

Aledade CMS-HCC Educational Reference

This guidance is intended to help healthcare providers accurately and completely code and/or bill services that, with proper documentation, may be reimbursable by a state or Federal healthcare program. This information is a tool for addressing common billing and coding issues, which are explained more fully in the CPT® Manual and the official, CMS-approved ICD-10 guidelines. You should review the CPT® Manual as well as the official, CMS-approved, ICD-10 guidelines and not rely exclusively on this informational material. Each healthcare provider bears full responsibility for its own billing and coding, as well as compliance with all applicable Federal and state laws and regulations. Consider weighted as well as unweighted codes.



Diabetes and Complications

ICD-10 codes listed below are for E11: Diabetes Mellitus Type 2. Other Diabetes types use the same suffixes for each root listed below. E08: DM Due to underlying condition E09: DM, Medication Induced E10: DM Type 1 e.g. E10.65 = DMT1 w/ hyperglycemia Avoid using E11.9 DMT2 uncomplicated when complications are clearly present. ICD10 guidelines assume a causal relationship between DM and most chronic complications. See below for most common DM complications. * to use E11.69 the condition must be documented and linked to the DM.

- E11.65 DMT2 w/ hyperglycemia
- E11.21 DMT2 w/ nephropathy
- E11.22 DMT2 w/ chronic kidney disease
- E11.69 DMT2 w/ other spec. complications *
- E11.29 DMT2 w/ other diabetic kidney complication
- DMT2 w/ unspec. diabetic retinopathy w/ macular edema
- E11.311 DMT2 w/ unspec. diabetic retinopathy w/o macular edema
- E11.319 DMT2 with stable proliferative diabetic retinopathy, unspecified eye *
- E11.36 DMT2 w/ diabetic cataract
- E11.39 DMT2 w/ other diabetic ophthalmic complication
- E11.40 DMT2 w/ diabetic neuropathy, unspec.
- E11.49 DMT2 w/ other diabetic neurological complic.
- E11.51 DMT2 w/ peripheral angiopathy w/o gangrene *
- DMT2 w/ diabetic peripheral angiopathy w/ gangrene*
- E11.52 DMT2 w/ other circulatory complication
- E11.59 DMT2 w/ diabetic neuropathic arthropathy
- E11.610 DMT2 w/ other diabetic arthropathy
- E11.618 DMT2 w/ diabetic dermatitis
- E11.620 DMT2 w/ foot ulcer *
- E11.621 DMT2 w/ other skin ulcer *
- E11.622 DMT2 w/ other skin complications
- E11.628 DMT2 w/ periodontal disease
- E11.630 DMT2 w/ hypoglycemia w/o coma
- E11.649

Major Depressive Disorder

More specific codes are available than F32.9 MDD Single Episode NOS. If

Accurate, choose the most specific code below.

- F32.0 MDD, single episode, mild
- F32.1 MDD, single episode, moderate
- F32.9 MDD, recurrent, mild
- F33.1 MDD, recurrent, moderate
- F33.2 MDD, recurrent severe w/o psychotic features
- F33.3 MDD, recurrent, severe w/ psychotic symptoms
- F33.9 MDD, recurrent, unspec.
- F33.40 MDD, recurrent, in remission, unspec.
- F32.4 MDD, single episode, in partial remission
- F33.41 MDD, recurrent, in partial remission
- F32.5 MDD, single episode, in full remission
- F33.42 MDD, recurrent, in full remission
- F33.8 Other recurrent depressive disorder
- F39 Unspec. mood disorder

If making the diagnosis of MDD combined with GAD remember to document both conditions as specifically as possible.

Obesity

E66.01 requires a BMI of at least 40 or BMI > 35 w/ co-morbid condition such as COPD, DM, HTN, HLD, OSA, OA, etc. The BMI Z code can only be used as a secondary diagnosis if relevant to the primary diagnosis for the encounter (obesity OR other condition with clinical significance to BMI reporting including but not limited to: diabetes mellitus, hypertension, obstructive sleep apnea, hyperlipidemia. BMI Z code is not to be reported as a stand-alone code per ICD10 guidelines).

- E66.01 Morbid (severe) obesity due to excess calories
- E66.2 Morbid (severe) obesity w/ alveolar hypoventilation
- Z68.41 Body mass index (BMI) 40.0-44.9, adult
- Z68.42 Body mass index (BMI) 45.0-49.9, adult
- Z68.43 Body mass index (BMI) 50-59.9, adult
- Z68.44 Body mass index (BMI) 60.0-69.9, adult
- Z68.45 Body mass index (BMI) 70 or greater, adult

Alcohol and Substance Use, Abuse, Dependence

When evaluating a patient with an Alcohol or Substance Use Disorder, use ICD-10 WHO criteria to distinguish between use, abuse, and dependence

- F10: Alcohol
- F11: Opioid
- F12: Marijuana
- F13: Sedative, hypnotic or anxiolytic
- F14: Cocaine
- F15: Stimulants
- F16: Hallucinogens

- F17: Nicotine
- F18: Inhalants
- F19: Psychoactive

Alcohol

- F10.120 Alcohol abuse w/ intoxication, uncomplic.
- F10.19 Alcohol abuse w/ unspec. alcohol-induced d/o
- F10.20 Alcohol dependence, uncomplic.
- F10.21 Alcohol dependence, in remission
- F10.29 Alcohol dependence w/ unspec. alcohol-induced d/o
- F10.929 Alcohol use, unspec. w/ intoxication, unspec.
- F10.94 Alcohol use, unspec. w/ alcohol-induced mood d/o
- F10.988 Alcohol use, unspec. w/ other alcohol-induced d/o
- F10.99 Alcohol use, unspec. w/ unspec. alcohol-induced d/o

Opioids

- F11.10 Opioid abuse, uncomplic.
- F11.11 Opioid abuse, in remission
- F11.20 Opioid dependence, uncomplic.
- F11.21 Opioid dependence, in remission
- F11.988 Opioid use, unspec. w/ other opioid-induced d/o
- F11.99 Opioid use, unspec. w/ unspec. opioid-induced d/o

Sedatives, Hypnotics, Anxiolytics

- F13.10 Sed, hyp, or anxiolytic abuse, uncomplic.
- F13.11 Sed, hyp, or anxiolytic abuse, in remission
- F13.20 Sed, hyp, or anxiolytic dependence, uncomplic.
- F13.21 Sed, hyp, or anxiolytic dependence, in remission
- F13.99 Sed, hyp, or anxiolytic use, unspec. w/ unspec. sed, hyp, or anxiolytic-induced d/o

Behavioral Health

- F6 Personality d/o, unspec.

and Blood-forming Organs Diseases

- D57.1 Sickle-cell disease w/o crisis
- D57.3 Sickle-cell trait
- D59.0 Drug-induced autoimmune hemolytic anemia
- D61.811 Other drug-induced pancytopenia
- D61.818 Other pancytopenia
- D68.69 Other thrombophilia
- D68.9 Coagulation defect, unspec.
- D69.6 Thrombocytopenia, unspec.
- D70.0 Congenital Neutropenia
- D84.9 Immunodeficiency, Unsp

Circulatory System Diseases

- I20.0 Unstable angina
- I20.9 Stable Angina (Angina pectoris)
- I24.9 Acute ischemic heart disease, unspec.
- I25.119 AHSD of native coronary artery w/ unspec. angina pectoris

Cerebrovascular Disease

Remember that the ICD10 for CVA should only be reported during the initial episode/hospital stay. When evaluating a patient status post CVA, accurately document residual deficits if present.

- Monoplegia of upper limb following cerebral infarction affecting unspec. side
- 169.339 Monoplegia of lower limb following cerebral infarction affecting unspec. side
- 169.349 Hemiplegia and hemiparesis following cerebral infarction affecting unspec. side
- 169.359 Other paralytic syndrome following cerebral infarction affecting unspec. side

Specified Heart Arrhythmia

- I47.9 Paroxysmal tachycardia, unspec
- I48.0 Paroxysmal atrial fib.
- I48.20 Chronic atrial fib.Unsp.
- I48.92 Unspec. atrial flutter
- I49.2 Junctional premature depolarization

Congestive Heart Failure

- I11.0 Hypertensive heart disease w/ heart failure
- I42.0 Dilated cardiomyopathy
- I50.20 Unspec. Systolic heart failure
- I50.22 Chronic systolic heart failure
- I50.32 Chronic diastolic heart failure
- I50.21 Acute systolic heart failure
- I50.23 Acute diastolic heart failure
- I50.9 Heart failure, unspec.
- I50.810 Right heart failure, unspec.

COPD

- J41.0 Simple Chronic Bronchitis
- J42 Unspec. Chronic Bronchitis
- J43.9 Emphysema, Unspec.
- J44.1 COPD w/ (acute) exacerbation
- J96.10 Chronic respiratory failure, unspec. w/ hypoxia or hypercapnia
- J44.9 COPD, Unspec.

Licensed clinicians should rely on their independent medical judgment to decide whether suggested diagnoses are relevant. Wellness visits are a great opportunity to review and code all appropriate diagnoses. In any visit, ensure appropriate medical evaluation and documentation of the diagnosis to justify billing the payer. In some instances a more specific code may be available to show laterality or a more specific location on the body. These codes are just a guide.

* Indicates a single code that carries weight in 2 categories.

Aledade CMS-HCC Educational Reference

This guidance is intended to help healthcare providers accurately and completely code and/or bill services that, with proper documentation, may be reimbursable by a state or Federal healthcare program. This information is a tool for addressing common billing and coding issues, which are explained more fully in the CPT® Manual and the official, CMS-approved ICD-10 guidelines. You should review the CPT® Manual as well as the official, CMS-approved, ICD-10 guidelines and not rely exclusively on this informational material. Each healthcare provider bears full responsibility for its own billing and coding, as well as compliance with all applicable Federal and state laws and regulations. Consider weighted as well as unweighted codes.



Fibrosis of Lung and Other Chronic Lung Disorder		Z99.2	Dialysis Status	C92.00	AML, not having achieved remission	L89.93	Pressure ulcer of unspec. site, stage 3
J84.10	Pulmonary Fibrosis			C92.01	AML, in remission	L89.94	Pressure ulcer of unspec. site, stage 4
J60	Coal Workers pneumoconiosis			C92.02	AML, in relapse	L89.95	Pressure ulcer of unspec. site, unstageable
Eye Disease		N18.30	CKD stage 3, Unspec. GFR 59-30	C95.90	Leukemia, unspec. not having achieved remission	L98.491	Non-pressure chronic ulcer of skin of other sites limited to breakdown of skin
H43.10	Vitreous hemorrhage, unspec. eye	N18.31	CKD stage 3a, GFR 45-59	C95.91	Leukemia, unspec., in remission	L98.492	Non-pressure chronic ulcer of skin of other sites w/ fat layer exposed
Macular Degeneration		N18.32	CKD stage 3b GFR 30-44	C95.92	Leukemia, unspec., in relapse	L98.493	Non-pressure chronic ulcer of skin of other sites w/ necrosis of muscle
H35.3220	Exudative age-related macular degeneration, left eye, stage unspec.	N18.4	CKD, stage 4 (severe) GFR 15-29	R64	Cachexia	L98.498	Non-pressure chronic ulcer of skin of other sites w/ other specified severity
H35.3290	Exudative age-related macular degeneration, unspec. eye, stage unspec.	N18.5	CKD stage 5 GFR <15	D84.9	Immunodeficiency, unspec.	L98.499	Non-pressure chronic ulcer of skin of other sites w/ Unspec. Severity
Gastrointestinal System		N18.6	End stage renal disease	Respiratory System Diseases			
K50.90	Crohn's disease, unspec., w/o complications	Z99.2	Dependence on renal dialysis	G20	Parkinson's disease		
K51.90	Ulcerative colitis, unspec., w/o complications	N17.9	Acute kidney failure, unspec.	G30.9	Alzheimer's dz unspec	173.9	Peripheral vascular disease, unspec.
K73.9	Chronic hepatitis, unspec.	Z91.15	Patient's noncompliance w/ renal dialysis	G35	Multiple sclerosis	170.0	Atherosclerosis of aorta
K86.0	Alcohol-induced chronic pancreatitis	Musculoskeletal System and Connective Tissue Diseases		G40.409	SZ d/o w/o status epilepticus	170.1	Atherosclerosis of renal artery
K86.1	Other chronic pancreatitis	M00.9	Pyogenic arthritis, unspec.	G31.2	Degeneration of nervous system due to alcohol	170.209	Unspec. atherosclerosis of native arteries of ext, unspec. Ext
K70.9	Alcoholic liver disease, unspec.	M05.9	Rheumatoid arthritis w/ rheumatoid factor, unspec.	F01.50	Vascular dementia, unspecified severity, w/o behavioral disturbances, psychotic disturbances, mood disturbance, and anxiety	170.219	Atherosclerosis of native arteries of ext w/ intermittent claudication, unspec. Extremity
K74.5	Biliary cirrhosis, unspec.	M06.9	Rheumatoid arthritis, unspec.	F01.511	Vascular dementia, unspecified severity, w/ agitation	170.25	Atherosclerosis of native arteries of other ext w/ ulceration *
K74.60	Unspec. cirrhosis of liver	M31.5	Giant cell arteritis w/ polymyalgia rheumatica	F02.80	Dementia in other diseases classified elsewhere, unspecified severity, w/o behavioral disturbance, psychotic disturbance, mood disturbance and anxiety	177.9	D/o of arteries and arterioles, unspec.
I85.00	Esophageal varices w/o bleeding	M32.9	Systemic lupus erythematosus, unspec.	F02.811	Dementia in other dx classified elsewhere, unspecified severity, w/ agitation		
K72.10	Chronic hepatic failure w/o coma	M35.3	Polymyalgia rheumatica	F03.90	Unspec. dementia, unspec. severity, w/o behavioral disturbance, psychotic disturbance, mood disturbance and anxiety		
K76.6	Portal hypertension	M45.9	Ankylosing spondylitis of unspec. sites in spine	F03.911	Unspec. dementia, unspec. severity, with agitation		
Z93.4	Other artificial openings of gastrointestinal tract status	M86.10	Other acute osteomyelitis, unspec. site	F04	Amnesic d/o due to known physiological condition		
Z94.4	Transplant status	M86.30	Chronic multifocal osteomyelitis, unspec. Site	G81.10	Spastic hemiplegia affecting unspec. side		
Liver Disease		Neoplasms		G81.90	Hemiplegia, unspec. affecting unspec. side		
B18.9	Chronic viral hepatitis, unspec.	ICD10 guidance instructs Neoplasms to be coded as active as long as treatment is directed at the site, including chemotherapy, suppressive therapy, and adjuvant therapy. After treatment has completed, 'history of' is appropriate to code.		G82.20	Paraplegia, unspec.		
B20	Human immunodeficiency virus [HIV] disease	C18.9	Malignant neoplasm of colon, unspec.	G82.50	Quadriplegia, unspec.		
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status	C34.90	Malignant neoplasm of unspec. part of unspec. bronchus or lung	G95.20	Unspec. cord compression		
J15.8	Pneumonia due to other specified bacteria	C50.919	Malignant neoplasm of unspec. site of unspec. female breast	Skin and Subcutaneous Tissue Disease			
J18.1	Lobar pneumonia, unspec.	C61	Malignant neoplasm of prostate	L97.209	Non-pressure chronic ulcer of unspec. calf w/ unspec. Severity		
Renal Disease		C90.00	Multiple myeloma not having achieved remission	L97.309	Non-pressure chronic ulcer of unspec. ankle w/ unspec. Severity		
I12.0	Hypertensive CKD w/ stage 5 CKD or end stage renal disease	C90.01	Multiple myeloma in remission				
I13.11	Hypertensive heart and CKD w/out heart failure, w/ stage 5 CKD, or end stage renal disease	C90.02	Multiple myeloma in relapse				
I13.2	Hypertensive heart and CKD w/ heart failure, and w/ stage 5 CKD, or end stage renal disease *	C91.00	ALL not having achieved remission				
N28.0	Ischemia and infarction of kidney	C91.01	ALL, in remission				
Z93.6	Urostomy Status	C91.02	ALL, in relapse				

Licensed clinicians should rely on their independent medical judgment to decide whether suggested diagnoses are relevant. Wellness visits are a great opportunity to review and code all appropriate diagnoses. In any visit, ensure appropriate medical evaluation and documentation of the diagnosis to justify billing the payer. In some instances a more specific code may be available to show laterality or a more specific location on the body. These codes are just a guide.

* Indicates a single code that carries weight in 2 categories.