

Guidance on Documentation and Coding for Pancreatitis

Overview: Pancreatitis

Pancreatitis is inflammation of the pancreas. It may be sudden (acute) or ongoing (chronic). Chronic pancreatitis can get worse over time and lead to permanent damage. Chronic pancreatitis eventually impairs a patient's ability to digest food and make pancreatic hormones.

Function of the pancreas

- Produce digestive enzymes and release them into the small intestine. These enzymes work to break down carbohydrates, proteins, and fat from food.
- Produce several hormones such as insulin which aide in the regulating the amount of sugar in the blood stream.

Signs and symptoms of pancreatitis

- Asymptomatic (a small subset of chronic pancreatitis)
- Sudden acute abdominal pain
- Mild episodes of deep epigastric pain
- Vomiting
- Constant, dull, unremitting abdominal pain/epigastric tenderness
- Weight loss
- Steatorrhea

Possible causes

- Heavy alcohol consumption
- Gallstones
- Hypertriglyceridemia

Diagnosis

Pancreatitis is best diagnosed

- Using historical information
- Serum enzymes
- Exocrine function tests
- Radiographic studies (X-ray/ultrasound/CT scan)

Treatment for pancreatitis includes medical, endoscopic, and surgical therapy. The goal for treatment is to rest the pancreas and let it heal.

Documentation guidance

- Document the etiology.
- Alcohol-induced chronic pancreatitis should be documented with an alcohol status diagnosis (e.g., alcohol dependence in remission or current alcohol abuse or dependence). Also note any exocrine pancreatic insufficiency as a result of the pancreatitis.
- Positive findings and/or final impressions from diagnostic testing should be documented on the medical record during a face-to-face encounter.
- Document the severity:
 - Chronic
 - Acute/subacute
- When the same condition is described as both acute (subacute) and chronic, and separate subentries exist in the alphabetic Index at the same indentation level, assign a code for both.
- Document modifying factors and lifestyle changes discussed with patient.

ICD-10-CM Code information

- K86.0** Alcohol-induced chronic pancreatitis
- Use additional code to identify:
 - Alcohol abuse and dependence (F10.-)
 - Code also exocrine pancreatic insufficiency (K86.81)
 - Excludes: Alcohol-induced acute pancreatitis (K85.2-)
- K86.1** Other chronic pancreatitis
- Infectious chronic pancreatitis
 - Recurrent chronic pancreatitis
 - Relapsing chronic pancreatitis
 - Code also exocrine pancreatic insufficiency (K86.81)
- K85.90** Acute pancreatitis without necrosis of infection, unspecified
- K85.91** Acute pancreatitis with uninfected necrosis, unspecified

References

- “ICD-10.” Centers for Medicare & Medicaid Services, CMS.gov. <http://www.cms.gov/medicare/coding/icd10>
- “Pancreatitis”. National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health, <https://www.niddk.nih.gov/health-information/digestive-diseases/pancreatitis>
- 2024 ICD-10-CM Expert for Physicians, Official Guidelines for Coding and Reporting, 2023 Optum360, LLC

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