Obesity Class documentation and coding

Weight diagnoses can be clinically significant to many patient conditions and should be documented and coded whenever present. The patient's height, weight and BMI may be obtained by medical staff and should be included in provider documentation for that date of service. The specific weight diagnosis must be documented by the provider.

Effective October 1, 2024, the International Classification of Diseases 10-CM (ICD-10) expanded diagnosis coding related to obesity. The addition classifies obesity as Class 1, 2 or 3 with delineation between pediatric and adult obesity codes. These changes intend to improve diagnostic accuracy, data collection and utilization, reduce the stigma associated with obesity and facilitate appropriate treatment.

2025 ICD-10 CM diagnostic clarifications for obesity in adults and children are outlined below:

Obesity in adults

- Class 1 (E66.811) (low risk) obesity is characterized by a body mass index (BMI) of 30.0 to 34.9
- Class 2 (E66.812) (moderate risk) obesity is characterized by a BMI of 35.0 to 39.9
- Class 3 (E66.813) (high risk) obesity is characterized by a BMI that is equal to or greater than 40

Coding of class 1,2, or 3 obesities in adults should include two ICD-10 diagnosis codes as seen in the tables below:

1. The code associated with the obesity class (New E codes set)
2. The code associated with the documented BMI (Z68 code set)

New E codes	Obesity severity	BMI range
E66.811	Class 1 obesity	30 to less than 35
E66.812	Class 2 obesity	35 to less than 40
E66.813	Class 3 obesity	40 or greater

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Adult BMI Z code	Adult BMI
Z68.25 – Z68.29	25-29.9
Z68.30 – Z68.39	30-39.9
Z68.41	40-44.9
Z68.42	45-49.9
Z68.43	50-59.9
Z68.44	60-69.9
Z68.45	70 or greater

Obesity in children and adolescents (classified based on age and gender-specific percentiles)

- Class 1 (E66.811) obesity is BMI >95th percentile
- Class 2 (E66.812) obesity is BMI =/>120% of the 95th percentile
- Class 3 (E66.813) obesity is BMI =/>140% of the 95th percentile

Documentation to support the obesity class codes **must** include the following:

- **Provider statement** of **obesity class**
- **Height, weight, and BMI** (may be obtained by ancillary staff) on the date of service that supports the selected ICD 10 code

Morbid obesity codes that include clarification of the cause of obesity (without description by class or inclusion of BMI) may be coded when documentation supports the diagnosis. There is also an ICD-10 code specific to drug-induced obesity that should be coded on provider claims when documentation in the patient's record supports this. The ICD-10 codes are as follows:

- Morbid (severe) obesity due to excess calories (E66.01)
- Morbid (severe) obesity with alveolar hypoventilation (E66.2)
- Drug-induced obesity (E66.1)

BMI can be coded as a secondary diagnosis when there is **documentation of an associated weight diagnosis** such as obesity, overweight, malnutrition or morbid obesity.

Diagnoses of morbid (severe) or class 3 obesity are associated with HCC coding. Diagnosis coding of a BMI =/>40 is also associated with HCC coding. Be certain that documentation related to your patient's weight and BMI status align. Use caution if importing weight-related diagnoses from a previous history or problem list into documentation for the current visit. This practice may lead to discrepant documentation that will fail if selected for a government payor risk adjustment validation audit.

Additional information about HCC coding is available on the Providers page of the Security Health Plan website at www.securityhealth.org/providers/hcc.