

Molina Healthcare Coding Education Peripheral Neuropathy vs. Radiculopathy



Peripheral neuropathy and radiculopathy are general terms that have many etiologies resulting in similar symptoms. It is important to be as specific as possible with this diagnosis, and to document any underlying causative or associated condition.

Polyneuropathy in diseases classified elsewhere (G63) should be used when the symptoms are associated with most underlying diseases. Hereditary and idiopathic neuropathy, unspecified (G60.9) and polyneuropathy, unspecified (G62.9) are used for POLY-neuropathy of unknown or unspecified cause. Not for radiculopathy.

Coding Tip:

If the pain is chronic and not clearly associated with a neuropathic or radicular process, consider diagnosing as chronic pain, not elsewhere classified (G89.2x).

Documentation Examples:

Initial Diagnosis

• **Assessment:** 34 year old female with bilateral upper and lower extremity paresthesia, elevated TSH. Hypothyroid-associated peripheral neuropathy.

- **ICD-10 Code: G63** Polyneuropathy in diseases classified elsewhere
- **ICD-10 Code: E03.9** Hypothyroidism, unspecified

Plan: Will start work up.

Established Diagnosis

• **Assessment:** 60 year old male with bilateral lower extremity paresthesia due to sciatica (radiculopathy), improving.

- **ICD-10 Code: M54.30** Sciatica, unspecified side
- **ICD-10 Code: M54.10** Radiculopathy, site unspecified

Plan: Will continue physical therapy.

Have Questions?

Contact: Ramp@MolinaHealthcare.com