# HCC Codes and Documentation - Extended

## Malnutrition

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|---|---|
| **E43** | Severe protein-calorie malnutrition |
| **E44.0** | Moderate protein-calorie malnutrition |
| **E44.1** | Mild protein-calorie malnutrition |
| **E45** | Retarded development following protein-calorie malnutrition |
| **E46** | Unspecified protein-calorie malnutrition |
| **R64** | Cachexia |

| | |
|---|---|
| **Coding specificity tips** | The ICD-10-CM alphabetic index for "malnutrition, protein" lead to code E46, "unspecified protein-calorie malnutrition."<br><br>In order to code to the highest degree of specificity in ICD-10-CM, documentation must specify the degree of malnutrition, such as:<br>• First (mild; z score <-1)<br>• Second (moderate; z score between -1 and -2)<br>• Third (severe; z score <-3)<br>• Cachexia<br>• Additionally, marasmus or kwashiorkor should be documented, when appropriate, although rare in the United States.<br><br>Consider adding diagnosis codes for social determinates of health when determining underlying conditions affecting malnutrition. |
| **Documentation tips** | Document any weight gain or loss, degree or severity, BMI score, Treatment plan, underlying conditions (Childhood cancer, GERD, cerebral palsy, congenital heart disease, cystic fibrosis, etc.), and any lab values. |

| Pediatric Malnutrition Indicators | | |
|---|---|---|
| **< 2 year old** | **>2 year old** | **# data points (value)** |
| Weight for length (W/L) | BMI | One (z score) |
| Length | Height | One (z score) |
| MUAC (6 month – 2 year old) | MUAC (2-6 year old) | One (z score) |
| Growth velocity | Weight loss | Two (% norm/usual) |
| Decline in W/L  z score | Decline in BMI z score | Two (difference) |
| Dietary intake | Dietary Intake | Two (% estimate) |

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## Malnutrition, Continued

**Document both BMI and the weight diagnosis**

The American Society for Parenteral and Enteral Nutrition (ASPEN) guidelines recommend the diagnosis of malnutrition be based on the presence of two or more of the following characteristics:

- Insufficient energy intake/ Fatigue: less than 5 days
- Weight loss (% of body weight):
  - >2% in one week; or
  - >5% in one month; or
  - >7.5% in three months
  - Improper growth in children
- Loss of muscle mass: moderate
- Loss of subcutaneous fat: moderate
- Localized or generalized fluid accumulation; moderate to severe
- Diminished hand grip strength: measurably reduced

The degree/severity of malnutrition is a part of the diagnosis, which can only be made by the provider. According to the Official Guidelines for Coding and Reporting, "Code assignment is based on the documentation by patient's provider (i.e., physician or other qualified healthcare practitioner legally accountable for establishing the patient's diagnosis)." Clinicians other than the patient's provider may document BMI (Z68.-), however, for reporting the BMI code, the provider must document both the BMI and weight diagnosis.

The recognition of malnutrition and its severity is crucial for proper patient management.

**Pediatric BMI Percentile Codes and Range:**
Z68.51 BMI, less than 5th percentile for age
Z68.52 BMI, 5th percentile to less than 85th percentile for age
Z68.53 BMI, 85th percentile to less than 95th percentile for age
Z68.54 BMI, greater than or equal to 95th percentile for age

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