

Hepatic Encephalopathy

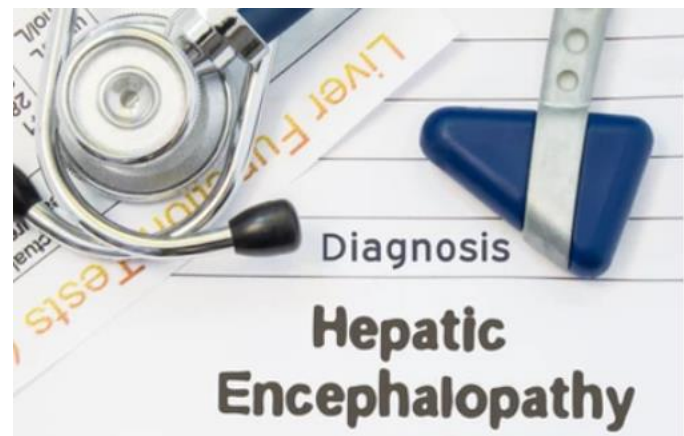
CMS_HCC_V28 Model Updates

At Healthfirst, we are committed to helping providers accurately document and code their patients' health records. **This tip sheet is intended to assist providers and coding staff with the documentation and ICD-10-CM selection, along with the Centers for Medicare & Medicaid Services (CMS) Hierarchical Condition Category (HCC) Version 28 Model Updates, on services submitted to Healthfirst—specifically for Hepatic Encephalopathy.** It provides information from industry sources about proper coding practice. However, this document does not represent or guarantee that Healthfirst will cover and/or pay for services outlined. Coverage decisions are based on the terms of the applicable evidence of coverage and the provider's participation agreement. This includes the determination of any amounts that Healthfirst or the member owes the provider.

Hepatic encephalopathy occurs when toxic substances that are normally eliminated by the liver build up in the blood and reach the brain. This condition results in deterioration of brain function in individuals with severe liver disease.

Coding Tips

- Two codes should be reported for documented hepatic encephalopathy—code **K76.82** and a code for the underlying liver disease described as “without coma.”
- If hepatic coma is documented, the only code reported is the one for the underlying liver disease described as “with coma.”
- Glasgow coma scale codes should be reported only in conjunction with traumatic brain injury codes.



Documentation and Coding

ICD-10 Codes and Descriptions

K70.40 Alcoholic hepatic failure without coma	K70.41 Alcoholic hepatic failure with coma	K72.10 Chronic hepatic failure without coma	K72.11 Chronic hepatic failure with coma	K76.82 Hepatic encephalopathy
K72.00 Acute and subacute hepatic failure without a coma	K72.01 Acute and subacute hepatic failure with coma	K72.90 Hepatic failure, unspecified without coma	K72.91 Hepatic failure, unspecified with coma	K91.82 Postprocedural hepatic failure

Please apply the following if applicable:

- **T86.41** – Liver transplant rejection
- **T86.42** – Liver transplant failure
- **T86.43** – Liver transplant infection
- **T86.49** – Other complications of liver transplant
- **Z94.4** – Liver transplant status

Clinical Documentation Should Include			
Updated Status of Condition	Specific Type	Risk Factors	Treatment Plan
<ul style="list-style-type: none"> • Stable • Improved • Worsening 	<ul style="list-style-type: none"> • Acute • Subacute • Chronic 	<ul style="list-style-type: none"> • Alcohol Use • Kidney Disease • Infection 	<ul style="list-style-type: none"> • Antibiotics • Laxatives

Documentation and Coding

Coding Example

Case	A 70-year-old patient with a history of nonalcoholic steatohepatitis (NASH) cirrhosis complicated by hepatic encephalopathy and diabetes presented to the emergency department secondary to altered mental status. The patient was admitted for a full work-up and was diagnosed with toxic metabolic encephalopathy (TME) secondary to acute-on-chronic hepatic encephalopathy. Is it appropriate to separately report TME when due to hepatic encephalopathy? Would TME be considered inherent to hepatic encephalopathy? How should TME due to acute-on-chronic hepatic encephalopathy be coded?
AHA Coding Clinic 2022 1st Quarter Rationale	A “code first” note instructs that two codes may be required to fully describe this condition, if applicable. TME is not inherent to hepatic encephalopathy; therefore, code G92.8 should be assigned separately to specifically capture the TME. Code K72.90 , Hepatic failure, unspecified without coma, should be assigned if the only documentation in the medical record is “hepatic encephalopathy,” without any further specification of the underlying cause. In this case, the underlying cause of the toxic metabolic encephalopathy was acute-on-chronic hepatic encephalopathy.

Documentation and Coding

Questions?

Contact us at [#Risk Adjustments and clinical Documentation@healthfirst.org](mailto:#Risk_Adjustments_and_clinical_Documentation@healthfirst.org).

For additional documentation and coding guidance, please visit the coding section on [HFproviders.org](https://www.healthfirst.com/providers).

References

- [codingclinicadvisor.com](https://www.codingclinicadvisor.com)
- [cms.gov/files/document/fy-2024-icd-10-cm-coding-guidelines-updated-02/01/2024.pdf](https://www.cms.gov/files/document/fy-2024-icd-10-cm-coding-guidelines-updated-02/01/2024.pdf)
- [cdc.gov](https://www.cdc.gov)

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