Diabetes

The various forms highlighting the diverse causes and manifestations of this metabolic disorder are Type 1, an autoimmune disease destroying insulin-producing cells, requiring lifelong insulin; Type 2, the most common, involving insulin resistance or deficiency in the body; drug-induced diabetes, a temporary condition caused by medications; and diabetes resulting from underlying medical conditions like pancreatitis or malignancy.

Best Documentation Practices

Specify the type	Type 1, Type 1.5, or Type 2
Note the cause	Secondary to an underlying condition, drug, or chemical, if applicable
Document all complications	What other body systems are affected *(E.g., CKD, Cataract, Immunodeficiency, PVD, etc.)*
Record any treatment	Type of treatment the patient is receiving *(E.g., medication, diet, exercise, or insulin pump)*
Include supporting evidence	Blood pressure, Blood sugar (most recent FBS or A1c and note if hypoglycemic or hyperglycemic), weight and BMI, and comprehensive dilated eye exam including date and results

Other tips for documenting diabetes include:

- State the causal relationship of diabetic complications.
- Document all conditions that affect patient care, treatment, or management.

M.E.A.T. the Condition

Proper documentation requires at least one of these four elements be present in the documentation for each condition.

M
Monitor

How is the patient doing?

Document signs, symptoms, disease progression/regression or ongoing surveillance

E
Evaluate

What is the current state of the condition?

Document current state, test results, medication effectiveness or response to treatment

A
Address/Assess

How will the condition be evaluated?

Document discussion, review of records, counseling, or ordering further tests

T
Treatment

What is being done to help the condition?

Document care, prescribed medications, referral to specialist or other modalities

CMS requires **annual coding and reporting of all chronic conditions**. A condition is not considered present in a given year unless it is appropriately documented and coded in that year.

Diabetes Mellitus ICD-10 Category Reference Guide

This partial list of Risk Adjustment condition categories and ICD-10 codes ('X' represents missing digits) is not exhaustive. **For complete codes and all applicable coding instructions, refer to the current ICD-10-CM Alphabetic Index and Tabular List.**

Type 1	Type 2	Diabetes Mellitus
E10.2X	E11.2X	With kidney complications Use additional code to identify stage of chronic kidney disease, if applicable
E10.3XXX	E11.3XXX	With ophthalmic complications
E10.4X	E11.4X	With neurological complications
E10.5X	E11.5X	With circulatory complications
E10.62XX	E11.62XX	With skin complications Use additional code to identify site of ulcer, if applicable
E10.64X	E11.64X	With hypoglycemia Use additional code for hypoglycemia level, if applicable
E10.65	E11.65	With hyperglycemia
E10.9	E11.9	Without complications
Use additional code, if applicable		
Z79.4		Long term (current) use of insulin
Z79.84		Long term (current) use of oral hypoglycemic or antidiabetic drugs

Coding Examples

Example 1	
Documentation	**CC:** Diabetic neuropathy **PE:** Numbness; **Monofilament Foot Exam:** Decreased protective sensation bilaterally **Assessment & Plan:** Type 2 DM with neuropathy, both feet effected. Monofilament completed. Continue Neurontin as prescribed.
ICD-10 Code(s)	E11.40 Type 2 diabetes mellitus with diabetic neuropathy, unspecified
Rationale	The assessment and plan thoroughly address the patient's diabetic neuropathy. An in-office physical exam and monofilament test provide additional support for the diagnosis, and prescribed medications have been linked to the condition.
Example 2	
Documentation	**HPI**: 63 y/o male with known diabetes. Here for AWV. Diabetes well controlled. **Assessment & Plan:** T2DM with CKD3a – Labs A1c 7.2, GFR 50. Rx Metformin and Losartan.
ICD-10 Code(s)	E11.22 Type 2 diabetes mellitus with chronic kidney disease; N18.31 Chronic Kidney Disease, stage 3a
Rationale	The HPI notes the patient's diabetes. The assessment specifies the diabetes type and notes associated complication of CKD stage 3a.

Rev. 01.2025