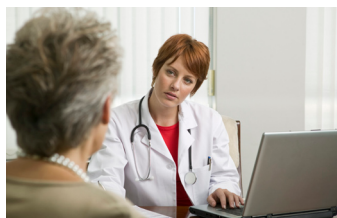


Insider

Informative and educational coding information for providers

FOCUS ON: OBESITY & METABOLIC SYNDROME



Worldwide obesity has more than doubled since 1980.¹

- Overweight and obesity are the fifth leading risk factors for global deaths
- Overweight and obesity are linked to more deaths worldwide than underweight¹

- Metabolic Syndrome is significantly correlated to an increased risk for new-onset Type 2 Diabetes – 62.3% of patients will go on to develop Type 2 DM²
- There is over five times increased cardiovascular mortality in those with Metabolic Syndrome³
- It is not uncommon to find under-nutrition and obesity existing side-by-side¹
- Overweight and obesity, as well as their related chronic diseases, are largely preventable¹

Assessing Weight

Body Mass Index (BMI) is a number calculated from a person's weight and height. It is a fairly reliable indicator of body fatness for most people. For adults 20 years old and older, Body Mass Index (BMI) is interpreted using standard weight status categories that are the same for all ages and for both men and women. BMI ranges for adults are shown in the following table;

BMI Weight Status	
Below 18.5	Underweight
18.5 – 24.9	Normal
25.0 – 29.9	Overweight
30.0 -39.9	Obese
Over 40	Morbid Obesity

Obesity is associated with metabolic syndrome, 1/3 of Americans are now obese, another 1/3 are overweight.²

Evaluate, Diagnose, and Treat Obesity and Metabolic Syndrome

Weight loss - even a modest weight loss of 5-10% makes a difference in clinical outcomes. The greatest benefit for those with metabolic syndrome will be derived from effective lifestyle intervention.⁴

Supportive environments and communities are fundamental in shaping people's choices to;

- limit energy intake from total fats
- increase consumption of fruit and vegetables, legumes, whole grains and nuts
- limit the intake of sugars
- engage in regular physical activity

These codes are to be used for easy reference; however, the ICD-9-CM code book is the authoritative reference for correct coding guidelines. The information presented herein is for information purposes only. OptumInsight does not warrant or represent that the information contained herein is accurate or free from defects.

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ALWAYS REMEMBER...

- While BMI may be coded from the dietician's or other caregiver's documentation, the diagnosis of being overweight or obese must be coded from the provider's documentation.⁵

DOCUMENTATION AND CODING TIPS

277.7 Dysmetabolic syndrome X⁶

Use additional code(s) for associated condition(s), such as:

414.00 - 414.07 Cardiovascular disease

428.0 - 428.9 Heart failure

250.00 Diabetes type II or unspecified

250.02 Diabetes type II or unspecified, uncontrolled

278.00 Obesity, unspecified

278.01 Morbid obesity (BMI 40 or greater)

278.02 Overweight (BMI 25-29.9)

278.03 Obesity hypoventilation syndrome

790.29 Pre-diabetes NOS

Example: A patient is seen in the endocrinologist's office and diagnosed with Dysmetabolic Syndrome X and morbid obesity. BMI calculation-46²

277.7 Dysmetabolic syndrome X

278.01 Morbid obesity, unspecified

V85.42 BMI-45.0-49.9

For Obesity Reporting

Use additional code to identify Body Mass Index (BMI), if known.⁶

For members with BMIs of 40 and over, adult:

V85.41 BMI 40.0-44.9

V85.42 BMI 45.0-49.9

V85.43 BMI 50.0-59.9

V85.44 BMI 60.0-69.9

V85.45 BMI 70 and over

Obesity due to a specified cause, such as thyroid disorder (240-246), is coded to the underlying condition.⁷

Special Screenings for:

V77.0 Thyroid disorders

V77.1 Diabetes mellitus

V77.2 Malnutrition

V77.7 Other inborn errors of metabolism

V77.8 Obesity

1 WHO <<http://www.who.int/mediacentre/factsheets/fs311/en/>> accessed 12/6/11

2 Centers for Disease Control and Prevention, accessed 2011-08-03

<http://www.cdc.gov/obesity/data/trends.html>

3 Expert Panel on Detection, Evaluation, and Treatment of High Blood Cholesterol in Adults. Executive Summary of The Third Report of The National Cholesterol Education Program (NCEP) Expert Panel on Detection, Evaluation, and Treatment of High Blood

4 Grundy, SM, et al. Diagnosis and Management of the Metabolic Syndrome: An American Heart Association/National Heart, Lung and Blood Institute Scientific Statement: Executive Summary. *Circulation* 2005;112:e285-e290.

5 AHA Coding Clinic 4th Q. Dysmetabolic Syndrome X, 2001.

6 "CMS and the National Center for Health Statistics (NCHS)." ICD-9-CM Official Guidelines for Coding and Reporting. N.p., 01 oct 2011. Web.

<http://www.cdc.gov/nchs/data/icd9/icd9cm_guidelines_2011.pdf>.

7 Brown, Faye. Faye Brown's ICD-9-CM Coding Handbook with Answers, 2012. Chicago: AHA Press, 2011.Print.