



Documentation and Coding

# Chronic Kidney Disease



About 37 million people in the U.S. are estimated to have chronic kidney disease, according to the **Centers for Disease Control and Prevention**. Accurately and completely coding and documenting CKD can **capture our members' health status**. Below is information for outpatient and professional services from the **ICD-10-CM Official Guidelines for Coding and Reporting**.

## Coding for CKD

- CKD is divided into stages based on estimated glomerular filtration rate test results and how well the kidneys are filtering blood. The appropriate code for **the applicable stage of CKD is required**, according to **ICD-10-CM Official Guidelines for Coding and Reporting**. (See the chart.)
- **Avoid using unspecified diagnosis codes** (N18.30 and N18.9) if more information from a provider is available to determine the level of specificity.

ICD-10 Code	Description
N18.1 CKD, stage 1	Kidney damage eGFR >90
N18.2 CKD, stage 2	Kidney damage mild eGFR 60-89
N18.30 CKD, stage 3 unspecified	Moderate CKD
N18.31 CKD, stage 3a	Moderate eGFR 45-59
N18.32 CKD, stage 3b	Moderate eGFR 30-44
N18.4 CKD, stage 4	Severe eGFR 15-29
N18.5 CKD, stage 5	Severe eGFR <15
N18.6 CKD, stage 6 or end-stage renal disease	Severe eGFR <15 (requiring dialysis)
N18.9 CKD, unspecified stage	Stage not indicated

## Documenting Specificity

**ICD-10-CM Official Guidelines for Coding and Reporting** guidelines states that CKD can be assumed “due to” both hypertension and diabetes, even in the absence of the provider linking them, unless the CKD is linked by a provider to another condition or the provider clearly states the conditions are unrelated. Include the more specific codes for **the underlying cause**. (See the chart.)

Also specify:

- Acute vs. chronic kidney disease
- The stage of CKD; avoid listing multiple stages
- Any complications

Note that renal insufficiency (N28.9) is a broad term for all stages of kidney impairment, including renal failure. It should be avoided when there is a specific level of kidney decline.

**Common errors** in documentation include:

- Not adding codes that describe the stage of CKD
- Not linking the condition to underlying causes, such as diabetes and hypertension

## Documentation Tips

- Include patient demographics, such as name, date of birth and date of service in all progress notes.
- Document legibly, clearly and concisely.
- Ensure providers sign and date all documents.
- Document how each diagnosis was monitored, evaluated, assessed and/or treated on the date of service.
- Note complications with an appropriate treatment plan.
- Take advantage of the Annual Health Assessment or other yearly preventive exam as an opportunity to capture conditions impacting member care.

## Resources

- **ICD-10-CM Official Guidelines for Coding and Reporting**, “Chronic Kidney Disease” (I.C.14.a) Chapter 14: Diseases of Genitourinary System (N00-N99), “Hypertension” (I.C.9.a) Chapter 9: Diseases of the Circulatory System (I00-I99)
- **CDC** Chronic Kidney Disease Basics

ICD-10 Code	Description
E10.22	Type 1 diabetes mellitus with diabetic CKD
E11.22	Type 2 diabetes mellitus with diabetic CKD
I12.9	Hypertensive CKD stage 1-4
I12.0	Hypertensive CKD stage 5-6
I13.0	Hypertensive CKD stage 1-4 with heart failure
I13.10	Hypertensive CKD stage 1-4 without heart failure
I13.11	Hypertensive CKD stage 5-6 without heart failure
I13.2	Hypertensive CKD stage 5-6 with heart failure
N17.9	Acute kidney failure, unspecified
N25.81	Secondary hyperparathyroidism of renal origin
N28.9	Renal insufficiency
Z99.2	Dependence of renal dialysis
Z91.15	Noncompliance with renal dialysis

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