

Cancer

It is important to accurately document and code for cancer. Use these tips to assist you.

When documenting cancer, it is imperative to include **site, laterality, source** (primary and/or secondary), and **status** of each neoplasm. For metastasis, it is imperative to document both the primary and secondary site(s).

Documentation

Documenting “**active**” or “**history of/resolved**” is contingent on the clinical decision of the provider and needs to be recorded in the medical record. Here are some reminders to differentiate between the two:

Active Cancer

For active cancer, the patient is:

- ▶ Newly diagnosed, awaiting treatment, or being monitored
- ▶ Patient opting out of treatment
- ▶ Undergoing chemotherapy or radiation
- ▶ Awaiting surgery
- ▶ On hormonal therapy for **curative** or **palliative** purposes

History of/Resolved Cancer

For history of/resolved cancer, the patient is:

- ▶ Postoperative and all evidence of primary cancer has been excised
- ▶ Coming back for surveillance visits only
- ▶ On hormonal therapy for **prophylactic** purposes

Leukemia and Multiple Myeloma

Documentation

- ▶ Leukemia and multiple myeloma are the only cancers classified with additional designations of “**in remission**” or “**in relapse**” in ICD-10 diagnosis coding. Providers must clearly document the diagnosis.
- ▶ “**History of,**” while uncommon when the onset of leukemia is in adults, may be considered when the onset is in childhood.

Coding Tips

Please see **codes C90.- through C95.-** for the most appropriate “**in remission**” or “**in relapse**” code.

Diagnosis Codes	
Code	Description
C90.00	Multiple myeloma not having achieved remission
C90.01	Multiple myeloma in remission
C90.02	Multiple myeloma in relapse
C91.00	Acute lymphoblastic leukemia not having achieved remission
C91.01	Acute lymphoblastic leukemia, in remission
C91.02	Acute lymphoblastic leukemia, in relapse
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission
C91.11	Chronic lymphocytic leukemia of B-cell type in remission
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse
C92.00	Acute myeloblastic leukemia, not having achieved remission
C92.01	Acute myeloblastic leukemia, in remission
C92.02	Acute myeloblastic leukemia, in relapse

Diagnosis Codes	
Code	Description
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse
C95.00	Acute leukemia of unspecified cell type not having achieved remission
C95.01	Acute leukemia of unspecified cell type, in remission
C95.02	Acute leukemia of unspecified cell type, in relapse
C95.10	Chronic leukemia of unspecified cell type not having achieved remission
C95.11	Chronic leukemia of unspecified cell type, in remission
C95.12	Chronic leukemia of unspecified cell type, in relapse
C95.90	Leukemia, unspecified not having achieved remission
C95.91	Leukemia, unspecified, in remission
C95.92	Leukemia, unspecified, in relapse

Commonly Missed Conditions in the Oncological Patient

Documentation

When treating your oncological patient, be sure to document and capture other common disorders that can accompany their disease process (when appropriate).

Coding Tips

Here are some of the most commonly overlooked diagnoses associated with cancer treatment.

Diagnosis Codes	
Code	Description
D84.81	Immunodeficiency due to conditions classified elsewhere – Code the underlying condition/ neoplasm first
D84.821	Immunodeficiency due to drugs
D84.822	Immunodeficiency due to external causes – Code if applicable, radiological procedure and radiotherapy
E44.0	Protein-calorie malnutrition, moderate

Diagnosis Codes	
Code	Description
E44.1	Protein-calorie malnutrition, mild
E46	Protein-calorie malnutrition, unspecified
R64	Cachexia
G62.0	Drug-induced polyneuropathy
G62.82	Radiation-induced polyneuropathy



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