ULTIMATE HEALTH PLANS

Cardiomyopathy

Clinical overview, ICD -10 CM and documentation tips for providers

Cardiomyopathy refers to diseases of the heart muscle where it becomes enlarged, thick, or rigid, and Itit i's less able to pump blood through the body and maintain a normal electrical rhythm. In rare cases, the muscle tissue in the heart is replaced with scar tissue.

Types of Cardiomyopathy

- **Dilated Cardiomyopathy.** In this type of Cardiomyopathy, the left ventricle becomes enlarged (dilated) and can't effectively pump blood out of the heart. In most cases, the cause is unknown; however certain diseases (e.g. HTN, MI, ischemic heart disease), conditions, and substances (e.g.., Heavy metal poisoning, illegal drugs such as cocaine and amphetamines) also can cause the disease.

- **Hypertrophic Cardiomyopathy.** This type involves abnormal thickening of your heart muscle, particularly affecting the left ventricle. It is usually inherited, also can develop over time because of HTN, aging, or other diseases, such as metabolic disease.

- **Restrictive Cardiomyopathy.** In this type, the heart muscle becomes rigid and less elastic, so it can't expand and fill with blood between heartbeats. This least common type of Cardiomyopathy can occur at any age, but it most often affects older people. The cause can be idiopathic, or it can be caused by a disease elsewhere in the body that affects the heart, such as when iron builds up in the heart muscle (hemochromatosis).

- Arrhythmogenic right ventricular dysplasia. In this rare type of Cardiomyopathy, the right ventricle muscle is replaced by scar tissue, which can lead to heart rhythm problems. Genetic mutations often cause it. It usually affects teens or young adults and can cause sudden cardiac arrest in young athletes.

- **Unclassified Cardiomyopathy**. Other types of Cardiomyopathy fall into this category.

Signs and Symptoms

It can be asymptomatic or don't have symptoms in the earliest stages. However, as Cardiomyopathy worsens and the heart weakens, signs and symptoms of heart failure, such as shortness of breath, fatigue, and swelling in the ankles, feet, legs, abdomen, and neck veins, can occur. Other symptoms are dizziness; lightheadedness; fainting; irregular heartbeats; chest pain, especially after physical exertion or heavy meals.

Risk factors

People of all ages and races can have Cardiomyopathy. However, certain types of the disease are more common in certain groups. **Dilated Cardiomyopathy** is more common in **African Americans than Whites** and is more common in **men** than women.

Other risk factors may include:

- A family history of Cardiomyopathy, heart failure, or sudden cardiac arrest (SCA)
- Personal history of ischemic heart disease, heart attack, a viral infection that inflames the heart muscle, Diabetes or other metabolic disorders, severe obesity, hemochromatosis, sarcoidosis, or amyloidosis.
- Long-term alcoholism
- Long-term high blood pressure

Complications

Sometimes Cardiomyopathy can lead to the following complications:

- **Blood clots**. Because the heart can't pump effectively, blood clots might form.
- **Heart failure.** The heart can't pump enough blood to meet the body's needs.
- **Heart valve problems.** Because Cardiomyopathy causes the heart to enlarge, the heart valves might not close properly, causing a backward blood flow.
- **Cardiac arrest and sudden death.**

Diagnostics test

- Medical history and physical exam
- Electrocardiogram (ECG or EKG), Holter monitor, echocardiogram
- Blood tests (to check the Brain natriuretic peptic- BNP)
- Chest X-ray (to monitor for complications, such as fluid buildup in the lungs or enlarge heart)
- Treadmill stress test, Cardiac catheterization
- Cardiac MRI, CT Scan
- Genetic test or screening

Treatment

- Lifestyle changes
- Medications as blood thinners, antihypertensive, antiarrhythmics, diuretics.
- Surgically implanted devices such as a pacemaker, implantable cardioverter-defibrillator (ICD), Ventricular assist device (VAD).
- Non-Surgical procedures such as Septal ablation, radiofrequency ablation.
- Surgery such as Septal myomectomy.

Clinical Documentation and Coding Tips

- Always document it to the highest level of specificity
- SOAP Notes documentation tips:
  - **Subjective** – Document the presence or absence of any current symptoms related to Cardiomyopathy.
  - **Objective** – Document signs and symptoms and labs/test results related to Cardiomyopathy present at the time of the visit (such as swelling of lower legs, SOB, irregular heartbeat, BNP, EKG, chest X-ray results, etc.).
  - **Assessment** – Document diagnostic statements that are compatible with the ICD-10 nomenclature to the highest specificity. Document and link secondary cardiomyopathy to the underlying condition by using terms such as "due to," 'secondary to," "associated with," "related to," etc.
  - **Plan** – Document and link all medications used to treat Cardiomyopathy; detail any referrals, consultations, labs, or diagnostic testing requested.

Medicare Hierarchal Condition Categories (HCC)

Hierarchical condition category (HCC) coding is a risk-adjustment model designed to estimate future health care costs for patients. This model filters ICD-10CM codes into diagnosis groups (DxGs), and then into Conditions Categories (CCs). Hierarchies or families are placed to gain an HCC numeric code, which translates to a risk adjustment factor (RAF) value. Each diagnosis code found in the model, as a stand-alone diagnosis code or within a family or hierarchy, carries a value through RAF, but this value can change if the patient has other influencing factors such as ESRD, hospice, or are dual-eligible. Families or hierarchies set a value based on severity of illness, with more severe diagnoses carrying the overall risk score for that family. Diagnoses within families or hierarchies are inclusive of one another, while any additional diagnoses from other hierarchies or stand-alone diagnoses are additive and increase each patient's overall risk score.

Cardiomyopathy is a chronic condition that falls within the category **"Congestive Heart Failure"** (HCC 85) with an average RAF Score of 0.368. Sixty-one (61) stand-alone ICD-10 CM codes qualify for this HCC, and they do not belong to a family or hierarchy.

Coding Cardiomyopathy

- There are ten (10) ICD - 10CM applicable to code cardiomyopathy.

ICD-10 Code	Code description
I42.0	Dilated Cardiomyopathy
I42.1	Obstructive Hypertrophic Cardiomyopathy
I42.2	Other Hypertrophic Cardiomyopathy
I42.3	Endomyocardial (eosinophilic) disease
I42.4	Endocardial fibroelastosis
I42.5	Other restrictive Cardiomyopathy
I42.6	Alcoholic Cardiomyopathy
I42.7	Cardiomyopathy due to drug and external agent
I42.8	Other cardiomyopathies
I42.9	Cardiomyopathy, unspecified
I43**	Cardiomyopathy in diseases classified elsewhere
I25.5	Ischemic cardiomyopathy

Alwayss Remember

- Verify Cardiomyopathy is a current problem.
- Note the exact Cardiomyopathy description.
- Follow the ICD-10 CM official coding guidelines and conventions.
- Select the correct ICD-10 CM code to the highest specificity.