Chronic Obstructive Pulmonary Disease (COPD)

BASICS

- COPD is a general term used to describe a variety of conditions that result in obstruction of the airway.
- COPD has a tremendous effect on the quality of and daily life activities for patients.
- Chronic obstructive bronchitis and emphysema are the two forms of COPD. Asthma is another common chronic low respiratory disease, but only carries risk through prescription HCCs.

Root Code	Detail
J41	Simple and mucopurulent chronic bronchitis (Identify the type)
J42	Unspecified chronic bronchitis
J43	Emphysema (Identify the type)
J44*	Other chronic obstructive pulmonary disease
J98	Other respiratory disorders (eg. Disease of the Bronchus)

Use ALL applicable codes to accurately document a patient's condition, more than 1 can be documented
Remember to M.E.A.T. (Monitor, Evaluate, Assess and/or Treat) and document:

- Bronchitis as acute or chronic or obstructive, when known
- Severity of COPD (mild, moderate, severe, end-stage)
- Results of pulmonary function tests
- Respiratory failure (acute or chronic) when it occurs as well as hypoxia or hypercapnia

- If Asthma with COPD (J44.x), include severity (mild, moderate, severe) type and status
- Dependence on ventilator and any tracheostomy
- Dependence on supplemental oxygen
- Tobacco use, counseling, treatment or intervention

ICD 10 Code	Description	Consider Assigning When...
J41.X	Chronic Bronchitis	Patient has simple and/or mucopurulent chronic bronchitis (Document if obstructive)
J43.9	Emphysema, unspecified	When patient has COPD and emphysema throughout. Emphysema is a form of COPD, so you do not need to code J44.9. If patient also has asthma, code J45.X based on severity.
J44.9	COPD, unspecified	Multiple diagnoses are under the J44.9 umbrella, including chronic obstructive asthma. Be sure to document severity as either mild, moderate or severe.
J44.0	COPD w/ acute lower respiratory infection	There is a worsening condition or decompensation. If appropriate, both can be documented. Also, be sure to include type of infection and infective agent. Caution: Do not use if infection is caused by influenza, ventilator or in cases of aspiration pneumonia. In that instance use J44.9 and J95.851.
J44.1	COPD w/ (acute) exacerbation	

*J44 includes all of the following:
- Asthma with COPD
- Chronic asthmatic (obstructive) bronchitis

Note: Code also type of asthma, if applicable (J45.-J45.998)

- Chronic bronchitis with airways obstruction
- Chronic obstructive asthma
- Chronic bronchitis with emphysema

- Chronic emphysematous bronchitis
- Chronic obstructive tracheobronchitis
- Chronic obstructive bronchitis

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BEYOND THE BASICS

ICD10 CODING CONSIDERATIONS

SEVERITY

- When coding for COPD it is important to remember to document diagnosis severity:

Diagnosis	Severity Classifications
Bronchitis	Chronic or Acute
COPD	Mild, Moderate or Severe
Asthma	Mild Intermittent, Mild Persistent, Moderate Persistent, Severe Persistent AND Status

RESPIRATORY FAILURE

- COPD can occur with or without acute or chronic respiratory failure. Document respiratory failure for encounters.

- Also consider documentation of hypoxia or hypercapnia in respiratory failure:

ICD10 Code	Complication
J96.01	Acute respiratory failure with hypoxia (oxygen deficient)
J96.12	Chronic respiratory failure with hypercapnia (excess carbon dioxide)

MEDICATION AND TREATMENT

- Can support diagnosis of COPD, so be sure to document any of the following:

ICD10 Code	Description
Z99.11	Dependence on respirator [ventilator] status
Z99.81	Dependence on supplemental oxygen
Z79.51	Long term (current) use of inhaled steroids
Z79.52	Long term (current) use of systemic steroids

COMORBIDITIES

- Or medical conditions that exist at the same time as diagnosis or later develop in conjunction with COPD

- Common comorbidities with COPD include:

ICD10 Code	Comorbidity
J45.X	Asthma (including persistence)
E66.X	Obesity and Overweight, also be sure to document BMI
I27.23	Pulmonary HTN due to lung disease and hypoxia code also lung disease
J85.1	Abscess of Lung or Pneumonia

RISK FACTORS

- It is important to obtain patient's smoking status when they have any chronic lung disease

- Also, be sure to document tobacco counseling, treatment or intervention

ICD10 Code	Description
F17.X	Nicotine dependence
Z72.0	Tobacco Use
Z77.22	Contact with and (suspected) exposure to environmental tobacco smoke (acute/chronic)
Z87.891	History of nicotine dependence

ICD10 CODING SCENARIOS

Example	ICD 10 Coding
Patient has COPD with acute exacerbation of moderate persistent asthma, O2 dependent, and history of 10 years tobacco dependence.	•J44.9, COPD, unspecified AND •J45.41, Moderate Persistent Asthma with (acute) exacerbation AND •Z99.81, Dependence on supplemental oxygen AND •Z87.891, Personal history of nicotine dependence
Patient has COPD with emphysema	•J43.9, Emphysema, unspecified - Note: There is an exclusion note under J44* (COPD) for emphysema without chronic bronchitis. The code for emphysema includes the COPD, so these should not be added as two separate codes.
Patient has COPD and is seen with acute exacerbation of asthmatic bronchitis	•J44.1, COPD with (acute) exacerbation AND •J45.901, Unspecified asthma with (acute) exacerbation