

HCC Risk Adjustment Documentation and Coding



Combination Codes

A quick reference guide to assist with accurate, complete documentation and coding that reflects the true nature of a patient's current health status at the highest level of specificity. Per ICD-10 official guidelines reporting and coding. *“The importance of consistent, complete documentation in the medical record cannot be over-emphasized. Without such documentation, accurate coding cannot be achieved.”*

Prevalent Diseases: Common combinations include Diabetes, Hypertensive Heart & Chronic Kidney Disease, and Atherosclerotic Heart Disease with Angina.

Documentation and Coding Tips

What Is a Combination Code?

A **combination code** is one **ICD-10-CM code** that captures **multiple clinical elements**, such as:

- **Two diagnoses, OR**
- **A diagnosis with a related manifestation, OR**
- **A diagnosis with an associated complication**

How to Identify a Combination Code

- Look up terms and sub terms in the **Alphabetic Index**
- Review **includes/excludes notes** in the **Tabular List**

Coding Rules

- Use the **single combination code** when it fully describes the condition(s).
- Do **NOT** assign multiple codes if one combination code captures all documented elements.

If the combination code **lacks the needed specificity**, assign an **additional secondary code**.

Clinical Examples of Combination Codes

1. Diabetes Mellitus (E08–E13)

Diabetes codes already include:

- **Type of diabetes**
- **Body system affected**
- **Complication impacting that body system**

Provider & Coder Essentials

- Assign **as many diabetes combination codes as needed** to reflect **all complications present**.

- Sequence is based on the **reason for the encounter**.
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2. Hypertensive Heart & Chronic Kidney Disease (I13)

Category **I13** combines:

- **Hypertension**
- **Heart disease**
- **Chronic kidney disease (CKD)**

Coding Rules

- Use an **I13 code** when **all three conditions** are documented.
 - **Add:**
 - **A heart failure code (I50)** if heart failure is present
 - **A CKD stage code (N18)** to identify CKD stage
 - If both **acute renal failure** and **CKD** are present, code **both**.
 - For patients with HTN + heart disease + CKD, **DO NOT code from I11 or I12**—use **I13 only**.
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3. Atherosclerotic Heart Disease with Angina (I25.11- / I25.7-)

These codes include:

- **Coronary artery disease (CAD)**
- **Angina pectoris**

Coding Rules

- No separate angina code is needed—it's already included.
 - CAD + angina = **causal link assumed**, unless the documentation states otherwise.
 - If the patient is admitted for an **acute MI**, sequence the **AMI first**.
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4. Combination Codes That Include Symptoms

Some ICD-10-CM codes include:

- **A definitive diagnosis**
- Common **associated symptoms**

Coding Rule

- **Do not code the symptom separately** when it is already included in the combination code.

Provider-Friendly Takeaways

- Combination codes simplify documentation by capturing **multiple elements in one code**.
- They improve **accuracy, specificity, and risk capture**.
- Always check the Alphabetic Index and Tabular List to confirm whether a **combination code exists**.
- When the combination code **doesn't fully describe** the clinical scenario, add supporting secondary codes.
- Be sure that all documentation is clear and accurately reflects the patient's conditions.

References:

- [Optum EncoderPro.com for Payers - Home \(encoderprofp.com\)](https://www.encoderpro.com/)
- [ICD-10-CM Official Guidelines for Coding and Reporting \(PDF\)](#)

For questions, please contact the Blue Cross NC Provider Engagement Risk Team via email at BCBSNCRiskAdj@bcbsnc.com.