

Documentation and Coding: Purpura and Other Hemorrhagic Conditions



CMS-HCC_V28 Model Updates

August 2023

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 common types of **purpura and other hemorrhagic conditions**. 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.

Purpura refers to a hemorrhage or extravasation of blood into the tissues or organs that appears as bruises or small red patches.

Clinical Documentation Should Include

Status of Condition	<ul style="list-style-type: none"> ▪ Stable, Improved, Worsening, or Resolved
Link Associated Conditions with Terms	<ul style="list-style-type: none"> ▪ Due to ▪ Secondary to or Associated with, i.e., secondary ITP-lupus associated, secondary ITP-drug-induced, or other chronic conditions
Types	<ul style="list-style-type: none"> ▪ Allergic ▪ Qualitative Platelet Defects ▪ Purpura Simplex ▪ Senile Purpura ▪ Immune Thrombocytopenic Purpura (ITP) ▪ Evans Syndrome ▪ Congenital and Hereditary Thrombocytopenia Purpura <ul style="list-style-type: none"> – Specify congenital or hereditary disorder ▪ Megakaryocytic Hypoplasia ▪ Primary Thrombocytopenia ▪ Secondary Thrombocytopenia <ul style="list-style-type: none"> – Post-Transfusion Purpura ▪ Capillary Fragility ▪ Vascular Pseudothrombophilia

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<p>Treatment Plan</p>	<ul style="list-style-type: none">▪ Hematologist recommendations▪ Lifestyle changes and/or any referral given▪ Any recurrent and/or severe infections due to or other condition, i.e., ITP-lupus▪ Evidence of significant deficiency in gamma-globulin levels prior to treatment▪ Diagnostic Testing: Pertinent blood results/procedures, bone marrow exams, etc.▪ Medications: Romiplostim, Promacta, Corticosteroids, Rituximab (Rituxan, Truxima)▪ Intravenous immunoglobulin (IVIG) treatments to raise platelet levels fast▪ Blood Transfusion▪ Splenectomy
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Coding Tips

- Thrombocytopenia is still reported if the condition is actively being managed.
- Document to the highest level of specificity for appropriate **ICD-10** code assignment.
- When multiple types of thrombocytopenia are documented in the record, select the most specific type.
- Assign **Z86.2** – Personal history of diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism.
- Code **D69.1** – Qualitative platelet defects should not be coded with **D59.3*** – hemolytic-uremic syndrome.
- Do not describe purpura and other hemorrhagic conditions as history of if the condition is still active (in diagnosis, history of implies the condition has resolved or no longer exists).
- Do not use words that imply uncertainty, i.e., likely, probable, apparently, consistent with, etc., to describe a current or confirmed diagnosis in the outpatient setting.

**Requires additional digit to complete the code.*

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ICD-10-CM Codes and Descriptions

Purpura and Other Hemorrhagic Conditions	Other Primary Thrombocytopenia
<p data-bbox="298 573 656 653">D69.1 Qualitative Platelet Defects</p>	<p data-bbox="1036 573 1253 653">D69.41 Evans Syndrome</p>
<p data-bbox="196 909 756 989">D69.3 Immune Thrombocytopenic Purpura (ITP)</p>	<p data-bbox="837 888 1455 1010">D69.42 Congenital and Hereditary Thrombocytopenia Purpura</p>
	<p data-bbox="930 1245 1369 1325">D69.49 Primary Thrombocytopenia NOS</p>

This is not an all-inclusive list of ICD-10-codes.

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Coding Example

Case	ICD-10-CM Code
A 75-year-old female with primary thrombocytopenia that continues to have low platelets. Patient has both sides of the mouth cracked, with some bleeding. No other signs of bleeding. Will order immunoglobulin infusion therapy and avoid skin irritants like harsh toothpastes, mouthwashes, and spicy foods.	Assign code D69.49 , Other primary thrombocytopenia (Primary thrombocytopenia NOS)

Questions?

Contact us at #Risk_Adjustments_and_clinical_Documentation@healthfirst.org.

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

References

- [ICD-10-CM Official Coding Guidelines, FY 2024](#)
- [cms.gov, Medicare Coverage Database](https://www.cms.gov/Medicare/Coverage/Databases/)
- [ncbi.nlm.nih.gov, Immune Thrombocytopenia](https://pubmed.ncbi.nlm.nih.gov/)
- [mayoclinic.org, Immune Thrombocytopenia \(ITP\)](https://www.mayoclinic.org/immune-thrombocytopenia/overview/otn)