

How and Why to Code for Obesity:

A Guide for HCPs on Coding for Obesity-Related Conditions in Clinical Practice



Obesity is a rapidly growing global public health concern, reaching epidemic levels in many countries.¹



OBESITY



CHALLENGES

Long-held misconceptions hinder appropriate support and care²⁻⁴



ACCESS TO CARE

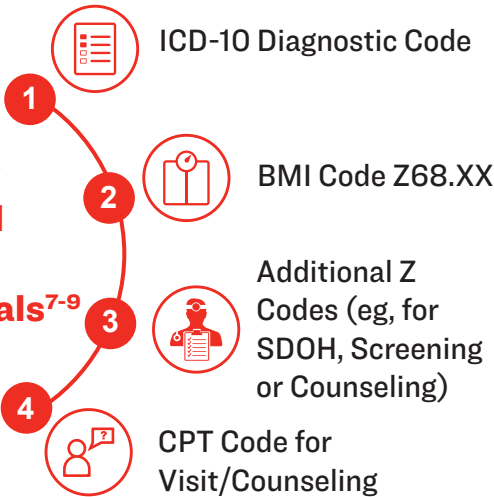
Diagnostic coding and medical billing complexities may block access to obesity care^{3,5}



OPPORTUNITIES FOR CHANGE

New advancements in obesity care offer a chance to enhance its visibility^{3,6}

Obesity Medical Coding Essentials⁷⁻⁹



Diagnosis of obesity may help patients achieve greater weight loss and meet other favorable clinical outcomes.^{10,11}

- Emphasize diagnosis and complications over BMI alone when selecting codes¹²
- Include a Z code for BMI (Z68.XX)^{7,12}
- Consider including additional Z codes for counseling as appropriate (eg, Z71.3, Z71.89)^{7,12}

Common ICD-10-CM and BMI Codes for Overweight and Obesity¹²⁻¹⁵

BMI	<18.5	18.5-24.9	25-29.9	30-34.9	35-39.9	≥40
Range	Underweight	Normal	Overweight	Obesity Class I	Obesity Class II	Obesity Class III
ICD-10-CM Code	R63.6	N/A	E66.3	E66.811	E66.812	E66.813
BMI Code	Z68.1	Z68.1-Z68.24	Z68.25-Z68.29	Z68.30-Z68.34	Z68.35-Z68.39	Z68.41-Z68.45

When Coding for Obesity, Include the ICD-10 Diagnostic Code for Obesity and the Z Code for BMI^{7,12}

Common ICD-10-CM Codes for Obesity^{12,13,15-17}

E66.89

Other obesity not elsewhere classified

E66.9*

Obesity, unspecified

E66.1

Drug-induced obesity

E66.2

Severe obesity with alveolar hypoventilation

E66.09

Other obesity due to excess calories†

Common CPT Codes for Obesity Screening & Counseling^{9,18,19}

CPT 99401

Preventive medicine counseling and/or risk factor interventions provided to an individual; ~15 minutes

CPT 99402

Preventive medicine counseling and/or risk factor interventions provided to an individual; ~30 minutes

CPT 99403

Preventive medicine counseling and/or risk factor interventions provided to an individual; ~45 minutes

G0447

Face-to-face behavioral counseling for obesity; 15 minutes

G0473

Face-to-face behavioral counseling for obesity, group (2-10); 30 minutes

Accurate Coding Aids in Defining and Documenting Treatment More Effectively^{12,20,21}



Report clinically significant obesity diagnoses



Include codes for complications, as appropriate



Z codes (eg, BMI) must be accompanied by an ICD-10 diagnostic code for obesity



Consider patient impact: Phrases like "morbid obesity" and "due to excess calories" may reinforce stigma



Do not report a diagnosis of overweight without additional information on existing obesity-related complications and comorbidities



Document comorbidities



Avoid BMI codes in pregnancy

Accurate coding for obesity and related conditions is vital for treatment efficacy, patient care, and overcoming "care access" hurdles. It is important to document diagnoses and comorbidities correctly and adhere to coding standards to improve healthcare services.²⁰

*E66.0 is a non-billable code. Better to code one of the listed subcategory codes ("child code"). Unless drug-induced obesity, preferred codes might include E66.811, E66.812, E66.813 and E66.89 if the cause is known, or E66.9 if the cause is unclear.

†The phrase "due to excess calories" may be stigmatizing to patients; consider the impact if choosing this code.

BMI=Body Mass Index; CPT=Current Procedural Terminology; HCP=Healthcare Professional; ICD-10=International Classification of Diseases, Tenth Revision; ICD-10-CM=ICD-10-Clinical Modification; N/A=Not Applicable; SDOH=Social Determinants of Health.

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