Molina Healthcare Coding Tips
Chronic Kidney Disease

Welcome to the Molina Healthcare Coding Institute.

Molina Healthcare is committed to supporting your clinical practice. Please take a moment to review this HCC Pearl.

Documentation and coding of Chronic Kidney Disease (CKD) should be as specific as possible. The presence of End-Stage Renal Disease (ESRD) and the dialysis status is essential in reporting this condition. Documenting the exact stage of CKD requires identifying at least two abnormal markers of kidney damage or two abnormal GFRs persisting for three months or more.

Coding CKD requires the stage, status, and treatment plan.

Remember if CKD is due to Diabetes, document the link between these conditions and select both codes that fully describe the condition.

If a provider has documented both CKD and Hypertension, a coder can assume a relationship between these conditions and select a code from range 403.00 to 403.91 for the Hypertension plus the CKD code.

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Have Questions?
Contact: **Ramp@MolinaHealthcare.com**

What are the Common Diagnostic Distinctions of Kidney Disease?

- » Dialysis Status ("Is the patient on dialysis?")
- » Acute vs. Chronic
- » Chronic Kidney Disease, Stages 1 - 5 and End-Stage Renal Disease

What are the ICD-9 Codes used for CKD?

- » CKD, Stage I - 585.1
- » CKD, Stage II - 585.2
- » CKD, Stage III - 585.3
- » CKD, Stage IV - 585.4
- » CKD, Stage V - 585.5
- » ESRD - 585.6

What does complete documentation look like?

- » Stage of CKD
- » Pertinent lab findings (e.g. GFR, Microalbumin)
- » Status of condition (e.g. stable, worsening, etc.)
- » Treatment plan (e.g. monitor, refer to specialist, etc.)

Acceptable Documentation

- » 70-year-old male seen for Hypertensive **CKD stage III.** *Assessment:* GFR is abnormal *(Coded as 403.90 and 585.3, member's GFR is being monitored and is being sent to specialist for better control)* *Plan:* Referred to nephrologist
- » 68-year-old African American male here today for follow-up on his **Dialysis for ESRD**. *Assessment:* Improving *(Coded as 585.6 and V45.11, the fact that the member is on Dialysis is already enough to pick up both codes)* *Plan:* Continue current care

Incomplete Documentation

- » 68-year-old female followed up by the Nephrologist for her kidney disease. *Assessment:* Uncertain status *(Provider failed to indicate if the condition is chronic, therefore we can only code to 593.9 which is not a CMS HCC)* *Plan:* No change

When do I use V-Codes?

- » V45.11 - Dialysis status
- » V45.12 - Noncompliance with renal dialysis
- » V42.0 - Kidney Transplant status

Remember:

- » Link Associated Conditions:
  - *250.40 DM w/renal manifestations*
  - *585.4 CKD4 due to diabetes mellitus*
  - *Both diagnosis codes should be present to capture this data.*