

Seizures vs. Epilepsy

A LIFEWISE DOCUMENTATION AND CODING SERIES FOR PROVIDERS

Overview

A seizure is an event caused by the disruption of the brain's normal electrical activity that results in altered consciousness or other neurological and behavioral manifestations.

Epilepsy (or seizure disorder) is a syndrome of two or more unprovoked or recurrent seizures occurring on more than one occasion. You shouldn't document a single seizure or multiple provoked seizures as a disorder or recurrent.

Without specifying in the medical record that the patient has "epilepsy" or "seizure disorder," the ICD-10-CM code defaults to seizure or convulsions as a discrete event and not a chronic condition. The code uses the terms convulsion and seizure interchangeably.

Documentation

Best practice is to specify the type of **seizure** in your documentation, for example:

- Febrile: Simple or complex
- Post traumatic

Best practice is to include the following information in your documentation of **epilepsy**:

- Type
 - Generalized idiopathic
 - Localization-related idiopathic or symptomatic
 - Simple partial or complex partial seizures
- Level of control *
 - Intractable
 - Not intractable
- Complications
 - With or without status epilepticus
- Contributing factors
 - Seizures related to alcohol, drugs, sleep deprivation, etc.

**When documenting epilepsy control, the following terms are considered equivalent to intractable: pharmacoresistant, treatment resistant, refractory, and poorly controlled.*

Coding

Accurate documentation of the seizure type is essential to assigning the correct ICD-10-CM codes. The ICD-10-CM coding system has more codes to accommodate higher specificity in capturing diagnoses. Here are some common coding accuracy opportunities:

Documentation example	Incorrect code commonly assigned	Correct code to assign
"Patient recently had a seizure and is now on medication"	G40.909 Epilepsy, unspecified, not intractable, without status epilepticus	R56.9 Unspecified convulsion
"Patient has known seizure disorder with complex partial seizures and is followed regularly"	R56.9 Unspecified convulsion	G40.209 Localization-related (focal) (partial) symptomatic epilepsy and epileptic syndromes with complex partial seizures, not intractable, without status epilepticus

For more information about documentation and coding of this and other chronic or complex conditions, contact your Quality and Risk Adjustment Provider Clinical Consultant.