

Stage 3 chronic kidney disease added to CMS risk adjustment model: What you need to know

Diagnostic coding changes in the 2019 HCC model include the addition of chronic kidney disease (CKD) stage 3.

The five hierarchical categories associated with renal disease are:

- HCC 134 – Dependence on Renal Dialysis
- HCC 135 – Acute Renal Failure
- HCC 136 – Chronic Kidney Disease (Stage 5)
- HCC 137 – Chronic Kidney Disease, Severe (Stage 4)
- HCC 138 – Chronic Kidney Disease, Moderate (Stage 3)

Complete and consistent documentation and coding is essential to accurate diagnosis coding and HCC assignment. Documentation and coding related to chronic kidney disease (CKD) should specify the following:

- **Stage of kidney disease**
 - Stage 3, 4 & 5 CKD, End Stage Renal Disease & dialysis status are associated with an HCC
- **Cause of CKD (if known)**
 - Diabetes – document and code diabetic CKD, include the stage of CKD
 - Hypertension – ICD 10 guidelines assume a cause and effect relationship between CKD and hypertension. Both conditions should be documented and reported using a combination code that includes both conditions.
 - Report “hypertensive chronic kidney disease”
 - A second code should be reported to identify the stage of CKDIf the kidney disease and hypertension are not related, documentation should clearly state the conditions are **unrelated** and the stage of CKD and hypertension should be coded separately.
 - Other condition – specify the condition as the cause in your documentation and code it on your claim for service
- **Is the patient post kidney transplant**
- **Is the patient experiencing acute kidney failure on top of CKD**
- **Pertinent lab & clinical findings**
- **Management of CKD**
- **Dialysis status –**
 - Type of dialysis
 - Does the patient have a shunt

Please note that documenting and coding CKD unspecified stage is not associated with an HCC, even if your patient has stage 3, 4 or 5 CKD. Specificity makes a difference in documentation and coding.