

IRF and LTCH Virtual Training Program – Part 2

Section K. Swallowing/Nutritional Status Coding Workshop

Brenda Karkos, MSN/MBA, RN, Abt Associates
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K0520

Nutritional Approaches

K0520: Practice Scenario 1

- Upon admission to the post-acute care (PAC) setting, the patient was placed on a therapeutic diet to lower their salt intake due to high blood pressure, which was exacerbated following a car accident. Prior to this admission, the patient was on a regular diet.
- With the low sodium diet, the high blood pressure improved; this was continued throughout the entire 2 weeks of the rehab stay. This diet was also ordered upon discharge to home.





How would you code K0520 for this patient on the admission assessment?

- A. K0520Z. None of the above would be checked
- B. K0520D. Therapeutic diet would be checked.
- C. Both K0520C. Mechanically altered diet and K0520D. Therapeutic diet would be checked.





How would you code K0520 for this patient on the admission assessment?



- A. K0520Z. None of the above would be checked
- B. K0520D. Therapeutic diet would be checked.**
- C. Both K0520C. Mechanically altered diet and K0520D. Therapeutic diet would be checked.



K0520: Practice Scenario 1 – Admission Rationale

- **Coding on Admission:** K0520D. Therapeutic diet would be checked.
- **Rationale:** The patient was placed on a low sodium diet on admission to help manage high blood pressure.





How would you code K0520 for this patient on the discharge assessment?

- A. For both columns 4 and 5, K0520Z. None of the above would be checked.
- B. For column 4, K0520D. Therapeutic diet would be checked, and for column 5, K0520Z. None of the above would be checked.
- C. For both columns 4 and 5, K0520D. Therapeutic diet would be checked.
- D. K0520C. Mechanically altered diet and K0520D. Therapeutic diet would be checked.





How would you code K0520 for this patient on the discharge assessment?

- A. For both columns 4 and 5, K0520Z. None of the above would be checked.
- B. For column 4, K0520D. Therapeutic diet would be checked, and for column 5, K0520Z. None of the above would be checked.
- C. For both columns 4 and 5, K0520D. Therapeutic diet would be checked.**
- D. K0520C. Mechanically altered diet and K0520D. Therapeutic diet would be checked.



K0520: Practice Scenario 1 – Discharge Rationale

- **Coding on Discharge:** K0520D. Therapeutic diet would be checked for both columns 4 and 5.
- **Rationale:** Patient was on a therapeutic diet during the last 7 days and at discharge.



K0520: Practice Scenario 2

- The patient was admitted to the PAC facility after a stroke and placement of a feeding tube. Since admission, they have been receiving tube feedings daily while receiving therapy to improve swallowing and progress to intake by mouth.
- The patient also has a peripheral line and is receiving some intravenous (IV) medications and IV fluids. There is no supporting documentation indicating that the additional fluid intake is to support nutrition/hydration.





How would you code K0520 for the patient on the admission assessment?

- A. K0520Z. None of the above would be checked.
- B. Both K0520A. Parenteral/IV feeding and K0520B. Feeding tube would be checked.
- C. K0520B. Feeding tube would be checked.
- D. K0520A. Parenteral/IV feeding, K0520B. Feeding tube, and K0520C. Mechanically altered diet would be checked.





How would you code K0520 for the patient on the admission assessment?

- A. K0520Z. None of the above would be checked.
- B. Both K0520A. Parenteral/IV feeding and K0520B. Feeding tube would be checked.
- C. K0520B. Feeding tube would be checked.**
- D. K0520A. Parenteral/IV feeding, K0520B. Feeding tube, and K0520C. Mechanically altered diet would be checked.



K0520: Practice Scenario 2 – Admission Rationale

- **Coding on Admission:** K0520B. would be checked.
- **Rationale:** The patient was admitted with a feeding tube and was receiving tube feedings at the time of admission.
 - The patient does have a peripheral IV line for some medications and IV fluids. However, in the absence of documentation supporting the need for additional fluid intake specifically addressing a nutrition or hydration need, the presence of a peripheral IV line for medications and fluids would not support checking K0520A Parenteral/IV feeding.

K0520: Practice Scenario 2 (cont.)

During the PAC stay, the patient slowly progressed on a mechanically altered diet. Four days before discharge, there was no further need for tube feedings, as the oral intake was nutritionally sufficient, and the patient progressed to a regular diet. A decision was made to remove the feeding tube two days prior to discharge.





How would you code the patient for K0520 column 4, Last 7 days on the discharge assessment?

- A. Check K0520Z. None of the above.
- B. K0520B. Feeding tube and K0520C. Mechanically altered diet would be checked.
- C. K0520B. Feeding tube would be checked.
- D. K0520C. Mechanically altered diet would be checked.





How would you code the patient for K0520 column 4, Last 7 days on the discharge assessment?



- A. Check K0520Z. None of the above.
- B. K0520B. Feeding tube and K0520C. Mechanically altered diet would be checked.**
- C. K0520B. Feeding tube would be checked.
- D. K0520C. Mechanically altered diet would be checked.



K0520: Practice Scenario 2 – Last 7 Days Rationale

- **Coding for the Last 7 days:** For column 4, Last 7 days, K0520B. Feeding tube and K0520C. Mechanically altered diet would be checked.
- **Rationale:** Within the last 7 days the patient was still receiving tube feedings and was on a mechanically altered diet. Beginning four days before discharge, the tube feedings were no longer required and the mechanically altered diet was discontinued.



How would you code K0520 for the patient in column 5 on the discharge assessment?

- A. Leave it blank since there are no nutritional approaches.
- B. Both K0520C. Mechanically altered diet and K0520Z. None of the above would be checked.
- C. Only K0520Z. None of the above would be checked.





How would you code K0520 for the patient in column 5 on the discharge assessment?

- A. Leave it blank since there are no nutritional approaches.
- B. Both K0520C. Mechanically altered diet and K0520Z. None of the above would be checked.



C. Only K0520Z. None of the above would be checked.



K0520: Practice Scenario 2 – Rationale

- **Coding on Discharge:** For column 5, At Discharge, K0520Z. None of the above would be checked.
- **Rationale:** Both the tube feedings and the mechanically altered diet had been discontinued four days before discharge. The feeding tube was removed two days before discharge as the patient was doing well on the regular diet.

K0520: Practice Scenario 3


- The patient is admitted to the PAC setting and is receiving an IV antibiotic for symptoms of a urinary tract infection.
- Notes from the acute care hospitalization include documentation of inadequate fluid intake with signs and symptoms of dehydration, despite an oral intake. The patient is on a mechanically altered diet due to swallowing issues. Orders are updated to include an IV hydration intervention to ensure adequate fluid intake.



Q₆ How would you code K0520 for the patient on the admission assessment?

- A. K0520A. Parenteral/IV feeding would be checked.
- B. K0520C. Mechanically altered diet would be checked.
- C. K0520Z. None of the above would be checked.
- D. Both K0520A. Parenteral/IV feeding and K0520C. Mechanically altered diet would be checked.

Q₆ How would you code K0520 for the patient on the admission assessment?

- A. K0520A. Parenteral/IV feeding would be checked.
- B. K0520C. Mechanically altered diet would be checked.
- C. K0520Z. None of the above would be checked.
-  **D. Both K0520A. Parenteral/IV feeding and K0520C. Mechanically altered diet would be checked.**

K0520: Practice Scenario 3 – Rationale

- **Coding on Admission:** Both K0520A. Parenteral/IV feeding and K0520C. Mechanically altered diet would be checked.
- **Rationale:** The patient is on a mechanically altered diet but is also receiving IV fluids. The use of IV fluids for nutritional purposes is supported by documentation that reflects the need for additional fluid to address hydration issues.

Key Insights to Coding Section K

- On discharge, review the medical record or available documentation to determine if any nutritional approaches were received in the last 7 days (Column 1) and at discharge (Column 2).
- IV fluids can be coded in K0520A if needed to prevent dehydration if the additional fluid intake is specifically needed for nutrition and hydration.
 - This supporting documentation should be noted in the patient's medical record according to state and/or internal facility policy.

