Documentation and Coding Tips

Chronic Kidney Disease

A review of the patient's diagnostic studies, pertinent clinical findings and the stage of CKD must be documented to code the condition.

Specify When Documenting:

- Underlying cause, if known.
- Stage and severity (include the GFR results, if available):
 - Stage I, N18.1-Normal or slightly increased GFR (>/= to 90)
 - Stage II, N18.2-Mild kidney disease decreased GFR (60-89)
 - Stage III, N18.30-Moderate kidney disease, unspecified decreased GFR (30-59)
 - Stage III, N18.31-Moderate kidney disease 3a decreased GFR (45-59)
 - Stage III, N18.32-Moderate kidney disease 3b decreased GFR (30-44)
 - Stage IV, N18.4-Severe kidney disease decreased GFR (15-29)
 - Stage V, N18.5-Kidney failure GFR <15 (note acute or chronic and cause, if known), & End-Stage Renal Disease, N18.6

Note-If both a stage and ESRD are documented, assign code N18.6 only.

Do not assign CKD codes based on GFR results alone.

Assign N18.9 Chronic kidney disease, unspecified, if the stage of CKD is not documented.

• Presence/Complications:

- AV fistula or shunt for dialysis
- Complication due to renal dialysis access device, implant or graft (i.e. embolism, hemorrhage, infection, occlusion, pain)

Associated diagnoses/conditions:

- Document any additional or secondary conditions that may be present
- Document any cause and effect relationship between CKD and other conditions

Treatment:

- Dialysis dependence
- Acute or chronic hemodialysis or peritoneal dialysis
- Transplant status
- Use of immunosuppressants

Documentation & Coding Examples

Non-specific documentation example:

Patient seen today for CKD follow up. Repeated CMP today to ensure stability.

Assign code: N18.9 Chronic kidney disease, unspecified.

Specific documentation example:

Patient has five-year history of CKD Stage 3 but, based on trending GFR's, is now diagnosed with Stage 4 CKD. I am referring her to a nephrologist.

Assign code: N18.4 Chronic kidney disease, stage 4.