding for this patient's conditions:

ICD-10-CM Code Category	ICD-10-CM Description
E11.621	Type 2 diabetes mellitus with foot ulcer
L97.523	Non-pressure chronic ulcer of other part of the left foot with necrosis of muscle
Z79.4	Long term (current) use of insulin

Questions? Contact Blue Cross Vermont Risk Adjustment at riskadjustment@bcbsvt.com or at **(802)-371-3540**.

ICD-10-CM diagnostic codes and the ICD-10-CM Official Guidelines for Coding and Reporting are subject to change. It's the responsibility of the provider to ensure that current ICD-10-CM diagnostic codes and the ICD-10-CM Official Guidelines for Coding are reviewed prior to the submission of claims.

Keep in mind that none of the information included in this document is intended to be legal advice and, as such, it remains the provider's responsibility to ensure that all the coding and documentation are done in accordance with all applicable state and federal laws and regulations.