

## Always make sure that you are using the current year ICD-10 codes

### Validated HCC Coding requires documenting:

- Diagnosis
- Status of Condition
- Plan of Action

### For example:

"CHF, stable, continue current meds"  
(document current medication member is taking for condition)

"Diabetic CKD III controlled, continue current meds, follow-up appointment and labs"

Once a Year, **Document Chronic Active Conditions** *commonly not documented*

**COAST** - Do NOT use the words "HISTORY OF" if patient has an active disease currently being treated.

**Chronic Dx:** CHF, COPD, DM, Residual effects of Stroke/CVA: I69. 0

**Ostomy:** Colostomy: Z93.3 / Cystostomy: Z93.50 / Ileostomy: Z93.2 / Gastrostomy: Z93.1

**Amputations:** including toes and lower limbs: Z89. 0

**Seizures/Epilepsy:** G40.90 0 / **Spinal Disorders:** Paraplegia: G82.20 / Quadriplegia: G82.50

**Transplants:** Stem cell, liver, heart, lung: Z94. 0

0 = **additional digit(s) required**

## COVID-19 Diagnosis Codes

Only confirmed diagnosis of coronavirus disease should be coded. Presumptive positive COVID-19 test result should be coded as confirmed.

### Not Confirmed COVID-19

- Z03.818** Possible exposure to other biological agents (ruled out after evaluation)
- Z11.52** Screening for COVID-19 (asymptomatic)
- Z20.822** Contact with and (suspected) exposure to COVID-19

### COVID-19 Signs and symptoms/Diagnosis not established

- R05.0 0** Cough Acute=1, Subacute=2, Chronic=3, Unspecified=9
- R06.02** Shortness of breath
- R50.9** Fever, unspecified
- R53.83** Other fatigue

### Confirmed/Positive COVID-19

- B97.29** Other coronavirus as the cause of diseases classified elsewhere

### Confirmed/Positive COVID-19

- U07.1** COVID-19
- D68.68** Other Specified Coagulation Defects (COVID-19 associated coagulopathy) (Effective 10/1/2023)
- D68.69** Other Thrombophilia (COVID-19 associated hypercoagulability) (Effective 10/1/2023)
- U09.9** Post COVID-19 condition, unspecified
- J12.82** Pneumonia due to coronavirus disease
- M35.81** Multisystem inflammatory syndrome Code first COVID-19, U07.1
- M35.89** Other specified systemic involvement of connective tissue
- Z86.16** Personal history of COVID-19

## Diabetes with Manifestations

Many codes are now combination codes. Please be sure to review your ICD 10 book to determine if a secondary code is required.

- E11.2 0** DMII with Renal Manifestations
- E11.22 + N18.0, N18.3 0** with CKD
- E11.3 0** DMII with Ophthalmic Complications
- E11.31 0** with Retinopathy
- to **E11.35 0**
- E11.4 0** DMII with Neurological Manifestations
- E11.40** Diabetic Neuropathy
- E11.43** Diabetic Autonomic Gastroparesis
- E11.5 0** DMII with Circulatory Disorders
- E11.51** with Peripheral Angiopathy without gangrene

- E11.6 0** DMII with Other Specified Complication
- E11.61 0** with Arthropathy
- E11.62 0** with Diabetic Ulcer
- E11.649** with Hypoglycemia
- E11.65** with Hyperglycemia
- E11.69** with Other Specified Complication
- \*Must document causal relationship with complication
- R73.03** Pre-Diabetes
- R73.09** Abnormal Glucose
- Z79.4** Long term use of insulin
- Z79.85** Long term use of injectable non-insulin antidiabetic drugs

## Cardiovascular - Do not code unstable Angina in the office (usually ER or INPT only). If CAD consider Angina if patient on B-Blocker, Ca++ Channel Blocker or Nitrate.

- I20.2** Refractory Angina
- I20.9** Angina
- I20.89** Other Forms of Angina Pectoris (Effective 10/1/2023)
- I21.9** MI (acute) NOS, <4 weeks old
- I25.112** CAD w/ Refractory Angina
- I25.119** CAD w/ unspecified Angina
- I25.2** Old myocardial infarction, >4 weeks old
- I25.709** CAD s/p CABG w/unspecified Angina

- I27.2 0** Pulmonary Hypertension
- I42.9 0** Cardiomyopathy
- I47.10** Supraventricular Tachycardia (PSVT), unspecified (Effective 10/1/2023)
- I47.20** Ventricular Tachycardia (VT), Unspecified
- I48.91** Atrial Fibrillation
- I49.5** Sick Sinus Syndrome (Sinoatrial dysfunction)
- I50.9 0** CHF
- Z79.01** Long term Anticoagulation

## Chronic Kidney Disease - Check GFR and Microalbuminuria at least twice a year.

- N18.1** CKD I GFR >90 with Microalbumin
- N18.2** CKD II GFR 60-89 with Microalbumin
- N18.3 0** CKD III GFR 30-59
- N18.30** CKD III Unspecified
- N18.31** CKD III a GFR 45-59
- N18.32** CKD III b GFR 30-44
- N18.4** CKD IV GFR 15-29
- N18.5** CKD V GFR <15
- N18.6** ESRD on Dialysis
- N25.81** Secondary Hyperparathyroidism, Renal
- Z91.15** Dialysis-Noncompliance
- Z91.A58** Caregiver's noncompliance with patient's renal dialysis for other reason (Effective 10/1/2023)
- Z99.2** Dialysis Status/presence of AV shunt

## Circulatory/Vascular

- I70.0** Aortic Atherosclerosis (as on CXR)
- I70.209** Atherosclerosis, Extremities (plaque is atherosclerosis)
- I71.40** Abdominal Aortic Aneurysm - AAA w/o rupture, unspecified
- I73.9** Peripheral Vascular Disease (PVD)
- I77.1** Tortuous Artery
- I77.819** Aortic Ectasia, unspecified site
- I82.5 0** Chronic DVT (on long term anticoagulation)
- I83.0 0** Venous Stasis Ulcer
- L89.9 0** Pressure Ulcer - Document site location and stage (II, III, IV)

## Dermatology

- C43. 0** Malignant Melanoma
- D03. 0** Melanoma in Situ
- D69.2** Senile Purpura
- D86.3** Sarcoidosis of skin
- L10.0** Pemphigus vulgaris
- Z85.820** H/O Malignant Melanoma

## Gastroenterology

- B18.2** Chronic Viral Hepatitis C
- K56.41** Fecal Impaction
- K70.9** Alcoholic Liver Disease
- K70.10** Alcoholic hepatitis without ascites
- K70.30** Alcoholic Cirrhosis
- K72. 0** End Stage Liver Disease
- K73.9** Chronic Hepatitis, unspecified

<b>Hematology</b> <b>D45</b> Polycythemia Vera <b>D47.3</b> Thrombocythemia <b>D61.8</b> ○ Pancytopenia <b>D69.6</b> Thrombocytopenia <b>D70.</b> ○ Neutropenia	<b>Immunodeficiency status due to underlying conditions</b> <b>D84.81</b> Immunodeficiency due to conditions classified elsewhere Excludes: HIV (B20, Z21) Specify underlying conditions such as: diabetes mellitus (E08-E13), malignant neoplasms (C00-C96), chromosomal abnormalities (Q90-Q99) <b>D84.821</b> Immunodeficiency due to drugs <b>D84.822</b> Immunodeficiency due to external causes
<b>Malnutrition</b> - Patients with CHF, COPD, Cancer, Depression and ill health are often malnourished. Do NOT report "abnormal weight loss, underweight, loss of appetite" when malnutrition should be considered.	
<b>E44.0</b> to <b>E46</b> Protein Calorie Malnutrition Wt loss of 5% in 3-6 months, Wt loss of 10% in 6 months <b>E88.A</b> Wasting disease (syndrome) due to underlying condition - wt loss of >10 % through muscle loss. (Effective 10/1/2023)	<b>R64</b> Cachexia - muscle wasting, poor grip strength, anorexia* *Code first underlying condition, if known
<b>Morbid Obesity</b> <b>E66.01</b> Morbid Obesity, due to excess calories (BMI ≥40)* <b>E66.2</b> Morbid (severe) obesity with alveolar hypoventilation  *Code also BMI	<b>Z68.3</b> ○ BMI 35 - 39.99 w/ comorbid conditions (must document causal relationship) Diabetes, HTN, Hyperlipidemia, CHF, CAD, DJD of knee/hip, Sleep apnea <b>Z68.4</b> ○ BMI 40 or greater
<b>Musculoskeletal</b> <b>M06.4</b> Inflammatory polyarthropathy <b>M12.08</b> Chronic postrheumatic arthropathy <b>M46.</b> ○ Inflammatory spondylopathies	<b>M46.1</b> Sacroiliitis (must document SI joint abnormality on imaging) <b>T84.84XA</b> Chronic pain in prosthetic joint (initial encounter)
<b>Neurology</b> - Do not code acute CVA (usually ER or INPT only).	
<b>G20.A</b> Parkinson's Disease without dyskinesia (Effective 10/1/2023) <b>G20.B</b> Parkinson's disease with dyskinesia (Effective 10/1/2023) <b>G20.C</b> Parkinsonism, Unspecified (Effective 10/1/2023) <b>G40.90</b> ○ Epilepsy <b>I69.</b> ○ Late Effect of CVA <b>I69.33</b> ○ Monoplegia Upper Limb <b>I69.34</b> ○ Monoplegia Lower Limb <b>I69.35</b> ○ Hemiplegia/Hemiparesis <b>I69.96</b> ○ Other Paralytic Syndrome <b>Z86.73</b> History of CVA - use when there are no late effects of the CVA	<b>Polyneuropathy in:</b> <b>G62.1</b> Alcoholic <b>G63</b> Other Diseases - Document a link - such as: ESRD, ESLD, HIV/AIDS, IBD, Malignancies, Pre-Diabetes) <b>M32.19</b> Lupus
<b>Oncology</b> - Document cancer as ACTIVE if: undergoing tx (including hormones like Tamoxifen/Lupron), waiting for tx, watchful waiting, refuses tx: <b>C00.</b> ○ to <b>D48.</b> ○	
<b>C77.</b> ○ to <b>C80.</b> ○ Secondary Malignant Neoplasm (Metastases) - Document by location of metastasis <b>C83.</b> ○ to <b>C88.</b> ○ LYMPHOMA documented as "IN REMISSION" is coded as active Do not code LEUKEMIA as "history of" rather as "IN REMISSION" <b>C91.</b> ○ to <b>C95.1</b> ○	<b>D3A.0</b> ○ ○ Benign neoplasms <b>Z85.00 - Z85.9</b> Use "HISTORY OF" codes for cancers that are cured/ show no evidence of disease <b>Cancer Related Conditions:</b> <b>I31.31</b> Malignant pericardial effusion in diseases classified elsewhere <b>J91.0</b> Malignant pleural effusion
<b>Ophthalmology</b> <b>H34.81</b> ○ ○ Central Retinal Vein Occlusion <b>H34.83</b> ○ ○ Tributary (branch) retinal vein occlusion	<b>H35.32</b> ○ Exudative Macular Degeneration <b>H43.1</b> ○ Vitreous Hemorrhage
<b>Psychiatric</b> - Document chronic lifetime conditions.	
<b>F20.</b> ○ Schizophrenia <b>Personality Disorders</b> <b>F50.</b> ○ ○ Anorexia Nervosa	<b>F31.</b> ○ Bipolar <b>F50.02</b> Bulimia Nervosa
<b>Major Depression</b> - Do NOT write "depression". Instead, document as "major depression" with a specific descriptor: mild, moderate, severe, partial or full remission.	
<b>F32.</b> ○ Single Episode	<b>F33.</b> ○ Recurrent, lifetime
<b>Drug Dependence</b> - Code for patients on chronic meds for treatment with maladaptive behavior. <b>Must document</b> at least 2 maladaptive behaviors to code "dependence," including desire, or unsuccessful effort to cut down, etc. Tolerance and withdrawal are to be used as criteria only if the patient is non-compliant or if they have chronic opiate use.	
<b>F11.2</b> ○ Opioid Dependence <b>F12.1</b> ○ Cannabis Abuse <b>F12.2</b> ○ Cannabis Dependence <b>F12.9</b> ○ Cannabis Use	<b>F13.2</b> ○ Benzodiazepines <b>Z79.891</b> Chronic Opiate Use
<b>Dementia</b> - Check MMSE/SLUMS	
<b>F02.80</b> Dementia in other diseases <u>without</u> behavioral disturbance <b>F02.818</b> Dementia in other diseases, unspecified severity, with other behavioral disturbance <b>F03.9</b> ○ Senile Dementia/Dementia with Depression <b>F03.90</b> Dementia <u>without</u> behavioral disturbance (unspecified)	<b>F03.918</b> Dementia, unspecified severity, with other behavioral disturbance <b>F03.90 + F05</b> Dementia with Psychosis (delusions, hallucinations) <b>G30.9</b> Alzheimer's <b>G30.9 + F02.8</b> ○ Dementia in Alzheimer's
<b>Respiratory</b> - Document to the highest specificity and include type of asthma or bronchitis.	
<b>J41.0</b> Simple Chronic Bronchitis (smokers cough) <b>J43.9</b> Emphysema <b>J44.89</b> Other Specified Chronic Obstructive Pulmonary Disease (Effective 10/1/2023) <b>J44.9</b> COPD <b>J45.50</b> Severe persistent asthma, uncomplicated <b>J82.81</b> Chronic eosinophilic pneumonia	<b>J84.10</b> Post inflammatory Pulmonary Fibrosis (interstitial scarring) Lung Granuloma <b>J96.10</b> Chronic Respiratory Failure - consider in COPD if Pulse Ox is <88% on room air <b>Z99.81</b> Long term Oxygen Use - be sure to document chronic pulmonary condition
<b>Urology</b> <b>E72.53</b> Hyperoxaluria (Calcium oxalate kidney stones) <b>T83.038</b> ○ Leakage of other urinary catheter <b>T83.098</b> ○ Mechanical complication of other urinary catheter	<b>T83.511</b> ○ Infection and inflammatory reaction due to indwelling urethral catheter