Obese Conditions
Documentation Best Practices

WellSense
HEALTH PLAN

Type of obese conditions

Overweight, obesity and morbid obesity are conditions often missed in all risk adjustment models.

ICD-10 Code	Diagnosis
E66.3	Overweight
E66.9	Obesity
E66.01	Morbid (severe) Obesity
E66.09	Other obesity due to excess calories
E66.1	Drug-induced Obesity
E66.2	Morbid (severe) obesity with alveolar hypoventilation
E66.8	Other Obesity

Parameters

Overweight	
Adult	BMI of 25.0 to 29.9
Pediatric	BMI between 85th and 94th percentiles
Obesity	
Adult	BMI greater than 30 to 34.9, or BMI of 35 to 39.9 without co-morbid conditions
Pediatric	BMI of 95th to 98th percentile
Morbid (Severe) Obesity	
Adult	BMI of 35 to 39.9 with co-morbid conditions, or BMI greater than 40
Pediatric	BMI of 99th percentile of higher
Other Obesity Due To Excess Calories	
Adult	BMI of 35 to 39.9 with co-morbid conditions, or BMI greater than 40, specifying the cause
Pediatric	BMI of 99th percentile of higher, specifying the cause
Drug-Induced Obesity	
Adult	BMI greater than 30, identify drug, and use additional diagnosis code for adverse effect (T36.x - T50.x)
Pediatric	BMI of 95th percentile or above, identify drug, and use additional diagnosis code for adverse effect
Morbid (Severe) Obesity with Alveolar Hypoventilation	
Adult	BMI greater than 30 and no other cause of the hypoventilation, this is a diagnosis of exclusion.
Other Obesity	
Adult	BMI greater than 30 to 34.9 or BMI of 35 to 39.9 without co-morbid conditions, specifying the cause
Pediatric	BMI of 95th to 98th percentile, specifying the cause

Use the additional diagnosis code that identifies the body mass index (BMI), if known (Z68.xx).

Documentation Requirements

To ensure accurate coding of an obese condition, the documentation must clearly indicate:

- Identifying if the patient is overweight, obese or morbidly obese.

- In the case of "other" obesities, it is important to specify what condition is causing the obesity.

Documentation Best Practices handouts are designed to help WellSense providers improve and record the quality of care delivered to WellSense members across all patient populations.

- In the case of drug-induced obesity, identify the drug that caused the obesity, and use the additional diagnosis code documenting the adverse effect (T36.x – T50.x).

- In the case of morbid obesity, patients that have a BMI between 35 to 39.9 need the associated co-morbid condition identified in the plan of care to support the diagnosis.

- The verbiage of "obesity" or "overweight" in the HPI isn't sufficient evidence to support the diagnosis of obesity or morbid obesity. It needs to be clearly addressed in the A/P section with a definitive diagnosis.

Documentation examples

Patient with co-morbidity

HPI: Patient is here for a follow up on their diabetes care. They're checking their blood sugars at home, taking medications as ordered. Patient complains of being overweight and wants to talk about weight loss options.

PE: Vitals: 135/78, HR 86, RR 16, BMI 38.5; PE: WNL, obese;
Labs: Last A1C 7.5; LDL 165, HDL 45, TG 210

A: **E11.69 Diabetes with Hyperlipidemia**
E78.5 Hyperlipidemia
E66.01 Morbid Obesity; Z68.38 BMI 38.0 – 38.9, adult

P: Patient advised to continue ADA diet, continue to monitor glucose levels daily at home; continue metformin and atorvastatin; Discussed diet, exercise, lifestyle changes with patient; Recheck lipid panel and A1C in 3 months. Continue Atorvastatin as directed, recheck lipid panel in 3 months. Patient has BMI of 38.5 with co-morbid condition of diabetes. Counseled on weight loss options, diet and exercise.

Pediatric patient

HPI: Patient is an 11-year-old male here for routine healthcare maintenance. Patient is growing and developing well.

PE: Vitals: 97th percentile; PE: WNL, obese;

A: **Z00.129 Health check for child over 28 days old**
E66.9 Obesity; Z68.54 BMI pediatric greater than or equal to 95th percentile for age

P: No concerns at this time. Immunizations and labs ordered. Patient is obese. Discussed diet with mother, increasing activity level and the reduction of junk food/snacks.

Patient with drug-induced obesity

HPI: Patient is here for a follow up of their chronic conditions. They're taking medications as ordered. Patient complains of weight gain due to taking amitriptyline.

PE: Vitals: 130/74, HR 90, RR 20, BMI 34.2; PE: WNL, obese;

A: **E66.1 Drug-Induced Obesity; Z68.34 34.0 – 34.9, adult**
T43.015 Adverse effects of tricyclic antidepressants

P: Patient has gained weight due to being on the antidepressant amitriptyline. Discussed diet, exercise and lifestyle changes. Will follow up in three months. Continue amitriptyline as directed.