CODING
for Kidney Disease and Associated Comorbidities

Cardiovascular Diseases

Cardiovascular Diseases	
Angina pectoris[5]	I20.9
Angina pectoris in CAD[5]	I25.119
Cardiomyopathy	I42.9
Cardiomyopathy, hypertensive	I11.9 + I43
Heart failure	I50.9
Left ventricular failure, unspecified	I50.1
Unspecified systolic (congestive) heart failure	I50.20
Acute systolic (congestive) heart failure	I50.21
Chronic systolic (congestive) heart failure	I50.22
Acute on chronic systolic (congestive) heart failure	I50.23
Unspecified diastolic (congestive) heart failure	I50.30
Acute diastolic (congestive) heart failure	I50.31
Chronic diastolic (congestive) heart failure	I50.32
Acute on chronic diastolic (congestive) heart failure	I50.33
Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	I50.40
Acute combined systolic (congestive) and diastolic (congestive) heart failure	I50.41
Chronic combined systolic (congestive) and diastolic (congestive) heart failure	I50.42
Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	I50.43
Right heart failure, unspecified	I50.810
Acute right heart failure	I50.811
Chronic right heart failure	I50.812
End-stage heart failure	I50.84
Hypertension with heart failure	I11.0 + I50.9
Pulmonary hypertension	I27.20
Atrial fibrillation	I48.91
Atrial flutter	I48.92
Sick sinus syndrome	I49.5
PVD (PAD) (PVI)	I73.9
Arteriosclerosis in right leg	I70.201
Arteriosclerosis in left leg	I70.202
Varicose left leg with ulcer	I83.92 + L97.929
Varicose right leg with ulcer	I83.91 + L97.919
Aortic aneurysm	I71.9
Arteriosclerosis of aorta	I70.0

Nervous System Diseases

Nervous System Diseases	
Alzheimer's disease	G30.9 + F02.80
Dementia	F03.90
Parkinson's disease	G20
Cerebral palsy	G80.9
Epilepsy	G40.909
Hemiparesis or hemiplegia	G81.90
Multiple sclerosis	G35
Muscular dystrophy	G71.00
Paraplegia	G82.20
Quadriplegia	G82.50
Polyneuropathy in RA	M05.50
Polyneuropathy, inflammatory	G61.9
Paroxysmal atrial fibrillation	I48.0
Persistent atrial fibrillation	I48.1
Longstanding persistent atrial fibrillation	I48.11
Other persistent atrial fibrillation (chronic persistent atrial fibrillation, persistent atrial fibrillation, NOS)	I48.19
Chronic atrial fibrillation, unspecified	I48.20
Permanent atrial fibrillation	I48.21
Typical atrial flutter (Type I atrial flutter)	I48.3
Atypical atrial flutter (Type II atrial flutter)	I48.4
Hemiplegia and hemiparesis due to cerebral vascular accident (CVA)	I69.359
Hemiplegia and hemiparesis following cerebral infarction affecting left dominant side	I69.352
Hemiplegia and hemiparesis following cerebral infarction affecting right non-dominant side	I69.353
RT side weakness due to CVA	I69.351
LT side weakness due to CVA	I69.354

[1] CKD unspecified (N18.30) should only be used if there is not an eGFR value available. Otherwise, the appropriate code to identify the specific CKD stage should be used.

[2] Requiring dialysis (Z99.2) and Arteriovenous shunt AV (I77.0) cannot be coded together due to "Excludes 1" coding rules.

[3] Applies to renal failure after procedure; renal failure requiring dialysis; acute-on-chronic renal failure; and renal failure due to obstruction, contrast agent, ACE inhibitor, etc.

[4] CKD stage 1 (N18.1) and CKD stage 2 (N18.2) are not HCC codes, but are included here for reference.

[5] Angina pectoris (I25.119) and angina pectoris in CAD (I20.9) cannot be coded together due to "Excludes 1" coding rules.

healthmap

Coding for Kidney Disease and Related Conditions

- Two eGFR results 90 days apart are recommended to establish an initial chronic kidney disease (CKD) diagnosis.

- If the patient has diabetes mellitus and has long term insulin, consider adding code Z79.4, and/or if they are on an oral medication or non-injectable drugs, add the necessary codes that are supported within the documentation.

- Secondary diabetes is always caused by another condition or event (e.g., cystic fibrosis, malignant neoplasm of pancreas, pancreatectomy, adverse effect of drug, or poisoning).

- If a patient has hypertensive CKD and acute renal failure, the acute renal failure diagnosis should also be coded. Sequence according to the circumstances of the admission/encounter.

- If a patient has CKD attributable to both diabetes and hypertension, it should be linked to both conditions.

- CKD stage 5 and end-stage renal disease (ESRD) cannot both be coded on the same date of service. ESRD should only be coded if a patient requires chronic dialysis.

- Patients that have had kidney transplant coded may still have CKD. In these cases, document the appropriate stage of CKD along with the kidney transplant status code (Z94.0).

- When coding diabetes mellitus with CKD, the word "with" should be interpreted to mean "associated with" or "due to." These conditions should be coded as related, even in the absence of provider documentation explicitly linking them, unless the documentation clearly states that the conditions are unrelated, or when another guideline exists that specifically requires a documented linkage between two conditions.

- CKD should not be coded as hypertensive if the provider indicates the CKD is not related to hypertension.

- Document history of heart attack, status codes, etc. that affect the patient's care as "history of" or "PMH" (past medical history) when they no longer exist or are not current conditions.

Coding Guidelines and Best Practices

- Hierarchical Condition Category (HCC) codes are cleared on December 31st each year and, if appropriate, need to be reassigned beginning January 1st to reflect the condition.

- Coding should be assigned to the highest degree of specificity or severity. Ensure that there is consistent and non-conflicting documentation regarding specificity and severity of the condition being addressed.

- Document all cause-and-effect relationships.

- Identify diagnoses that are current or chronic problems, rather than past medical history or previously resolved conditions.

The Centers for Medicare and Medicaid Services (CMS) uses a Hierarchical Condition Category (HCC) risk adjustment model to calculate patient risk scores to predict healthcare costs based on acuity and patient's health status.

Please note that diagnosis codes are included for reference only. Providers must refer to the currently published diagnosis codes to confirm accuracy and utilize their own clinical judgment in assessing diagnosis codes.

This document contains a selection of diagnosis codes. Not all codes are included. Please refer to the current coding books for additional codes and ensure that codes are assigned to the highest degree of specificity and severity.

The guidelines and recommendations outlined in this document are derived from the following sources:

American Medical Association. (2022). Appendix E: Centers for Medicare & Medicaid Services Hierarchical Condition Categories (CMS-HCC). *ICD-10-CM 2023: The Complete Official Codebook.*

Centers for Medicare and Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). (2023, April 1). *ICD-10-CM Official Guidelines for Coding and Reporting FY2023.*

Diabetes Mellitus (DM)

	Type 1	Type 2
DM without complications	E10.9	E11.9
DM with hyperglycemia	E10.65	E11.65
DM with kidney complications	E10.2	E11.2
DM with chronic kidney disease (CKD)	E10.22	E11.22
DM with CKD stage 3 unspecified[1]	E10.22 + N18.30	E11.22 + N18.30
DM with CKD stage 3a	E10.22 + N18.31	E11.22 + N18.31
DM with CKD stage 3b	E10.22 + N18.32	E11.22 + N18.32
DM with CKD stage 4	E10.22 + N18.4	E11.22 + N18.4
DM with CKD stage 5	E10.22 + N18.5	E11.22 + N18.5
DM with end-stage renal disease (ESRD)	E10.22 + N18.6	E11.22 + N18.6
DM with diabetic nephropathy	E10.21	E11.21
DM with unspecified diabetic retinopathy	E10.31	E11.31
» Code specifically as to type and designate	E10.3-	E11.3-
Diabetic peripheral angiopathy without gangrene	E10.51	E11.51
Diabetic peripheral angiopathy with gangrene	E10.52	E11.52
Diabetes mellitus with foot ulcer	E10.621	E11.621
» Code to identify site of ulcer	L97.4-, L97.5-	L97.4-, L97.5-

Nutritional Disorders

Morbid (severe) obesity due to excess calories	E66.01
Morbid (severe) obesity with alveolar hypoventilation	E66.2
Malnutrition	E46
Malnutrition, mild	E44.1
Unspecified severe protein-calorie malnutrition	E43
Moderate protein-calorie malnutrition	E44.0

Mental, Behavioral, and Neurodevelopmental

Bipolar disorder	F31.9
Bipolar II disorder	F31.81
Major depressive disorder (MDD), recurrent	F33.9
MDD, single episode, mild	F32.0
MDD, single episode, moderate	F32.1
MDD, single episode, severe, without psychotic feature	F32.2
MDD, single episode, severe, with psychotic feature	F32.3
MDD, single episode, in partial remission	F32.4
MDD, single episode, in full remission	F32.5
MDD, recurrent, severe, without psychotic features	F33.2
MDD, recurrent, severe, with psychotic features	F33.3

Urinary System

Kidney transplant status	Z94.0
Requiring dialysis[2]	Z99.2
Arteriovenous shunt AV[2]	I77.0
Acute renal failure, unspecified[3]	N17.9
CKD stage 1[4]	N18.1
CKD stage 2[4]	N18.2
CKD stage 3 unspecified[1]	N18.30
CKD stage 3a	N18.31
CKD stage 3b	N18.32
CKD stage 4	N18.4
CKD stage 5	N18.5
ESRD	N18.6
Hypertensive CKD stage 1 through 4, or unspecified	I12.9
Hypertensive CKD stage 5 or end-stage renal disease	I12.0

Digestive System Diseases

Alcoholic liver disease	K70.9
Hepatic failure, unspecified without coma	K72.90
Hepatic failure, unspecified with coma	K72.91
Chronic hepatic failure without coma	K72.10
Chronic hepatic failure with coma	K72.11
Hepatitis B, chronic	B18.1
Hepatitis C, chronic	B18.2
Hepatitis, autoimmune	K75.4
Cirrhosis of liver	K74.60
Cirrhosis of liver, alcoholic	K70.30
Cirrhosis, biliary	K74.5
Portal hypertension	K76.6
Esophageal varices	I85.00
Crohn's disease	K50.90
Ulcerative colitis	K51.90
Pancreatitis, chronic	K86.1

Respiratory Conditions

Asthma (BA)	J45.909
Bronchitis, chronic	J42
Bronchitis, chronic, simple	J41.0
COPD	J44.9
Emphysema	J43.9
Pulmonary fibrosis	J84.10
Chronic respiratory failure	J96.10