

# Hypertension (HTN), heart failure (HF) and chronic kidney disease (CKD) documentation

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

## Heart failure

### **Do document:**

Type and specificity

- Acute vs Chronic, updating diagnosis after acute episode(s)
- Indicate type; left, right, systolic diastolic.
- Compensated/controlled vs. decompensated/uncontrolled.
- Indicate cause if applicable.
  - *Ex: CHF due to pulmonary hypertension*

### **Do document:**

Cardiogenic shock

### **Do document:**

Cardiomyopathy and specificity

- Dilated, Restrictive, Hypertrophic, or Ischemic cardiomyopathy.
- Document a pulmonary embolism and heart failure connection when documenting Cor Pulmonale
- Document heart failure with pleural effusion if testing indicates causal relationship.
- Document pulmonary edema after heart failure when testing indicates a causal relationship.

### **Related Conditions with HF:**

- HTN

## Chronic kidney disease

### **Do document:**

Acute kidney injury or acute renal failure if that is applicable.

- Do document regarding pre-renal, intrarenal, and post-renal injury.
- *Ex: Acute kidney failure with tubular necrosis*
- Do update acute diagnosis after acute event is concluded.

### **Do document:**

Stage of kidney disease

- Stage 1, 2, 3a, 3b, 4, 5, or End Stage Renal Disease (ESRD)
- Document dialysis and dependence status.

### **Related conditions for CKD**

- HTN, DM

*\*Documenting GFR alone is not sufficient to determine the renal stage.*

## Hypertension

### **Do document:**

Type

- *Ex: Essential HTN vs Hypertensive heart disease*
- Update old terms such as “benign hypertension.”

### **Related conditions with HTN:**

- HF, CKD, heart disease, cerebrovascular disease

## All (Heart failure, chronic kidney disease and hypertension)

### **Do document:**

Conditions annually

### **Do document:**

Related conditions

- *Ex: Hypertensive heart disease*
- *Ex: HF due to stage IV CKD*
- Document if commonly linked conditions are **not** related
- If diagnosis is documented due to alternative cause, the assumed relationship condition is not related.

### **Do document:**

Tobacco status, use, abuse, dependence, exposure, or history of

For additional details on hypertension, heart failure, and chronic kidney disease you can find them here (insert links here)

For additional information on reporting diagnosis codes including coding guideline principles, you can find them here (insert link here)

\*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](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/>