Chronic kidney disease documentation

To capture the full disease burden of a patient's kidney condition, follow the documentation guidelines below, as applicable.

Do document: Acute kidney injury or acute renal failure	*Do document:* Kidney disease stage
• Pre-renal, intrarenal, and post-renal injury. ○ *Ex.: Acute kidney failure with tubular necrosis* • Update acute diagnosis after acute event is concluded. • Renal insufficiency does not mean acute renal failure. **Do document:** Related conditions with CKD • A presumed causal relationship between hypertension and CKD exists, unless otherwise specified. • A presumed causal relationship between diabetes mellitus and CKD exists, unless otherwise specified. • A presumed causal relationship between hypertension, CKD, and heart disease.	• **Stage 1:** Kidney damage with normal or GFR >90 • **Stage 2:** Kidney damage with mild GFR (60-89) • **Stage 3a:** decrease in GFR 45-59 • **Stage 3b:** decrease in GFR 30-44 • **Stage 4:** Kidney damage with severe GFR 15-29 • **Stage 5:** Kidney failure GFR <15 • **End Stage Renal Disease:** (ESRD) GFR <15, requiring chronic dialysis. *Documenting GFR alone is not sufficient to determine the renal stage.* **Do document:** • Chronic kidney disease annually, at minimum. • Dialysis dependence and compliance status • Document kidney transplant status

*The CMS-HCC Model also incorporates additional relative factors for disease interactions. Certain combinations of diseases have been determined to increase the cost of care. For example, a patient with heart failure and kidney disease has higher expected costs than a patient that has only heart failure or a patient only has kidney disease. Disease interactions result in higher risk scores when the disease pairs are present. The model includes disease-disease interactions as well as disability-disease interactions.

References:

1. Centers for Medicare & Medicaid Services. ICD-10-CM Official Guidelines for Coding and Reporting (FY2024): https://ftp.cdc.gov/pub/Health_Statistics/NCHS/Publications/ICD10CM/2024-Update/ICD-10-CM-Guidelines-April-1%20FY2024.pdf pg. 48-49, 60-61.
2. Beckman, K. D. (2014, April). How to Document and Code for Hypertensive Diseases in ICD-10. American Academy of Family Physicians. https://www.aafp.org/pubs/fpm/issues/2014/0300/p5.html
3. Chaplain, S. (2021, February 1). Take the Guesswork out of Hypertensive Coding. American Academy of Professional Coders. https://www.aapc.com/blog/52789-take-the-guesswork-out-of-hypertension-coding/.