Hypertension

High blood pressure, also called hypertension, is a common condition that occurs when the force of blood against the artery walls is high enough that, over time, it can cause damage or lead to health problems like heart disease.

There are two factors that determine blood pressure: the amount of blood the heart pumps and the amount of resistance to blood flow in the arteries. Higher blood pressure is the result of greater amounts of blood being pumped by the heart and narrowing arteries.²

Types

The two types of hypertension are essential (primary) hypertension and secondary hypertension. In most cases, high blood pressure develops gradually and is not due to any specific cause. This type is called essential (primary) hypertension, it is the most common type of hypertension.

Other people develop high blood pressure due to an underlying condition. This is known as secondary hypertension, it tends to appear suddenly and causes higher blood pressure readings than essential (primary) hypertension.

Treatment

Adopting a healthy lifestyle can help in the treatment of hypertension. When lifestyle changes aren’t enough, medications may be recommended, such as, beta blockers, diuretics, ACE (angiotensin-converting enzyme) inhibitors, and calcium channel blockers.

Essential Hypertension

In ICD-9, a fourth digit was required to specify the type of essential (primary) hypertension as: 401.0 Malignant, 401.1 Benign, or 401.9 Unspecified. ICD-10 drops the previous reference to benign and malignant hypertension, as the terms were considered antiquated. Consequently, only one ICD-10 code now encompasses all three previous designations for essential hypertension in ICD-9:

- 110 (no HCC) Essential Hypertension

New ICD-10 Coding Guidance

Per ICD-10-CM Official Guidelines for Coding and Reporting (FY 2017), “The classification presumes a causal relationship between hypertension and heart involvement and between hypertension and kidney involvement, as the two conditions are linked by the term “with” in the Alphabetic Index. These conditions should be coded as related even in the absence of provider documentation explicitly linking them, unless the documentation clearly states the conditions are unrelated. For hypertension and conditions not specifically linked by relational terms such as “with,” “associated with” or “due to” in the classification, provider documentation must link the conditions in order to code them as related.”²

Hypertensive Heart Disease

In ICD-10, there are two base codes for hypertensive heart disease:

- I11.0 (HCC 85) with heart failure
- I11.9 (no HCC) without heart failure

An additional code is required to identify the type of heart failure from the I50 (HCC 85) series.

Hypertensive CKD

In ICD-10, there are two base codes for hypertensive CKD:

- I12.0 (HCC 136) stage V or End Stage Renal Disease (ESRD)
- I12.9 (no HCC) stage I-IV or unsp.

An additional code is required to identify the stage of CKD from the N18 series. Only more severe stages of CKD are included in the CMS-HCC Model such as stage IV (N18.4, HCC 137), stage V (N18.5, HCC 136), and ESRD (N18.6, HCC 136). If CKD requires chronic dialysis, it is coded as ESRD with an additional code to identify dialysis status (Z99.2, HCC 134).

Hypertensive Heart and CKD

In ICD-10, category I13 for hypertensive heart disease and CKD are numerically arranged by the degree of CKD rather than the presence or absence of heart failure. These combination codes require additional coding from the N18 series to identify the stage of CKD. Those including heart failure also require coding from the I50 (HCC 85) series to identify the type of heart failure.


Coverage provided by Amerigroup, Inc. Reference the ICD-10-CM codebook, CMS-HCC Risk Adjustment Model V23, and AHA Coding Clinic for complete code sets and official coding guidance. It is not guaranteed that the information supplied is without defect. Any redistribution or other use is strictly forbidden.

Volume 3, Issue 1, January 2016
Last Revised: April 2018