

## Home Health ICD-9/ICD-10 Alert

### Reader Questions: Know When It's Safe To Assume

Question: A colleague of mine says that ICD-9 allows us to assume a link between diabetes and renal failure, so we don't need a physician's documentation to report the kidney disease as a manifestation. But I thought that the assumption was actually appropriate with chronic kidney disease (CKD) and hypertension. Which of us is correct?

-- New Jersey Subscriber

**Answer:** There is no assumed link between diabetes and renal failure. You must have documentation that diabetes caused the kidney disease in order to report a cause-and-effect relationship between these two conditions.

However, there is an assumed relationship between hypertension, and chronic kidney disease. If a patient has diabetic chronic kidney disease and hypertension then you would code for the patient as follows:

- 250.40 (Diabetes with renal manifestations; type II or unspecified type, not stated as uncontrolled);
- 403.90 (Hypertensive chronic kidney disease; unspecified; with chronic kidney disease stage I through stage IV, or unspecified); and
- 585.9 (Chronic kidney disease, unspecified)