

Risk Adjustment Coding Academy- Coding Focus

Belly Up for Malnutrition Coding



Malnutrition

Malnutrition basically means “poor nourishment.” A person may become malnourished if unable to fully utilize consumed foods due to diarrhea or other illnesses (secondary malnutrition), if too many calories are consumed (overnutrition), or if their diet does not provide sufficient calories and protein for growth and maintenance (undernutrition or protein-calorie malnutrition). According to the World Health Organization (WHO), malnutrition affects one in three people globally.¹

Reasons for Malnutrition

The causes of malnutrition can be complex as it is both a medical and social disorder, often rooted in poverty. Malnutrition, combined with poverty, creates a domino effect that is propelled by an increased burden of disease, stunted development and reduced ability to work. A poor water supply and lack of adequate sanitation are the two main root causes in developing countries.

Malnutrition Among Seniors

Per Mayo Clinic, two crucial and often overlooked precursors to malnutrition

among seniors are depression and changing medications.² The latter can be particularly easy to miss since different providers (e.g., cardiologists, PCP, etc.) can adjust medication dosage throughout the course of treatment; these changes can lead to loss of appetite amongst a population that already may not have adequate nutrient intake.

Types of Malnutrition

Each form of malnutrition is dependent upon what nutrients are lacking in the diet, for how long, and at what age.³

The most basic form is called protein-calorie malnutrition. It results from a diet lacking in energy and protein because of a deficit in all major macronutrients (e.g., carbohydrates, fats and proteins).

The most predominant form of malnutrition is iron deficiency. Iron forms the molecules that carry oxygen in the blood, symptoms typically include fatigue.

Treatment

Interventions that contribute to preventing malnutrition include:

- Improved water supply, sanitation and hygiene,
- Health education for a healthy diet, and
- Improved access, by the poor, to adequate amounts of healthy food.

Malnutrition Coding Guidance

Coders are cautioned with over-reliance on the alphabetic index in the code books. In ICD-9 the terms, “malnutrition, protein” lead to code 260 (HCC 21), *Kwashiorkor*.⁴

Per AHA Coding Clinic, 2009, Q3, “Kwashiorkor syndrome is a condition that is caused by severe protein deficiency that is usually seen in some underdeveloped areas in Africa and Central America; however it is extremely rare in the United States. The National Center for Health Statistics (NCHS) is considering a proposal to revise the index entries under mild and moderate protein malnutrition in order to provide clearer direction to the coder.”

The ICD-10 alphabetic index for “malnutrition, protein” leads to code E46 (HCC21), *Unspecified protein-calorie malnutrition*.⁵ In order to code to the highest degree of specificity in ICD-10, documentation needs to specify the degree of malnutrition, such as, first (mild), second (moderate), or third (severe). Additionally marasmus or kwashiorkor should be documented, when appropriate.

Always reference the tabular list in the code books for further information on the code description, inclusion terms, and/or additional coding instructional notes.

1. World Health Organization website: Ending malnutrition in all its forms? A decade of opportunity (accessed February 2016): who.int
2. Mayo Clinic website: Senior health: how to prevent and detect malnutrition (accessed February 2016): mayoclinic.org
3. World Food Programme website: Types of Malnutrition (accessed February 2016): wfp.org
4. Advance Healthcare Network website: Exploring Malnutrition Coding (accessed February 2016): health-information.advancedweb.com
5. Anita Schmidt, K.K. & P.W. (2016). ICD-10-CM Expert for Physicians. Optum360