

CHRONIC OBSTRUCTIVE PULMONARY DISEASE (COPD)

Provider's guide to diagnose and code COPD

What is COPD?

COPD is an under-diagnosed, airflow-limiting condition that:

- › **Affects five percent of the U.S. population**, 10 percent of whom are age 65 and older
- › **Claims over 124,000 lives every year**, making it the third leading cause of death, according to the Centers for Disease Control
- › **Costs over \$37 billion dollars every year**, making it a primary focus for Medicare quality health outcomes

COPD is a constellation of lung diseases including:

- › Emphysema - enlargement of airspaces associated with pathologic destruction of the alveolar-capillary membrane (clinician should be aware that a solitary radiological emphysematous finding does not support a COPD diagnosis)
- › Chronic bronchitis - a clinical cough of more than 3 months for 2 consecutive years

Symptoms

- › Exertional dyspnea
- › Wheezing
- › Chest tightness
- › Excessive sputum production
- › Cough

NOTE: Symptoms may be similar to conditions such as heart failure and pneumonia.

Risk factors

- › Aged 65 to 74
- › Caucasian
- › Female
- › History of asthma
- › Unemployed
- › Low socioeconomic status
- › Smoking
- › Second-hand smoke inhalation
- › Occupational exposure to pollutants

Physical exam findings

- › Tachypnea
- › Tachycardia
- › Hypoxia
- › Dyspnea with speaking or eating
- › Accessory muscle use
- › Intercostal chest retractions
- › Abnormal breath sounds (crackles, decreased breath sounds, rhonchi, and wheezes)
- › Hyper-expansion of the chest (barrel chest)
- › Cyanosis
- › Hepatomegaly
- › Jugular vein distension
- › Muscle wasting



Diagnosis

Diagnosis is enhanced by using several data points such as:

- › Radiology exams – chest film and chest CT
- › Arterial blood gas (ABG)
- › Pulse oximetry
- › Spirometry – the gold standard test to diagnose COPD – should be done:
 - Yearly to assess progression or stability
 - With and without bronchodilator when not contraindicated
 - Spirometry data includes:

Spirometry data	
FEV1	Forced expiratory volume over 1 second. If less than 80% of predicted, COPD diagnosis should be considered
FVC	Forced vital capacity
FEV1/FVC	This ratio determines the airflow limitation, if less than 0.70 a COPD diagnosis should be considered
DLCO	Diffusion capacity of the lung for carbon monoxide (CO) must have an oxygen saturation of less than 92% to consider a valid test

People with COPD should be encouraged to get:

- › Annual influenza vaccine
- › Pneumococcal vaccine every 5 years
- › Smoking cessation counseling if an active smoker
- › Exercise
- › Diet/nutrition education due to COPD malnutrition risk.

Once COPD is diagnosed, it is important to classify its severity and progression to help the clinician make informed treatment decisions.

The following online tools are useful:

Online tool	Function
GOLD classification http://GOLDCOPD.com	Stages COPD in functional classes, using the FEV1/FVC and FEV1 data
BODE index http://www.qxmd.com/calculate-online/respirology/bode-index	Prognosis calculator which determines 52 month life expectancy

Coding and documenting for lung disorders

- › An additional code is needed for type of asthma
- › Two combination codes help consolidate the reporting of several combinations of Chronic Bronchitis, Asthma, and Emphysema in the presence of COPD
- › Expanded codes for greater specificity of type of emphysema

With every clinical encounter it is important to:

- › Verify patient name and date of birth
- › Make sure there is a date of service with the clinical encounter
- › Include provider name, credentials, and signature
- › Evaluate if the COPD is stable or unstable
- › Document the treatment and follow-up plan
- › Link diagnoses when appropriate
- › Document medications to support the clinical stages of COPD

Clinicians should use all available clinical data to represent a specific ICD-10 diagnosis. The following chart includes ICD-10 codes.

2015 ICD-10-CM

ICD-10-CM Code	ICD-10-CM Description	Definition/tip	Coding tip
J44.9	Chronic obstructive pulmonary disease, unspecified	Includes: <ul style="list-style-type: none"> Asthma with COPD Chronic (asthmatic) obstructive bronchitis Chronic bronchitis with airways obstruction Chronic bronchitis with emphysema Chronic emphysematous bronchitis Chronic obstructive asthma Chronic obstructive bronchitis Chronic obstructive tracheobronchitis Code also type of asthma, if applicable (J45.-)	Use additional code to identify: <ul style="list-style-type: none"> Tobacco dependence (F17.-) Tobacco use (Z72.0) History of tobacco use (Z87.891) Exposure to environmental tobacco smoke (Z77.22) Occupational exposure to environmental tobacco smoke (Z57.31)
J44.0	Chronic obstructive pulmonary disease w/acute lower respiratory infection (Use additional code to identify the infection)	Includes: <ul style="list-style-type: none"> Asthma with COPD Chronic (asthmatic) obstructive bronchitis Chronic bronchitis with airways obstruction 	
J44.1	Chronic obstructive pulmonary disease w/(acute) exacerbation	Includes: <ul style="list-style-type: none"> Chronic bronchitis with emphysema Chronic emphysematous bronchitis Chronic obstructive asthma Chronic obstructive bronchitis Chronic obstructive tracheobronchitis Code also type of asthma, if applicable (J45.-)	
J41.0	Simple chronic bronchitis		
J41.1	Mucopurulent chronic bronchitis		
J41.8	Mixed simple & mucopurulent chronic bronchitis		
J42	Unspecified chronic bronchitis	Chronic bronchitis NOS Chronic tracheitis Chronic tracheobronchitis	
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	Swyer-James syndrome Unilateral emphysema Unilateral hyperlucent lung	
J43.1	Panlobular emphysema	Panacinar emphysema	
J43.2	Centrilobular emphysema		
J43.8	Other emphysema		
J43.9	Emphysema, unspecified	Bullous emphysema (lung)(pulmonary) Emphysema (lung)(pulmonary)(NOS) Emphysematous bleb Vesicular emphysema (lung)(pulmonary)	
J98.2	Interstitial emphysema Mediastinal emphysema		
J98.3	Compensatory emphysema		
F17.20-	Nicotine dependence		(-)Add 6th character: <ul style="list-style-type: none"> 0- uncomplicated 1- in remission 3- w/withdrawal 8- w/other nicotine-induced disorders 9- w/unspecified nicotine-induced disorders
F17.21-	Nicotine dependence, cigarettes		
F17.22-	Nicotine dependence, chewing tobacco		
F17.23-	Nicotine dependence, other tobacco products		
Z72.0	Tobacco Use		