

# CHAPTER 13

## DISEASES OF THE MUSCULOSKELETAL SYSTEM AND CONNECTIVE TISSUE (M00-M99)

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## CHAPTER SPECIFIC CATEGORY CODE BLOCKS

- M00-M02 Infectious arthropathies
- M05-M14 Inflammatory polyarthropathies
- M15-M19 Osteoarthritis
- M20-M25 Other joint disorders
- M26-M27 Dentofacial anomalies [including malocclusion] and other disorders of jaw
- M30-M36 Systemic connective tissue disorders
- M40-M43 Deforming dorsopathies
- M45-M49 Spondylopathies
- M50-M54 Other dorsopathies

## CHAPTER SPECIFIC CATEGORY CODE BLOCKS (cont.)

- M60-M63 Disorders of muscles
  - M65-M67 Disorders of synovium and tendon
  - M70-M79 Other soft tissue disorders
  - M80-M85 Disorders of bone density and structure
  - M86-M90 Other osteopathies
  - M91-M94 Chondropathies
  - M95 Other disorders of the musculoskeletal system and connective tissue
  - M96 Intraoperative and postprocedural complications and disorders of musculoskeletal system, not elsewhere classified
  - M99 Biomechanical lesions, not elsewhere classified
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## SITE AND LATERALITY

- Most codes within Chapter 13 have site and laterality designations.
- The site represents the bone, joint or muscle involved.
- For some conditions where multiple joints, bones or muscles are involved “multiple code sites” are available.
- For categories where no multiple site code is provided and more than one bone, joint or muscle is involved, multiple codes should be used to indicate the different sites involved.
  - Bone versus Joint
    - For certain conditions, the bone may be affected at the upper or lower end, (e.g., avascular necrosis of bone, M87 Osteoporosis M80, M81).
    - Though the portion of the bone affected may be at the joint, the site designation will be the bone, NOT the joint.

## ACUTE TRAUMATIC VERSUS CHRONIC OR RECURRENT MUSCULOSKELETAL CONDITIONS

- Many musculoskeletal conditions are a result of previous bone injury or trauma to a site, or are recurrent conditions.
- Bone, joint or muscle conditions that are the result of a healed injury are usually found in chapter 13 as well as any recurrent bone, joint or muscle conditions.
- Any current, active injury should be coded to the appropriate injury code from chapter 19.
- If it is difficult to determine from the documentation in the record which code is best to describe a condition, query the provider.

## CODING OF PATHOLOGIC/STRESS FRACTURES

- Seventh character A is for use as long as the patient is receiving active treatment for the fracture.
- Examples of active treatment are:
  - Surgical treatment
  - Emergency room encounter
  - Evaluation treatment by a new physician
- Seventh character D is to be used for encounters after the patient has completed active treatment.
- The other Seventh characters, listed under each subcategory in the Tabular List, are to be used for subsequent encounters for treatment of problems associated with the healing, such as malunions, nonunions and sequelae.
- Care for complications of surgical treatment for fracture repairs during the healing or recovery phase should be coded with the appropriate complications codes.

## CODING OF PATHOLOGIC/STRESS FRACTURES (cont.)

- There are three different categories for pathologic fractures – due to neoplastic disease, due to osteoporosis and due to other specified disease.
- The seventh character requires identification to the encounter of care.
- All pathological and stress fractures must have a seventh character that identifies one of the above.

A	Initial encounter for fracture
D	Subsequent encounter for fracture with routine healing
G	Subsequent encounter for fracture with delayed healing
K	Subsequent encounter for fracture with nonunion
P	Subsequent encounter for fracture with malunion
S	Sequela

## OSTEOPOROSIS

- Osteoporosis is a systemic condition, meaning all the bones of the musculoskeletal system are affected.
- Therefore, site is not a component of the codes under category M81, Osteoporosis without current pathological fracture.
- The site codes under category M80, Osteoporosis with current pathological fracture, identify the site of the fracture, NOT the osteoporosis.
- For history of osteoporosis fractures use code Z87.31 (personal history of osteoporosis fracture). This should follow the code from M81-.



## OSTEOPOROSIS WITHOUT PATHOLOGICAL FRACTURE

- The official coding guidelines instruct coders to report codes from category M81- for osteoporosis without pathological fracture, M81 is for use for patients with osteoporosis who do not currently have a pathologic fracture due to osteoporosis, even if they have had a fracture in the past.
- For patients with a history of osteoporosis fractures, status code Z87.30, Personal history of (healed) osteoporosis fracture should follow the code from M81.
- There is a “use additional code” note that appears at the heading of M81 that reminds coders to use a code for any major osseous defect (M89.7-) or personal history of (healed) osteoporosis fracture (Z87.310.) if applicable.
- For code M81.8 coders are instructed to “use additional code” for adverse effect, if applicable, to identify drug (T36-T50 with fifth or sixth character five).

## OSTEOPOROSIS WITH CURRENT PATHOLOGICAL FRACTURE

- Category M80, Osteoporosis with current pathological fracture , is for patients who have a current pathologic fracture at the time of the encounter.
- The codes under M80 identify the site of the fracture.
- A code from category M80, not a traumatic fracture code, should be used for any patient with known osteoporosis who suffers a fracture, even if the patient had a minor fall or trauma, if that fall or trauma would not usually break a normal healthy bone.
- The diagnosis under this category must be made by the physician. The physician should be the one who provides a connection between the fall and fracture due to osteoporosis.

## DEFINITION OF TERMS

### Spontaneous rupture

- Occurs when normal force is applied to tissues that are inferred to have less than normal strength.

### Fragility fracture

- Sustained with trauma no more than a fall from a standing height or less occurring under circumstances that would not cause a fracture in a normal healthy bone.

## CODING EXAMPLES

1. This 76-year-old man, originally diagnosed with left upper lobe carcinoma 5 years ago, is seen for a fracture of the shaft of the right femur. Eight months ago, he was diagnosed with metastatic bone cancer (from the lung) and this fracture is a result of the metastatic disease. This patient's lung cancer was treated with radiation and there is no longer evidence of an existing primary malignancy. What diagnosis codes are assigned for this case?

**Answer:** M84.551A- Fracture, pathological (pathologic), due to neoplastic disease, femur  
C79.51- Carcinoma (malignant), metastatic, see Neoplasm, secondary. Refer to Neoplasm Table, by site, bone, femur, secondary  
Z85.118- History, personal (of), malignant neoplasm (of), lung  
Z92.3- History, personal (of), radiation therapy

**Rationale:** M84.551A correctly identifies the fracture in the shaft of the right femur. The seventh character A is used as long as the patient is receiving active treatment for the fracture. The code Z92.3 can be added to show history of radiation therapy if coding is performed to that degree.

## CODING EXAMPLES (cont.)

2. Julia is an 80-year-old female with senile osteoporosis. She complains of severe back pain with no history of trauma. X-rays revealed pathological compression fractures of several lumbar vertebrae. What diagnosis code is assigned?

**Answer:** M80.08XA- Fracture, pathological (pathologic), due to osteoporosis , specified cause NEC- see Osteoporosis, specified type NEC, with pathological fracture. Osteoporosis (female) (male), senile- see Osteoporosis, age-related, with current pathologic fracture, vertebra(e)

**Rationale:** In ICD-10-CM, a combination code is utilized to report osteoporosis with an associated pathological fracture. When identifying senile osteoporosis, the code book directs the coder to age-related osteoporosis.

## CODING EXAMPLES (cont.)

3. This young man is being treated for his ongoing juvenile rheumatoid arthritis. This condition is found only in both ankles. What diagnosis codes are assigned

**Answer:** M08.071- Arthritis, arthritic (acute) (chronic) (nonpyogenic) (subacute), rheumatoid, juvenile (with or without rheumatoid factor), ankle. Review the Tabular for assignment of laterality

M08.072- Arthritis, arthritic (acute) (chronic) (nonpyogenic) (subacute), rheumatoid, juvenile (with or without rheumatoid factor), ankle. Review the Tabular for assignment of laterality

**Rationale:** For juvenile rheumatoid arthritis, there is not a code to identify bilateral; therefore, both codes, to identify right and left, must be assigned.

## TRAINING SOURCES

American Health Information Management Association

[www.ahima.org](http://www.ahima.org)

American Academy of Professional Coders

[www.aapc.com](http://www.aapc.com)