

## **Hypertension**

# Clinical overview, ICD -10 CM and documentation tips for providers

**Hypertension or high blood pressure** is when a force against the blood vessels walls are consistently high. If it is untreated, it may cause health problems such as heart disease, kidney disease, stroke, and other conditions.

#### **Types of Hypertension**

- Primary (essential) hypertension (I10) Usually there is no identifiable cause of high blood pressure. This type of high blood pressure develops over time.
- Hypertensive crisis (I16.0 to I16.9)-Blood pressure reading that measures higher than 180/120 mm Hg.
- Hypertensive Chronic Kidney Disease (112.0 to 112.9)- Hypertension is one of the most common cause of chronic kidney disease.
- Hypertensive Heart Disease (I11.0 to I11.9) Heart conditions such as Ischemic Heart Disease, Heart Failure, and left ventricular hypertrophy can be caused by high blood pressure.
- Pulmonary hypertension (127.0- 127.9)- High blood pressure in the arteries leading from the heart to the lungs.
- Secondary hypertension- High blood pressure can be caused by an underlying condition.
  This type tends to cause higher blood pressure than primary hypertension. There are various conditions and medications that can lead to this, including:
  - Thyroid problems (115.8)
  - Adrenal gland tumors (115.2)
  - Side effects of certain medications- birth control pills, cold remedies, decongestants, OTC pain relievers and prescription drugs
- Illegal drugs, such as cocaine and amphetamines

#### Signs and Symptoms:

- √ Headaches
- ✓ Shortness of breath
- ✓ Nose bleeds

These symptoms are usually not specific and occur when someone has reached a severe life-threatening condition.

#### **Risk Factors**

- Age- 64 in men and 65 in women
- Family History
- Obesity
- No physical activity
- Tobacco dependence/addiction
- High Sodium diet
- Low potassium in diet
- Excessive alcohol use
- Stress
- Chronic conditions- kidney disease, diabetes, and sleep apnea, etc.

### **Diagnostic Testing**

- Medical history and physical exam
- Blood pressure measuring
- Electrocardiogram (EKG or ECG)-
- Echocardiogram
- Ambulatory monitoring
- Lab tests

#### **Treatment**

- Healthy heart exercise and diet
- Diuretics
- Angiotensin-converting enzyme (ACE) inhibitors

- Angiotensin II receptor blockers (ARBs)
- Calcium channel blockers
- Alpha blockers
- Alpha-beta blockers
- Beta blockers
- Aldosterone antagonists
- · Renin inhibitors
- Vasodilators
- Central-acting agents

#### **Clinical Documentation and Coding Tips**

- Always document it to the highest level of specificity
- SOAP Notes documentation tips:
  - Subjective Document the presence or absence of any current symptoms or conditions related to hypertension.
  - Objective Document signs and symptoms and labs/test results related to hypertension.
  - Assessment Document diagnostic statements that are compatible with the ICD-10 nomenclature to the highest specificity.
  - Plan Document and link all medications used to treat hypertension. Detail any referrals, consultations, labs, or diagnostic testing requested.

#### Medicare Hierarchal Condition Categories (HCC)

Hierarchical condition category (HCC) coding is a risk-adjustment model designed to estimate future health care costs for patients. This model filters ICD-10CM codes into diagnosis groups (DxGs), and then into Conditions Categories (CCs). Hierarchies or families are placed to gain an HCC numeric code, which translates to a risk adjustment factor (RAF) value. Each diagnosis code found in the model, as a stand-alone diagnosis code or within a family or hierarchy, carries a value through RAF, but this value can change if the patient has other influencing factors such as ESRD, hospice, or are dual-eligible. Families or hierarchies set a value based on severity of illness, with more severe diagnoses carrying

the overall risk score for that family. Diagnoses within families or hierarchies are inclusive of one another, while any additional diagnoses from other hierarchies or stand-alone diagnoses are additive and increase each patient's overall risk score.

Essential (primary) Hypertension is a chronic condition that do not falls within any HCC category, however when it is in combination with heart disease, CHF and/or CKD will fall within the categories "Congestive Heart Failure" (HCC 85) and Chronic kidney disease, stage 5 (HCC 136) with its correspondent average RAF Score of 0.371 and 0.260 respectively.

#### **Coding Hypertension**

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ICD-	TU CODE	. Code i	Description

110	Essential Hypertension			
116.0	Hypertensive Urgency			
116.1	Hypertensive Emergency			
116.9	Hypertensive disease crisis, unspecified			
111.0	Hypertensive disease with heart failure			
111.9	Hypertensive disease with heart failure			
112.0	Hypertensive disease with stage 5 CKD or ESRD			
112.9	Hypertensive disease with stage 1 to 4 CKD			
113.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease			
113.10	Hypertensive heart and CKD without heart failure, with stage 1 through stage 4 CKD, or unspecified chronic kidney disease			
113.11	Hypertensive CKD with stage 5 CKD or end stage renal disease			
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney			

disease, or end-stage renal disease

#### Always remember,

- Elevated blood pressure diagnosis without a diagnosis of hypertension is R03.0
- Hypertensive urgency and emergency should be documented if patient condition is current.
- There is a presumed relationship between hypertension and heart involvement, unless the medical record clearly indicates the conditions are unrelated.
- There is a presumed relationship between hypertension and kidney involvement, unless the medical record clearly indicates the conditions are unrelated.
- Hypertension with heart conditions classified to 150, 151.4-151.7, 157.89, 151.9 are assigned to code from category 111 Hypertensive heart disease.
- Use additional codes from category heart failure (150) to identify the type of heart failure.
- Hypertensive Chronic Kidney disease are assigned 112 when hypertension and CKD (N18.X) are present. This should not be coded if document clearly states both conditions are unrelated.
- CKD (N18.X) should be used as a secondary code to identify the stage of CKD.
- Hypertensive Heart and Chronic Kidney Disease (I13.X) are assigned with both heart and kidney involvement.
- Appropriate code for CKD (N18.X) and Heart failure (I50.X) would be assigned to identify level, so diagnosis is coded to highest specificity.
- Hypertensive Cerebrovascular Disease the first diagnosis code to assign is from categories 160 to 169, then the appropriate hypertension code.
- Hypertensive Retinopathy- Background retinopathy and retinal vascular changes (H35.0) should use code from category I10-I15, HTN to include the systemic hypertension.
- Hypertension is coded secondary due to an underlying condition. One code to identify the underlying condition and one code from category I15 to identify the hypertension.

- Hypertensive crisis coding is documented as an urgency, code also identified hypertensive disease (110-115).
- Pulmonary Hypertension (I27.X) is classified to code category I27, Other pulmonary heart diseases. Secondary pulmonary hypertension is coded from category (I27.1, I27.2).