Documentation and Coding:
Anemia Associated with Malignancy, Chemotherapy, or Immunotherapy
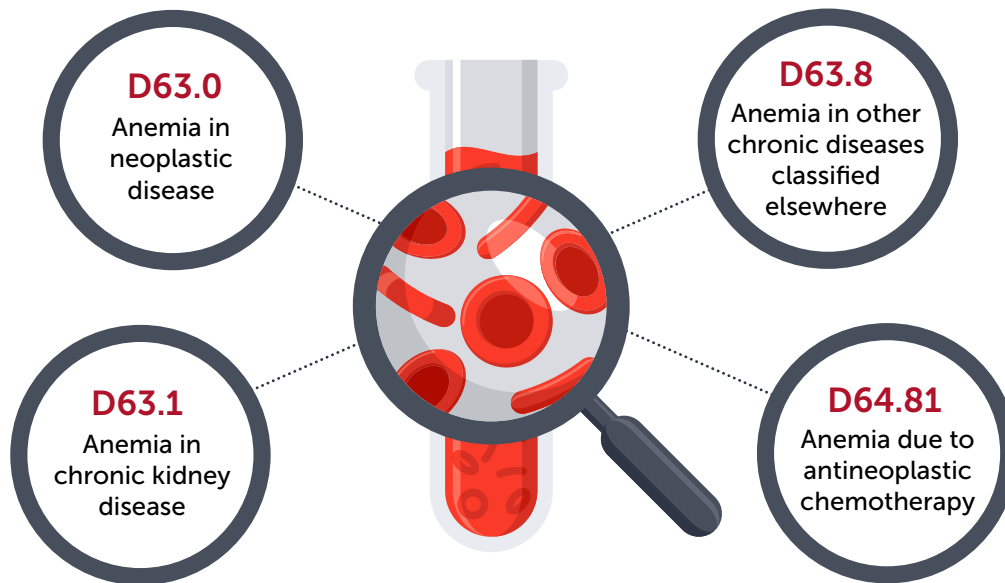
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At Healthfirst, we are committed to helping providers accurately document and code their patients' health records. This tip sheet is intended to assist providers and coding staff with the documentation and ICD-10-CM selection on services submitted to Healthfirst. 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 subscriber contract/evidence of coverage and the provider's participation agreement. This includes the determination of any amounts that Healthfirst or the member owes the provider.

This tip sheet will offer guidance on how to submit diagnosis codes with greater specificity for coding **Anemia Associated with Malignancy, Chemotherapy, or Immunotherapy**.

- When an admission/encounter is for management of **anemia associated with the malignancy**, and the treatment is only for anemia, the appropriate code for malignancy is sequenced as the principal or first-listed diagnosis, followed by the appropriate code for the anemia (e.g., Code D63.0, Anemia in neoplastic disease [FY 2020 ICD-10 Coding Guidelines]).

What to Include with Clinical Documentation

- Updated status of condition (stable, improved, and/or worsening)

- Reason for anemia ("related to" or "due to" malignancy, chemo, or radiotherapy treatment)

- Cause and effect between intervention and blood deficiency

- Medical history (personal and/or family) and presence of risk factors and/or complications

- History of any blood transfusion or injections of Synthetic Erythropoietin

- History of a significant drop of Hgb/Hct

- Treatment plan, orders (abnormal lab of anemia and specific malignancy workup), prescriptions, and referrals

D63.0
Anemia in neoplastic disease

D63.8
Anemia in other chronic diseases classified elsewhere

D63.1
Anemia in chronic kidney disease

D64.81
Anemia due to antineoplastic chemotherapy

Coding Anemia of Chronic Disease

Anemia in Chronic Kidney Disease: Code first underlying CKD/ESRD and stage, followed by the anemia diagnosis code.

Anemia in Metabolic Disorder: Code first underlying disorder (e.g., Hypo/Hyperthyroidism), followed by the anemia diagnosis code.

Examples:

Mrs. Smith is admitted for **anemia due to cancer of the left breast**, for which she is getting oral chemotherapy.

- Code the neoplasm responsible for the anemia first, followed by the anemia code: **PMH cancer of left breast. Code: C50.912 and D63.0.**

Mrs. Smith is admitted for **anemia due to chemotherapy infusion**.

- Code the anemia first, followed by the neoplasm code and the adverse effects: **PMH lung cancer and rheumatoid arthritis. Code: D64.81, C34.90, and M06.00.**

Mrs. Smith is admitted for **anemia due to ESRD**.

- Code underlying chronic kidney disease and stage first, followed by the anemia code: **PMH ESRD with dialysis and HTN. Code: N18.6, D63.1, I10, and Z99.2.**

Anemia

Neoplasm

CKD/ESRD

Common coding practices that providers should avoid:

- *Do not* document a suspected/unconfirmed anemia as if it were confirmed.

- *Do not* use words that indicate uncertainty (e.g., likely, probable, apparently, consistent with, etc.) to describe a current, confirmed neoplasm.

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**.

References: **EncoderPro.com**; **AAPC May 2020**; **AHIMA.org.**

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