

Diagnosis coding of heart failure

Accurate ICD-10-CM diagnosis code assignment for heart failure requires the following elements:

- Specify the **type**:
 - **Systolic (HFrEF)**
 - **Diastolic (HFpEF)**
 - **Combined**
 - **Other**
- Specify **acuity**:
 - Acute
 - Chronic
 - Acute on chronic
- When clinically supported, **link associated conditions**: “hypertensive heart disease with chronic systolic heart failure” or “heart failure due to ischemic cardiomyopathy.”
- Include **key management notes** (e.g., GDMT regimen, recent EF, monitoring plan).
 - **Important**: Reflect any **recent symptoms or exacerbations** to show ongoing management.
- Avoid “history of” terminology unless truly resolved.
- **End-of-year tip**: Ensure heart failure was addressed during a 2026 encounter and coded at the highest level of specificity.

General HCC and risk adjustment reminders

- **Reassess chronic conditions annually**: Each active condition must be evaluated, documented and coded at least once per calendar year.
- **Be specific**: Avoid unspecified codes. Instead of “CKD,” document “CKD stage 3b.” Instead of “diabetes,” use “Type 2 diabetes mellitus with neuropathy.”
- **Include clinical relevance**: Note how each condition affects management or decision-making.
- **Problem list analysis**: Review and update the list regularly; remove resolved conditions or update to “history of,” add active diagnoses and ensure accuracy.

Year-end actions

- Verify patients’ condition’s stage, type and complication are clearly documented.
- Consider updating documentation templates to prompt for specificity (e.g., CKD stage __, HF type __).
- Confirm documentation reflects active management and treatment.
- Check any coding and quality dashboards that may be used to ensure all chronic conditions are captured.

Complete and accurate documentation supports quality care, patient outcomes and appropriate reimbursement. Thank you for your continued partnership in ensuring the best outcomes for our patients.

For additional information on these and other conditions, please refer to our [provider resources site](#).