General Gastroenterology Codes				
DIAGNOSES	ICD-10 Code Root	Sub Codes	Hierarchical Condition Category (HCC)	
Colorectal Cancer	C18.X	C18.1-C18.9	Colorectal, Bladder, and Other Cancers	
Esophageal Cancer	C15.X	C15.3-C15.5, C15.8, C15.9	Lung and Other Severe Cancers	
Crohn's Disease	K50.X	K50.0-K50.919	Inflammatory Bowel Disease	
Ulcerative Colitis	K51.X	K51.0-K51.919		
Cirrhosis of Liver	K70.X K74.X	К70.30-К70.9, К74.3-К74.69	Cirrhosis of Liver	
Portal Hypertension	K76.6	-	End-Stage Liver Disease	
Esophageal Varices	185.X	l85.00-l85.11		
Autoimmune Hepatitis	K75.4	-	Chyania Hanakikia	
Chronic Viral Hepatitis	B18.X	B18.0-B18.2, B18.8, B18.9	Chronic Hepatitis	
Malnutrition	E4X	E40, E41, E42, E43, E44.0, E44.1, E45, E46	Protein-Calorie Malnutrition	
Morbid Obesity	E66.X	E66.2, E66.01 & Z68.4145	Morbid Obesity	
Chronic Vascular Disorder of the Intestine	K55.X	K55.1, K55.8, K55.9	Vascular Disease	
Chronic Pancreatitis	K56.X	K56.o-K56.7	Chronic Pancreatitis	
Gastric Ulcer	K25.X	K25.1-K25.2, K25.5-K25.6		
Duodenal Ulcer	K26.X	K26.1- K26.2, K26.5- K26.6		
Gastrojejunal Ulcer	K28.X	K28.1-K28.2, K28.5-K28.6		
Iron Deficiency Anemia	D50.X	D50.0, D50.1, D50.8, D50.9	Non-Specific Symptom Codes and Non-HCC Codes	
Fatty (change of) Liver	K76.o	-		
Microscopic Colitis	K52.X	K52.831, K52.832		
Noninfective Gastroenteritis and Colitis	K52.9	-		
Angiodysplasia of Colon	K55.X	K55.20, K55.21		
Angiodysplasia of Stomach and Duodenum	K31.X	К31.819, К31.811		
Irritable Bowel Syndrome	K58.X	K58.0-K58.2, K58.8-K58.9		
Gastro-Esophageal Reflux Disease	K21.X	K21.0, K21.9		
Gastritis and duodenitis	K29.x	K29.00-K29.91		
Barrett's Esophagus	K22.X	K22.70, K22.710, K22.711, K22.719		
Constipation	K59.X	K59.00-K59.04, K59.09		
Gastrointestinal hemorrhage	K92.2	-		

Please remember, the diagnoses chosen must meet MEAT criteria, one of the following has to be supported: M-Monitored, E-Evaluated, A-Assessed, T-Treated. Documentation must be complete and accurate before selecting the specific diagnosis code, and always choose the most specific/or combination ICD-10 CM code(s) to fully describe the patient condition(s).

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Special thanks to Specialty Solutions and Portland Gastroenterology for their participation in this project. For more information visit: http://mainehealthaco.org/cdi

### Monitored

Disease progression/ regression, ordering labs/rads/diagnostic tests

Review of logs (blood sugar, BP)

# Evaluated

Reviewing labs/ test results
Relevant physical examination
Medication/ treatment effectiveness

M.E.A.T.

#### Assessed

Stable, improving, worsening, etc
Exacerbation of condition
Discussion/ counseling
Relevant record review

#### Treated

Referral to specialist
Adjusting, refilling, prescribing
medication

- •1 element required per DX code; more is better
- •These factors help providers to establish the presence of a diagnosis during an encounter ("if it wasn't documented, it doesn't exist")
- •Review problem list, document as 'current' or 'active'
- •Do not use 'history of' for chronic conditions unless is fully resolved. Instead use 'stable

### Limbs

Hemiplegia, Amputation, Paralysis status

### Organs

Dialysis status, Transplant status, respiratory failure

L.O.S.T.

## Secondary Dx

diabetic nephropathy+chronic kidney disease stage IV, tie conditions togeter (because of/ related to/ secondary to)

## Tubes/Tummy

any "ostomy", morbid obesity

\*other commonly lost conditions: substance abuse. HIV. mental health severity

- Document anything that impacts your medical decision making to reflect the complexity and level of care provided.
- Documentation improves care, coverage, costs and compliance.
- •other commonly lost conditions: substance/alcohol abuse, AIDS or HIV, mental health severity and status

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