MVP HEALTH CARE

Best Practice for Coding and Documentation of Obesity

Per ICD-10 guidelines and the American Hospital Association's (AHA) Coding Clinic, the best practice for coding and documenting of obesity disease requires providers to apply a primary code of the type of obesity disease and only use a BMI code as a secondary diagnosis code. While BMI codes should be captured, they should never be used as the primary code and are not intended for use as a primary diagnosis. If the provider documents BMI only, and there is no mention of the associated condition, the BMI status code will not be captured.

Some tips to make coding for obesity easier for you include:

- "Favorite" the correct codes in your electronic medical record (EMR) making them easier to apply in the moment you need them
- "Favorite" specific obesity codes that include specific additional detail (e.g., E66.01- morbid obesity due to excess calories) and use these over generic obesity codes (e.g., E66.9 – obesity, unspecified)
- Use Obesity Coding as one of your Quality Improvement Projects for your Board's Maintenance of Certification requirements
- Share your coding best practices with others on your team, such as dietitians who often document obesity and BMI

If you have any coding questions or concerns, contact the MVP Senior Risk Mitigation Coordinator, Mary Ellen Reardon, MHA, CPC, CPCO, CRC, RAP at **585-279-8583** or email **mreardon@mvphealthcare.com**.