

CPT II and Morbid Obesity Documentation and Coding Questions Log

Purpose

The purpose of this document is to outline questions asked during the presentation and document the answers that were given by the presenters.

This webinar was launched live at 12pm on February 11, 2020

Questions

1. What is the clinical different between malnutrition and cachexia?

Answer: Cachexia is wasting away of muscle tissue, diminished food intake and involuntary weight loss that usually accompanies a chronic disease, while malnutrition is the lack of adequate nourishment.

2. How/what does a provider have to document for a coder to pick up cachexia or malnutrition?

Answer: A provider needs to actually diagnose and state the condition. It is often seen in the Review of Systems that a patient may look cachectic or malnourished. But that is just a description of what the provider is viewing with their eyes and not a clinical diagnosis. The provider would need to state that the patient has the disease and more support for the code to be picked up by the coder on the claim.

3. My patient had a colonoscopy 6 years ago. I coded the CPT II code 5 years ago to close that gap. Do I still need to report the CPT II code for the colonoscopy once a year?

Answer: The answer to this would be yes as this is best practice. If the patient changes insurance companies, they would not know that the colonoscopy has been previously done in the past. It would be in the providers best interest to capture this CPT II code every year to prevent the administrative burden.