

## Status Codes

Status codes are conditions that may not require constant managing, but still contribute to the patient's overall health status. These should be documented and coded every year.

### Statuses:

- Asymptomatic HIV infection status: [Z21](#)
- Long-term (current) use of insulin: [Z79.5](#)
- Dependence on renal dialysis: [Z99.2](#)
- Patient's noncompliance with renal dialysis: [Z91.15](#)

### Artificial Opening Status:

- Artificial openings of urinary tract: [Z93.6](#)
- Colostomy: [Z93.3](#)
- Cystostomy: [Z43.50](#)
- Gastrostomy: [Z93.1](#)
- Ileostomy: [Z93.2](#)
- Other artificial openings of digestive tract: [Z93.4](#)
- Tracheostomy: [Z93.0](#)

### BMI:

Code the nutritional status first:

- BMI 40.0-44.9, adult: [Z68.41](#)
- BMI 45.0-49.9, adult: [Z68.42](#)
- BMI 50.0-59.9, adult: [Z68.43](#)
- BMI 60.0-69.9, adult: [Z68.44](#)
- BMI 70 or greater, adult: [Z68.45](#)

## Status Codes Cont.

**Amputations**—acquired absence of:

- *Right great toe:* [Z89.411](#)
- *Left great toe:* [Z89.412](#)
- *Other right toe(s):* [Z89.421](#)
- *Other left toe(s):* [Z89.422](#)
- *Right leg below knee:* [Z89.511](#)
- *Left leg below knee:* [Z89.512](#)
- *Right leg above knee:* [Z89.611](#)
- *Left leg above knee:* [Z89.612](#)

### Transplant status:

- Heart transplant status: [Z94.1](#)
- Kidney transplant status: [Z94.0](#)
- Lung transplant status: [Z94.2](#)
- Stem cell transplant status: [Z94.84](#)

### TIPS:

- Acute stroke and TIA should ONLY be coded in the acute setting. Once the patient is discharged, it becomes a 'history of' code.
- Remember the 'causal relationship' of some condition such as diabetes, chronic kidney disease, hypertension, etc.
- All conditions should be addressed once a year.
- Myocardial Infarction becomes an 'old MI' (I25.2) after 4 weeks.

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Reference: OPTUM360 ICD-10-CM 2020

# Risk Adjustment Pocket Guide

### **Elements required for risk adjustment review:**

- Face-to-face visit with patient or video and audio for telehealth visits
- Patient's first name, last name, and date of birth
- Date of service
- Legible signature with credentials

### **Supporting Documentation:**

- **Monitor:** signs and symptoms, disease progression/regression
- **Evaluate:** review labs/tests, relevant physical exam
- **Assess:** status update, discussion/counseling
- **Treat:** medication adjustment/refill, referral to specialist

### **Examples:**

- "Diabetes— reviewed blood sugar log"
- "COPD— stable today"
- "Morbid Obesity—discussed diet and exercise"



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## Chronic Kidney Disease

- Acute Renal Failure: **N17.9**
- Acute Kidney Disease: **N17.9**
- Chronic Kidney Disease-Stage III (Moderate): **N18.3**
- Chronic Kidney Disease-Stage IV (Severe): **N18.4**
- Chronic Kidney Disease-Stage V: **N18.5**
- Chronic Kidney Disease, unspecified: **N18.9**
- End Stage Renal Disease (ESRD): **N18.6**
  - Use additional code to identify dialysis status **Z99.2**
- Unspecified Kidney Disease: **N19**

**Tips:**

  - when both ESRD and CKD-V are documented, code only the ESRD
  - Chronic Kidney Disease– stage V requiring chronic dialysis **N18.6**

## Causal Relationship Coding

Hypertension has a causal relationship with Chronic Kidney Disease and Congestive Heart Failure. This means that when Hypertension is documented with CHF or CKD the combination code of Hypertensive Heart Disease (I11.-) or Hypertensive Chronic Kidney Disease (I12.-) should be used in place of I10. A combination code for the causal relationship would not be used if the provider states that they are not related.

## Dementia

- Dementia in other diseases w/o behavioral disturbance: **F02.80**
- Dementia in other diseases w/ behavioral disturbance: **F02.81**
- Unspecified dementia w/o behavioral disturbances: **F03.90**
- Unspecified dementia w/ behavioral disturbances: **F03.91**

## Depression

- Major Depressive Disorder, single episode, Mild: **F32.0**
- MDD, single episode, moderate: **F32.1**
- MDD, single episode, severe: **F32.2**
- MDD, single episode, unspecified: **F32.9**
- MDD, recurrent, mild: **F33.0**
- MDD, recurrent, moderate: **F33.1**
- MDD, recurrent, severe: **F33.2**
- MDD, recurrent, unspecified: **F33.9**

## Diabetes with Complications

By using causal relationship codes a physician can properly code for the patient's burden of illness. These codes should not be used if the physician has clearly documented the conditions are not related.

- Amyotrophy: **E11.44**
- Arthropathy: **E11.618**
- Autonomic (poly)neuropathy: **E11.43**
- Cataract: **E11.36**
- Charcot's joints: **E11.610**
- Chronic kidney disease: **E11.22**
  - Use additional code for stage of CKD (**N18.1-N18.6**)

## Diabetes with Complications Cont.

- Dermatitis: **E11.620**
- Foot ulcer: **E11.621**
  - Use additional code for site of ulcer (**L97.4-L97.5**)
- Gangrene: **E11.52**
- Gastroparesis: **E11.43**
- Gastroparalysis: **E11.43**
- Glomerulonephrosis, intracapillary: **E11.21**
- Glomerulosclerosis, intercapillary: **E11.21**
- Hyperglycemia: **E11.65**
- Hyperosmolarity: **E11.00**
- Hypoglycemia: **E11.649**
- Ketoacidosis: **E11.10**
- Kidney complications: **E11.29**
- Kimmelsteil-Wilson disease: **E11.21**
- Mononeuropathy: **E11.41**
- Myasthenia: **E11.44**
- Necrobiosis lipidica: **E11.620**
- Nephropathy: **11.21**
- Neuralgia: **E11.42**
- Neuropathic arthropathy: **E11.610**
- Neuropathy: **E11.40**
- Ophthalmic complication: **E11.39**
  - Use an additional code to identify complication ex: glaucoma
- Oral complication: **E11.638**
- Periodontal disease: **E11.630**
- Peripheral angiopathy: **E11.51**
  - With gangrene: **E11.52**
- Polyneuropathy: **E11.42**
- Renal complication: **E11.29**
- Renal tubular degeneration: **E11.29**
- Retinopathy: **E11.319**
  - With macular edema: **E11.311**
  - Nonproliferative: **\*E11.329-** see below for 7th character
  - Proliferative: **\*E11.359-** see below for 7th character
- Skin ulcer: **E11.622**

\*requires a 7th character: 1= right eye 2=left eye