



## Chronic Condition Coding Awareness: Asthma

### Asthma

Asthma, sometimes called bronchial asthma or reactive airway disease<sup>2</sup>, is a chronic lung disease that makes it harder to move air in and out of the lungs<sup>1</sup>. It can be serious, life threatening, and start at any age. With asthma, swollen airways become extra sensitive to things that one is exposed to in the environment every day—asthma “triggers.” When a trigger is breathed in, the airways create extra mucus and swell even more, making it harder to breathe<sup>2</sup>.

### Symptoms of Asthma

Asthma symptoms include coughing (especially at night), wheezing, shortness of breath, and chest tightness, pain, or pressure<sup>2</sup>. Understanding the experiences or exposures that make the asthma flare-up is a key step to better managing the disease.

### Treatment of Asthma

Treatment for asthma may include inhalers, oral medications, and drugs delivered in a nebulizer or breathing machine<sup>2</sup>. Making a plan to avoid or limit the environmental exposure to asthma triggers can eliminate asthma symptoms and help control the disease<sup>1</sup>. The use of action plans can assist with treating asthma and identify symptoms to watch for and to quickly get the breathing under control. There are 3 basic zones of green (stable for time- no coughing), yellow (coughs, wheezing, chest tightness), and red (danger and should seek medical care immediately) that are followed and should be kept up-to-date<sup>2</sup>. Providers can utilize the template from Asthma and Allergy Foundation of America to assist with controlling asthma<sup>5</sup>.

### Asthma Coding Guidance

TIPS:		ICD-10 Mapping & Education	
➤ <b>ICD-10-CM</b>	J45.20 – J45.998 (Asthma) <sup>3</sup>		
	J45.2-	Mild Intermittent Asthma	Be sure to check for 6 <sup>th</sup> digit of: 0 = uncomplicated 1 = acute exacerbation 2 = status asthmaticus
	J45.3-	Mild Persistent Asthma	
	J45.4-	Moderate Persistent Asthma	
	J45.5-	Severe Persistent Asthma	
	J45.901	Unspecified asthma with (acute) exacerbation	
	J45.902	Unspecified asthma with status asthmaticus	
	J45.909	Unspecified asthma, uncomplicated	
	J45.990	Exercise induced bronchospasm	
	J45.991	Cough variant asthma	
J45.998	Other asthma		
➤ <b>Documentation should specify</b>	<ul style="list-style-type: none"> <li>○ Frequency (intermittent, persistent)</li> <li>○ Severity (mild, moderate, severe)</li> <li>○ Exacerbation or decompensation</li> <li>○ Environmental factors</li> </ul>		
➤ <b>Use additional code...</b>	... to identify: <ul style="list-style-type: none"> <li>○ Exposure to environmental tobacco smoke (<i>Z77.22</i>)</li> <li>○ Exposure to tobacco smoke in the perinatal period (<i>P96.81</i>)</li> <li>○ History of tobacco dependence (<i>Z87.891</i>)</li> <li>○ Occupational exposure to environmental tobacco smoke (<i>Z57.31</i>)</li> <li>○ Tobacco dependence (<i>F17.-</i>) or Tobacco use (<i>Z72.0</i>)</li> </ul>		



<p>➤ <b>Avoid terms such as “history of” ...</b></p>	<p>... if patient is still being monitored for the condition.</p> <ul style="list-style-type: none"> <li>○ <u>Incorrect</u> wording: <i>Patient has <u>history of</u> asthma.</i></li> <li>○ <u>Correct</u> wording: <i>Patient has asthma with no recent onset to exacerbation. Current medication includes albuterol inhaler.</i></li> </ul>
<p>➤ <b>Additional Coding Tips</b></p>	<ul style="list-style-type: none"> <li>○ Bronchitis (<i>J40</i>): too general, identify acute or chronic.</li> <li>○ COPD with asthmatic conditions: code both the COPD &amp; Asthma.</li> <li>○ Smoker’s cough (<i>J41.0</i>): do not use bronchitis code.</li> </ul>
<p>➤ <b>Documentation Tips</b></p>	<p>The following language supports actively monitoring [any] condition and must be documented by the provider. In the documentation, mention...</p> <ul style="list-style-type: none"> <li>○ Medications reviewed and are current.</li> <li>○ If patient is seeing a specialist.</li> <li>○ Whether there has been any or no recent onset to exacerbation.</li> </ul>
<p>➤ <b>HEDIS Tips</b></p>	<p>Members age 5-64 years with persistent asthma who were dispensed one asthma control medication <i>and</i> they continued medication during the treatment period within the past year<sup>4</sup>.</p>

1. American Lung Association (<http://www.lung.org/lung-health-and-diseases/lung-disease-lookup/asthma/learn-about-asthma/>)Reviewed November 28, 2022
2. WebMD: Asthma Health Center (<http://www.webmd.com/asthma/default.htm>)
3. 2023 ICD-10-CM Expert for Physicians: The Complete Official Code Set, Optum360. 2023 Optum360, LLC
4. 2022 HEDIS Technical Specifications
5. Asthma and Allergy Foundation of America Asthma Action Plan (<http://www.aafa.org/media/asthma-action-plan-aafa.pdf>)

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➤ **Secure Portal Registration:** If you haven’t already do so, please go to [www.HomeStateHealth.com](http://www.HomeStateHealth.com) to register for our Secure Portal. Functions on the portal include: Verification of eligibility, submission of claims, entering authorizations, viewing patient care gaps, etc. Use of the portal is FREE for all services!

➤ **Electronic Funds Transfer / Electronic Remittance Advice**

- Home State Health Plan partners with PaySpan Health for EFT/ERA services.
- Please register with PaySpan Health at [www.payspanhealth.com](http://www.payspanhealth.com)

Questions?

Contact Provider Relations at 1-855-694-4663.