

COPD & Asthma

Coding & Documentation¹

Address all conditions that coexist at the time of the encounter that require or affect patient care, treatment or management. Document to the highest degree and code to the highest specificity. Include the ICD-10 code on the claim.

Condition Categories								
Category J40	Category J41	Category J42	Category J43	Category J44	Category J45	Category J47		
Bronchitis, NOS	Simple Chronic Bronchitis	Unspecified Chronic Bronchitis	Emphysema	Chronic Obstructive Pulmonary Disease (COPD)	Asthma	Bronchiectasis		
Not specified as acute or chronic, unspecified	Non-obstructive, mucopurulent	Obstructive, sub-acute inflammation of bronchial tubes Type of COPD. Do not code with J44.	Obstructive, damage of alveoli or alveolar walls Type of COPD. Do not code with J44.	Loss of elasticity of the bronchial tree, damage to alveolar walls, thickening of the bronchial wall	Airway inflammation and constriction/ obstruction	Persistent abnormal dilation of the bronchi		
Specificity								
 ICD-10 code assignment depends on documented detail that should include: Specific diagnosis Severity, frequency or complication Condition status Coexisting and/or underlying conditions 		Category J44.0	Category J44.1	Category J44.0 & J44.1	Categories J44 & J45	Category J41.0		
		COPD with Acute Lower Respiratory Infection	COPD with Acute Exacerbation	COPD with Acute Exacerbation & Acute Lower Respiratory Infection	COPD with Asthma	Smoker's Cough		
Causal relationships		 Includes acute bronchitis Code the infection if possible 	 Decompensated COPD Acute exacerbation of condition itself 	 Code both conditions if they exist together Code the infection if applicable 	• Use additional code to identify the type of asthma	 Found in the ICD-10 alphabetic index Must be specifically documented 		

¹ https://www.cdc.gov/nchs/data/icd/10cmguidelines-FY2021.pdf

MEAT ¹ — Supporting Detail		Code Also				
Active Management "Medications reviewed and are current." "The patient is seeing a specialist." "Occurrence of/ no recent onset of exacerbation." 	Current Condition "Patient has moderate persistent asthma with no recent onset of exacerbation." "Patient uses albuterol inhaler as needed for COPD." 	 Test Results Must interpret result and include significance Diagnosis not supported by simple reference of diagnostic study 	Supplemental Oxygen Use of long-term supplemental oxygen regardless of the duration of use each day. ² • Dependence on supplemental oxygen, Z99.81 • Supplemental • Continuous • Nocturnal Use of respirator or ventilator for life	 Contributing Factors Environmental exposure to tobacco smoke, Z77.22 Occupational exposure to environmental tobacco smoke, Z57.31 Tobacco dependence, Z17 Tobacco use, Z72.0 		
	COPD.	"COPD noted on CXR" is an example of insufficient documentation of test results.		Other Long-term (current) use of inhaled steroids Long-term (current) use of systemic steroids 		

NOTE: The information listed here is not all-inclusive and should be used as a reference only. For official guidelines, please refer to the <u>ICD-10-CM Official Guidelines for Coding and</u> <u>Reporting (PDF)</u>.

For additional resources, contact our provider relations team at Providers@ARHealthWellness.com

¹ Monitor, evaluate, assess/address, treat

² AHA Coding Clinic, 2002, Q4, Status V codes

³ https://www.ncbi.nlm.nih.gov/pubmedhealth?PMH0063006/