

# Chronic kidney disease

## Documentation and coding: Individual & Family Plans

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**For coding education questions**, email [CignaHealthcareHCPEducation@CignaHealthcare.com](mailto:CignaHealthcareHCPEducation@CignaHealthcare.com).

It's important to accurately document and code diagnoses when submitting claims for your patients with Cigna Healthcare-administered coverage. This helps ensure your diagnosis and coding practices comply with all applicable legal requirements,<sup>1</sup> while enabling us to provide our customers with the benefits and resources they need. For additional information and resources, visit the Cigna Healthcare Individual & Family Plans page at [CignaforHCP.com/IFP](https://CignaforHCP.com/IFP).

*The information that follows is designed to provide guidance for the documentation and coding of claims for your patients with chronic kidney disease. It is not meant to replace your judgment when caring for your patients.*

### Definition

Chronic kidney disease (CKD) is defined as an estimated glomerular filtration rate (eGFR) < 60 ml/min/1.73m and/or markers of kidney damage for at least three months.<sup>2</sup>

In clinical practice, the most common tests for CKD include the eGFR from the serum creatinine concentration using the CKD Epidemiology Collaboration (CKD-EPI) equation and albuminuria from the urinary albumin-creatinine ratio (uACR).<sup>2</sup>

It is recommended that providers proactively identify and manage early-stage CKD to reduce the risk of disease progression and associated complications.

### Measuring kidney function

The two key markers for CKD are urine albumin and eGFR. To screen for CKD:<sup>3</sup>

- Assess urine albumin excretion to diagnose and monitor [kidney damage](#). Screen using a spot uACR.
- Calculate eGFR from stable serum creatinine levels to assess [kidney function](#). Use the Modification of Diet in Renal Disease equation or the CKD-EPI equation.

### Decision tree

- Determine the duration of abnormal GFR and/or indicators of kidney function.<sup>3</sup>
- Consider the context (e.g., patient's age, additional diagnoses, exposure to nephrotoxic substances).
- Assess laboratory values (e.g., complete blood count, Vitamin D).
- Stage CKD to assist in clinical management, including risk stratification for disease progression and development of complications. The staging criteria include disease cause, albuminuria category, and GFR category.
- Use linking terms such as "due to" or "complicated by" for comorbid conditions.
- Use ICD-10-CM<sup>4</sup> code Z99.2 to indicate dependence on dialysis.

### Kidney function table of reference<sup>3</sup>

#### eGFR as a measure of kidney function:

eGFR (ml/min per 1.73m)	Level of kidney function
> 90	Stage 1: Kidney damage with normal or elevated GFR
60–89	Stage 2: Kidney damage with mildly decreased GFR
45–59	Stage 3a: Mildly to moderately decreased GFR
30–44	Stage 3b: Moderately to severely decreased GFR
15–29	Stage 4: Severely decreased GFR
< 15	Stage 5: Kidney failure

#### ACR as a marker for kidney function:

ACR	Level of kidney function
< 30 mg/g	Normal
30–300 mg/g	Microalbuminuria
> 300 mg/g	Microalbuminuria

**Note:** Kidney damage referenced in stages 1 and 2 corresponds to a functional assessment in the form of a urine albumin and sediment assessment or through a renal imaging study to document reduced kidney volume, reduction in cortical thickness, and cysts. For stage 3 and beyond, a functional assessment is not required.

## Chronic kidney disease (CKD)

ICD-10 code	Description	Documentation tips
<b>N18.1</b>	CKD stage 1 (GFR>90)	Tie treatment of causative condition to CKD.
<b>N18.2</b>	CKD stage 2 (GFR 60–89)	
<b>N18.31</b>	CKD stage 3a (GFR 45–59)	
<b>N18.32</b>	CKD stage 3b (GFR 30–44)	
<b>N18.4</b>	CKD stage 4 (GFR 15–29)	
<b>N18.5</b>	CKD stage 5 (GFR <15)	End-stage renal disease (ESRD) with GFR value 15 ml/min or less not yet requiring chronic dialysis
<b>N18.6</b>	CKD stage 6: ESRD; requiring chronic dialysis	Use additional code to identify dialysis status (Z99.2). Put diagnosis in chart.
<b>N18.9</b>	CKD, unspecified	Document cause and treatment.
<b>D63.1</b>	Anemia in CKD	Code first underlying CKD (N18.-).
<b>E08.21</b>	Diabetes mellitus due to underlying condition with diabetic nephropathy	
<b>E08.22</b>	Diabetes mellitus due to underlying condition with diabetic CKD	Use additional code to identify stage of CKD (N18.1–N18.6).
<b>E09.21</b>	Drug or chemical-induced diabetes mellitus with diabetic nephropathy	
<b>E09.22</b>	Drug or chemical-induced diabetes mellitus with diabetic CKD	Use additional code to identify stage of CKD (N18.1–N18.6).

ICD-10 code	Description	Documentation tips
<b>E10.21</b>	Type 1 diabetes mellitus with diabetic nephropathy	
<b>E10.22</b>	Type 1 diabetes mellitus with CKD	Use additional code to identify stage of CKD (N18.1–N18.6).
<b>E11.22</b>	Type 2 diabetes mellitus with diabetic CKD	Use additional code to identify stage of CKD (N18.1–N18.6).
<b>E83.5-</b>	Disorders of calcium metabolism	Add 5th character when applicable.
<b>I12.0</b>	Hypertensive CKD with stage 5 CKD or ESRD	Use additional code to identify stage of CKD (N18.5, N18.6).
<b>I12.9</b>	Hypertensive CKD with stages 1–4 CKD or unspecified CKD	Use additional code to identify stage of CKD (N18.1–N18.4, N18.9).
<b>I13.0</b>	Hypertensive heart and CKD with heart failure and stages 1–4 CKD or unspecified CKD	Use additional code to identify: <ul style="list-style-type: none"> <li>Type of heart failure (I50–I50.9)</li> <li>Stage of CKD (N18.1–N18.4, N18.9).</li> </ul>
<b>I13.10</b>	Hypertensive heart and CKD without heart failure	Use additional code to identify stage of CKD (N18.1–N18.6, N18.9).
<b>I13.11</b>	Hypertensive heart and CKD without heart failure with stage 5 CKD or ESRD	Use additional code to identify stage of CKD (N18.5, N18.6).
<b>I13.2</b>	Hypertensive heart and CKD with heart failure and stage 5 CKD or ESRD	Use additional code to identify: <ul style="list-style-type: none"> <li>Type of heart failure (I50–50.9).</li> <li>Stage of CKD (N18.5–N18.6).</li> </ul>
<b>N25.0</b>	Renal osteodystrophy	
<b>N25.81</b>	Secondary hyperparathyroidism of renal origin	
<b>N25.89</b>	Other disorders resulting from impaired renal tubular function	

- 1 Diagnosis inaccuracies that are not addressed can result in administrative sanctions and potential financial penalties.
- 2 Satyanarayana R. Vaidya, et al. "Chronic Renal Failure." National Institutes of Health. 24 October 2022. Retrieved from [https://www.ncbi.nlm.nih.gov/books/NBK535404/#:~:text=Chronic%20kidney%20disease%20\(CKD\)%20is%20defined%20as%20kidney%20damage%20or,till%20stages%20IV%20and%20V.](https://www.ncbi.nlm.nih.gov/books/NBK535404/#:~:text=Chronic%20kidney%20disease%20(CKD)%20is%20defined%20as%20kidney%20damage%20or,till%20stages%20IV%20and%20V.)
- 3 "Identify & Evaluate Patients with Chronic Kidney Disease." National Institute of Diabetes and Digestive and Kidney Diseases. Retrieved 10 July 2023 from <https://www.niddk.nih.gov/health-information/professionals/clinical-tools-patient-management/kidney-disease/identify-manage-patients/evaluate-ckd.>
- 4 International Classification of Diseases, 10th Revision, Clinical Modification.