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DISEASE - Billing &
Coding

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CODING AND BILLING CHRONIC KIDNEY DISEASE (CKD)

For all risk adjustment models it is imperative that the provider evaluates and documents all chronic conditions to the highest level of specificity on an annual basis. However, it is equally important that the providers documentation is coded and billed properly. It is the coding and billing process that reports the condition to CMS which makes it extremely important to code and bill to the highest specificity possible from the provider documentation. This will ensure the highest level of care for all patients





PER ICD-10 GUIDELINE SECTION I.A.15, THERE IS A PRESUMED RELATIONSHIP WHEN CODING CHRONIC KIDNEY DISEASE IN THE PRESENCE OF HYPERTENSION AND/OR DIABETES.

The provider is not required to document the conditions to be related in order for the coder to capture the combination diagnosis code(s). The only exception to this guideline is when the provider specifically documents that the CKD is related to a condition other than hypertension and/or diabetes.



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CODING CKD IN THE PRESENCE OF DIABETES (INDEXED BY TYPE OF DIABETES)	
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease
E10.22	Type I diabetes mellitus with diabetic chronic kidney disease
E11.22	Type II diabetes mellitus with diabetic chronic kidney disease
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease
*There is a "use additional code" to identify stage of chronic kidney disease (N18.1-N18.6) ICD-10 directive	
CODING CKD IN THE PRESENCE OF HYPERTENSION	
l12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease
112.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease
*There is a "use additional code" to identify stage of chronic kidney disease (N18.1-N18.9) ICD-10 directive	
CODING CKD STAGES (PER PROVIDER DOCUMENTATION)	
N18.1	Chronic kidney disease, stage 1
N18.2	Chronic kidney disease, stage 2 (mild)
N18.30	Chronic kidney disease, stage 3 unspecified (moderate)
N18.31	Chronic kidney disease, stage 3a (moderate)
N18.32	Chronic kidney disease, stage 3b (moderate)
N18.4	Chronic kidney disease, stage 4 (severe)
N18.5	Chronic kidney disease, stage 5
N18.6	End stage renal disease (chronic kidney disease requiring chronic dialysis)
N18.9	Chronic kidney disease, unspecified stage

ADDITIONAL TIPS FOR SELECTING THE CORRECT CODE FOR CHRONIC KIDNEY DISEASE:

- 1. All CKD patients requiring chronic dialysis are coded to N18.6, even if the provider has documented a different stage.
- 2. If the stage of the CKD is not documented it is best practice to query the provider for clarification before coding and billing N18.9.
- 3. Use additional code to identify dialysis status (Z99.2) when coding N18.6.

Adobe Care and Wellness coding and documentation materials are based on current guidelines and are to be used for reference only. Clinical and coding decisions are to be made based on the independent judgement of the treating physician or qualified health care practitioner and in the best interest of the patient. ICD-10CM, CPT and HCPCS are the authoritative references for purposes of assigning diagnosis and procedure codes to be reported. It is the responsibility of the physician and/or coding staff to determine and submit accurate codes, charges and modifiers for services rendered.