

PRESENTED BY HIGHMARK RISK ADJUSTMENT ACCURACY MANAGEMENT

Chronic Kidney Disease



Disclaimer

This presentation is the property of Highmark Inc., Highmark Health, and/or its subsidiaries (“Highmark”) and is proprietary and confidential and may not be recorded in any manner including, without limitation, audio, video, photograph, screenshot, or by any other means or in any other media. Broadcasting, publication, or sharing of these materials without Highmark’s express permission is strictly prohibited. This presentation is accurate as of the date it is presented but may change pursuant to regulatory requirements or in response to changing business needs. The information provided is intended to assist with support for the documentation accuracy of the diagnosis codes reported to Highmark. Providers should still reference official ICD-10-CM coding guidelines and coding manuals or electronic coding software for accurate reporting of compliant diagnosis codes. This presentation is not intended to situate Highmark as a provider of medical services or dictate the diagnosis, care, or treatment of patients. Your medical judgment remains independent with respect to all medically necessary care to your patients.

The following entities, which serve the noted regions, are independent licensees of the Blue Cross Blue Shield Association: Western and Northeastern PA: Highmark Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Choice Company, Highmark Health Insurance Company, Highmark Coverage Advantage Inc., Highmark Benefits Group Inc., First Priority Health, First Priority Life, Highmark Care Benefits Inc., Highmark Senior Health Company or Gateway Health Plan, Inc. d/b/a Highmark Wholecare. Central and Southeastern PA: Highmark Inc. d/b/a Highmark Blue Shield, Highmark Benefits Group Inc., Highmark Health Insurance Company, Highmark Choice Company, Highmark Senior Health Company or Gateway Health Plan, Inc. d/b/a Highmark Wholecare. Delaware: Highmark BCBSD Inc. d/b/a Highmark Blue Cross Blue Shield. West Virginia: Highmark West Virginia Inc. d/b/a Highmark Blue Cross Blue Shield, Highmark Health Insurance Company. Highmark Senior Solutions Company or Highmark Health Options West Virginia Inc. d/b/a Highmark Health Options. Western NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Cross Blue Shield. Northeastern NY: Highmark Western and Northeastern New York Inc. d/b/a Highmark Blue Shield. All references to “Highmark” in this document are references to the Highmark company that is providing the member’s health benefits or health benefit administration and/or to one or more of its affiliated Blue companies.

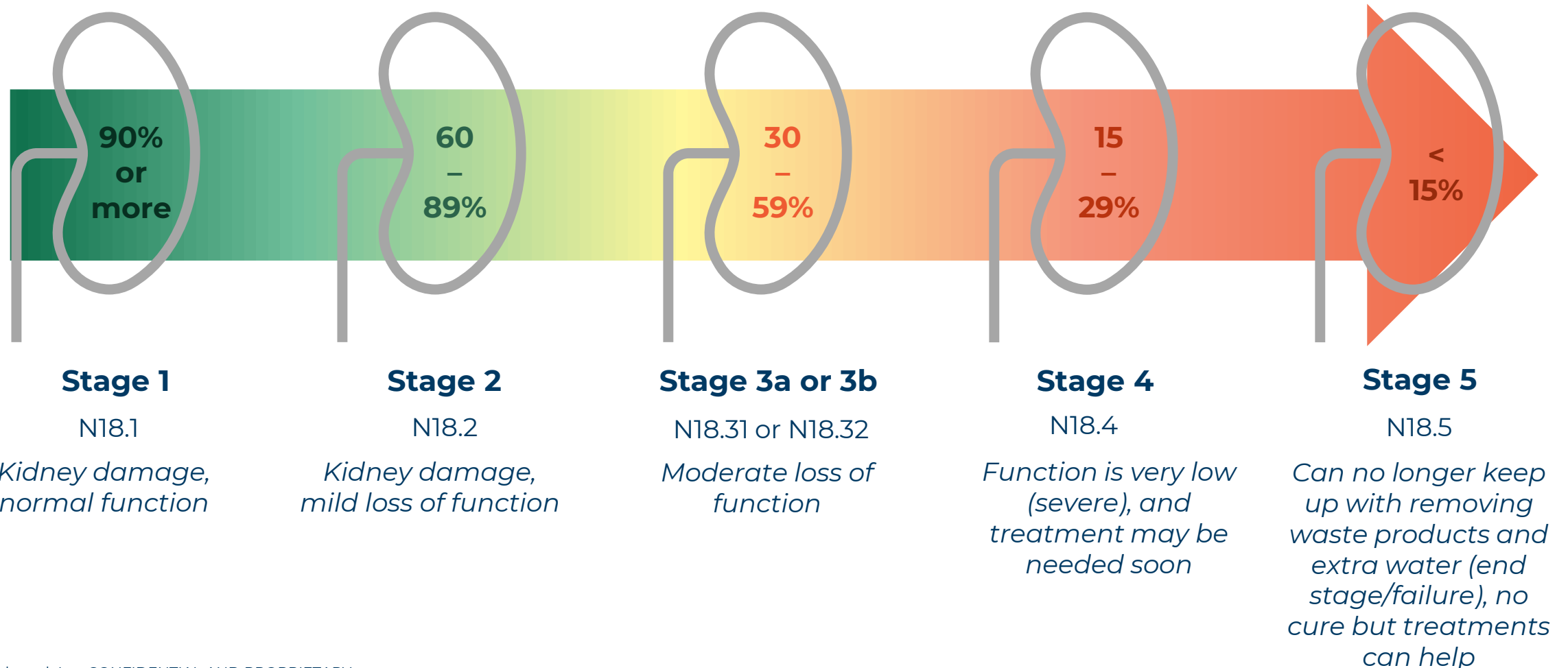
Availity is an independent company that contracts with Highmark to offer provider portal services.

Agenda

1. Overview of the condition
 2. Coding & documentation considerations
 3. Documentation example
 4. Additional resources
-








The Stages of CKD

Chronic Kidney Disease (CKD) is often referred to as a "silent killer" because it progresses slowly and often asymptotically. By the time noticeable symptoms appear, the disease has typically advanced significantly, making management difficult.



Coding Considerations

Note and code any associated:

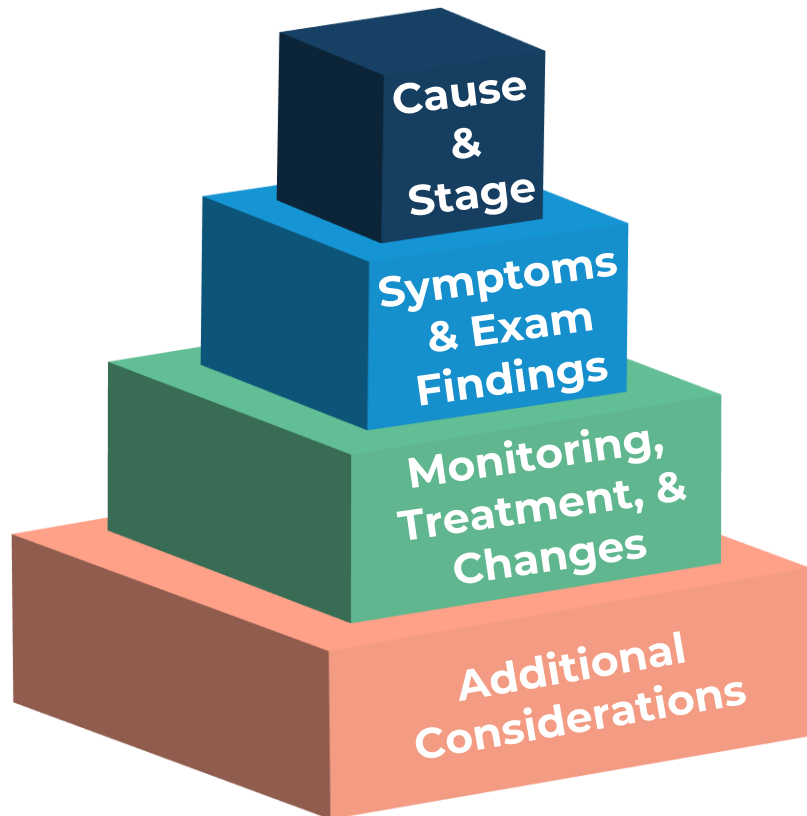
Diabetes 	+	Chronic Kidney Disease 	=	Diabetic chronic kidney disease E08.22, E09.22 E10.22, or E11.22	Use additional code to identify the stage of chronic kidney disease (N18.1 – N18.9)		
Hypertension 	+	Chronic Kidney Disease 	=	Hypertensive chronic kidney disease I12._	Use additional code to identify the stage of chronic kidney disease (N18.1 – N18.9)		
Hypertension 	+	Chronic Kidney Disease 	+	Heart Disease 	=	Hypertensive heart & chronic kidney disease I13._	Use additional code to identify the stage of chronic kidney disease (N18.1 – N18.9) & type of heart failure (I50.1 – I50.9)

Use additional code, if applicable, to identify: Associated Cachexia (E88.A), Kidney Transplant Status (Z94.0), Dependence on renal dialysis (Z99.2).

Refer to the current version of the ICD-10-CM Official Guidelines for Coding and Reporting, the ICD-10-CM Index to Diseases and Injuries, and the Tabular List of Diseases for a list of all ICD-10-CM codes and coding instructions.

Documentation Considerations

Thorough documentation of Chronic Kidney Disease (CKD) is essential. It enables accurate diagnosis, effective treatment planning, early intervention, and accurate risk assessment, ultimately leading to timely management and better patient outcomes. Additionally, proper documentation ensures accurate coding for billing and quality metrics.



State the **CKD stage** based on the eGFR and identify the **underlying condition** (e.g., *diabetes and hypertension*) causing the CKD.

Note **significant changes in kidney function or clinical status**, including **patient symptoms** (e.g., *fatigue, weakness, urine output changes*) and **physical exam findings** (e.g., *elevated blood pressure, edema*), along with **potential causes**.

Document **follow up plans and repeat testing schedules** to track progression, including **medications (with dosage) dietary modifications, blood pressure management, and nephrologist referrals** within the treatment plan.

Interpret and include all relevant **lab results** (e.g., *serum creatinine, eGFR*), and specify **dialysis type, frequency, and access site**.

Chronic Kidney Disease Example



History of Illness:

68-year-old female here for follow up of longstanding Diabetes with CKD 4. Managed with Meds. Recent diet and weight loss noted. **Current GFR 29, previous values May GFR 27, January GFR 25 shows no change in the current staging of CKD.**

Assessment & Plan:

Patient with **controlled diabetic chronic kidney disease, stage 4**. Return to office in 6 months with updated labs.

The clinician reviewed and interpreted the patient's GFRs to stage the CKD as stage 4. The clinician also linked the chronic kidney disease to the patient's diabetes.

Based on the documentation in the note, it is appropriate to code the condition as controlled diabetic chronic kidney disease, stage 4 (E11.22, N18.4).

Additional Resources

Documentation Best Practice Checklist



Annually assess all chronic conditions and document a plan for each one



Link medications to help establish ongoing treatment especially if the medication is used to treat multiple conditions.



Use the term “History of” before a condition if it no longer exists or has resolved



Validate patient reported findings



Code and document all coexisting conditions that require or affect patient care, treatment or management



Avoid using uncertain terms when a diagnosis has been confirmed for a patient



Choose the highest level of specificity when selecting an ICD-10 code



Keep problem list up to date by removing acute and one-time conditions

Highmark Provider Resource Center

KNOWLEDGE COLLEGE

15-minute on-demand courses on risk adjustment coding and documentation to help clinicians comply with CMS standards and ICD-10-CM guidelines

1. Log into Availity.
2. Navigate to the Provider Resource Center.
3. Locate “Resources and Education” in the menu bar and navigate to “Clinical Quality & Education”.
4. Select “Coding Education/HCC University”.

RISK ADJUSTMENT OVERVIEW

Review the foundations of what risk adjustment is, hierarchical condition categories, common errors, best practices and impacts to patient care



CODING & DOCUMENTATION CARDS

Reference cards to assist with documentation and coding according to CMS documentation standards and ICD-10-CM coding requirements



Have questions about risk adjustment?

**Want to share feedback or suggest topics
for future presentations?**

Email:

RiskAdjustmentCoding@Highmark.com