



## Clinical documentation improvements and general coding tips:

### Morbid Obesity and BMI

Coding Morbid Obesity and BMI accurately requires the documentation to note the following:

- The diagnosis of Morbid Obesity with a BMI of 40 or greater.
- If no BMI is documented, the diagnosis of Morbid Obesity will be accepted as documented by the provider.
- The documentation of a BMI of 40 or greater is not accepted on face value to indicate a diagnosis of Morbid Obesity. The provider must document the clinical condition – Morbid Obesity.
- The diagnosis of Morbid Obesity with any documented BMI **between 35 – 39.9** is not acceptable, unless the provider documents the following comorbid condition(s) that is associated with the consequences of excess calories:
  - Coronary heart disease
  - Diabetes (both Type 1 and Type 2)
  - Dyslipidemia (for example, high LDL cholesterol, low HDL cholesterol, or high levels of triglycerides)
  - Gallbladder disease
  - Hx of Stroke/CVA
  - Hypertension
  - Osteoarthritis
  - Respiratory problems (such as Asthma)
  - Sleep apnea
  - Some cancers (endometrial, breast, and colon)
- The diagnosis of Morbid Obesity with any documented BMI **less than 35** is not acceptable.

*Note:* The comorbidity list is not an exhaustive list and providers have the medical expertise to determine if a comorbid condition is associated with Morbid Obesity and if documented as such will be acceptable.

*Independence Blue Cross coding and documentation education materials are based on current guidelines, are to be used for reference only, and are not intended to replace the authoritative guidance of the ICD-10-CM Official Guidelines for Coding and Reporting as approved by the American Hospital Association (AHA), the American Health Information Management Association (AHIMA), the Centers for Medicare & Medicaid Services (CMS) and the National Center for Health Statistics (NCHS). Clinical and coding decisions are to be made based on the following:*

1. *The independent judgment of the treating physician or qualified health care practitioner.*
2. *The best interests of the patient.*
3. *The clinical documentation as contained in the medical record.*