



# Focus on Pulmonary Fibrosis and Other Chronic Lung Diseases

## Facts about Pulmonary Fibrosis and Other Chronic Lung Diseases

**Pulmonary fibrosis** is when the lung tissue around and between the air sacs (alveoli) becomes scarred and damaged, causing thickened, stiff lung tissue. This makes it harder for oxygen to pass through the walls of the air sacs into the bloodstream, making the individual progressively more short of breath. Once the lung tissue becomes scarred, the damage cannot be reversed. About 140,000 Americans have been diagnosed with pulmonary fibrosis, and it is most likely to affect people ages 50 to 75. In most cases, there is no known cause for the disease; this is referred to as idiopathic pulmonary fibrosis (IPF).

Things that may increase the risk of pulmonary fibrosis include: cigarette smoking, exposure to environmental toxins or pollutants, radiation therapy to lungs or breast and certain medications. Lung damage can also occur from certain medical conditions including: GERD, SLE, rheumatoid arthritis, sarcoidosis, scleroderma, TB and pneumonia.<sup>1</sup>

### ICD-9-CM Coding:<sup>2</sup>

- **515** Postinflammatory pulmonary fibrosis (interstitial lung disease)
- **516.34** Respiratory bronchiolitis interstitial lung disease
- **714.81** Rheumatoid lung
- **516.30** Idiopathic interstitial pneumonia, not otherwise specified
- 530.81 Esophageal reflux  
Excludes: reflux esophagitis (530.11)

### ICD-10-CM Coding:<sup>3</sup>

- J84.10 Pulmonary fibrosis, unspecified
- J84.89 Other specified interstitial pulmonary diseases
- J84.115 Respiratory bronchiolitis interstitial lung disease
- M05.10 Rheumatoid lung disease with rheumatoid arthritis of unspecified site
- J84.111 Idiopathic interstitial pneumonia, not otherwise specified
- K21.9 Gastroesophageal reflux disease without esophagitis

**Chronic asthma** has been shown to put these persons at higher risk for developing COPD.

### ICD-9-CM Coding:<sup>2</sup>

- 493.90 Asthma, unspecified
- 493.91 Asthma, unspecified, with status asthmaticus
- 493.92 Asthma, unspecified, with (acute) exacerbation
- **493.20** Chronic obstructive asthma, unspecified
- **493.21** Chronic obstructive asthma, with status asthmaticus
- **493.22** Chronic obstructive asthma, with (acute) exacerbation

Note: **493.2x** excludes: acute bronchitis (466.0) and chronic obstructive bronchitis (**491.20-491.22**)

### ICD-10-CM Coding:<sup>3</sup>

- J45.909 Unspecified asthma, uncomplicated
- J45.998 Other asthma
- J45.902 Unspecified asthma with status asthmaticus
- J45.901 Unspecified asthma with (acute) exacerbation
- J44.9 Chronic obstructive pulmonary disease, unspecified
- J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection
- J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation

**Chronic Obstructive Pulmonary Disease (COPD)** is the third leading cause of death in America and has been diagnosed in nearly 13 million adults. Researchers estimate another 12 million have the disease, but have not yet been diagnosed.<sup>4</sup> COPD is a serious but highly preventable disease. Smoking is the leading cause of COPD in the U.S. COPD is an umbrella term for the diagnosis of emphysema and chronic bronchitis. Chronic asthma also puts individuals at higher risk of developing COPD. The definite diagnosis of COPD is made by using a spirometry test to measure how well the lungs are working. Providers should document and code the specific type of COPD when known: emphysema, chronic bronchitis or chronic asthma, rather than the default code of 496 COPD.

### ICD-9-CM Coding:<sup>2</sup>

- **496** Chronic airway obstruction, not elsewhere classified. Note: This code is not to be used with any code from categories 491, Chronic bronchitis; 492, Emphysema; and 493, Asthma
- 305.1 Tobacco use disorder (smoking)
- V15.82 History of tobacco use (smoked)

### ICD-10-CM Coding:<sup>3</sup>

- J44.9 Chronic obstructive pulmonary disease, unspecified
- F17.200 Nicotine dependence, unspecified, uncomplicated
- Z87.891 Personal history of nicotine dependence

### ICD-9-CM Coding:<sup>2</sup>

- **491.0** Simple chronic bronchitis (smokers' cough)
- **491.9** Unspecified chronic bronchitis
- **491.8** Other chronic bronchitis
- **491.20** Obstructive chronic bronchitis, without exacerbation
- **491.21** Obstructive chronic bronchitis, with (acute) exacerbation
- **491.22** Obstructive chronic bronchitis, with acute bronchitis

Note: Category 491 excludes chronic obstructive asthma (**493.2x**) (See above under COPD for tobacco use disorder)

### ICD-10-CM Coding:<sup>3</sup>

- J41.0 Simple chronic bronchitis
- J42 Unspecified chronic bronchitis
- J41.8 Mixed simple and mucopurulent chronic bronchitis
- J44.9 Chronic obstructive pulmonary disease, unspecified
- J44.1 Chronic obstructive pulmonary disease with (acute) exacerbation
- J44.0 Chronic obstructive pulmonary disease with acute lower respiratory infection

(See above under COPD for nicotine dependence)

<sup>1</sup> "Understanding Pulmonary Fibrosis." *American Lung Association*. N.p., n.d. Web. 15 Sept. 2014. <<http://www.lung.org/lung-disease/pulmonary-fibrosis/understanding-pulmonary.html>>.

<sup>2</sup> *Optum ICD-9-CM for Physicians Professional 2015. Vols. 1&2*. Salt Lake City: 2014.

<sup>3</sup> *Optum ICD-10-CM: The Complete Official Draft Set 2015*. Salt Lake City: 2014.

<sup>4</sup> "Chronic Obstructive Pulmonary Disease (COPD) Fact Sheet." *American Lung Association*. N.p., May 2014. Web. 15 Sept. 2014. <<http://www.lung.org/lung-disease/copd/resources/facts-figures/COPD-Fact-Sheet.html>>.