What is CMS's <u>Hierarchical Condition Categories</u>?

- Medicare Risk Adjustment payment model introduced by the Centers for Medicare and Medicaid (CMS) in 2004.
- The goal is to pay Medicare Advantage (MA) accurately and fairly by adjusting payment for Enrollees based on their demographics and their health status.
- This Risk Adjustment payment model measures the disease burden that includes 70 HCC categories, which are correlated to diagnosis codes.
- Accurate diagnosis code documentation (ICD-9 CM) and reporting now determines reimbursement.
 - 3,600 ICD-9 codes map to 1 of 79 HCCs (mostly chronic but some are acute)

Cms Hierarchical Condition Categories 2015 Pharmacy

Ying-Ying Zheng

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Encyclopedia of Pharmacy Practice and Clinical Pharmacy, 2019-06-28 Encyclopedia of Pharmacy Practice and Clinical Pharmacy Three Volume Set covers definitions concepts methods theories and applications of clinical pharmacy and pharmacy practice It highlights why and how this field has a significant impact on healthcare The work brings baseline knowledge along with the latest most cutting edge research In addition new treatments algorithms standard treatment guidelines and pharmacotherapies regarding diseases and disorders are also covered. The book s main focus lies on the pharmacy practice side covering pharmacy practice research pharmacovigilance pharmacoeconomics social and administrative pharmacy public health pharmacy pharmaceutical systems research the future of pharmacy and new interventional models of pharmaceutical care By providing concise expositions on a broad range of topics this book is an excellent resource for those seeking information beyond their specific areas of expertise This outstanding reference is essential for anyone involved in the study of pharmacy practice Provides a one stop resource for access to information written by world leading scholars in the field Meticulously organized with articles split into three clear sections it is the ideal resource for students researchers and professionals to find relevant information Contains concise and accessible chapters that are ideal as an authoritative introduction for non specialists and readers from the undergraduate level upwards Includes multimedia options such as hyperlinked references and further readings cross references and videos Coding and Documentation Guidelines for Hierarchical Category Conditions (HCC) David Shogan, 2017-06-24 Risk Adjustment and Hierarchical Condition Category HCC coding is a payment model mandated by the Centers for Medicare and Medicaid Services CMS in 1997 Implemented in 2003 this model identifies individuals with serious or chronic illness and assigns a risk factor score to the person based upon a combination of the individual s health conditions and demographic details The individual s health conditions are identified via International Classification of Diseases 10 ICD 10 diagnoses that are submitted by providers on incoming claims There are more than 9000 ICD 10 codes that map to 79 HCC codes in the Risk Adjustment model CMS requires documentation in the person's medical record by a qualified health care provider to support the submitted diagnosis Documentation must support the presence of the condition and indicate the provider s assessment and or plan for management of the condition This must occur at least once each calendar year in order for CMS to recognize the individual continues to have the condition Accurate HCC coding information helps create a more complete picture of the complexity of a patient population improves the value of the problem list and enables better management of a patient s chronic diseases And better documentation that captures the full complexity of the patient often results in appropriately higher reimbursement Current challenges and opportunities Provider organizations are facing several challenges as they plan for HCC coding and documentation 1 Provider engagement education and incentive alignment Impacts to workflow and efficiency 2 Insufficient or incomplete medical record documentation in the EHR 3 EHR disconnect and poor problem list

utilization 4 Incorrect coding 5 Inferior or non existent HCC specific analysis and prioritization The Medicare Annual Wellness Visit AWV is a yearly preventative care visit offered at no cost to all Medicare Part B beneficiaries The purpose of the visit is to identify patient risk factors and plan for future preventative service needs. This visit is well reimbursed and can be conducted by any licensed health professional or a team of professionals under the direct supervision of a physician While the AWV is recognized as an important benefit 82 3% of Medicare beneficiaries did not receive an AWV in 2015 The bottom line is that patients want time with their physicians to discuss their health Our clients have professed repeatedly that they see a difference in patient engagement as they capture more AWVs With changes like value based purchasing putting revenue at risk accurate documentation is even more critical A good physician query process helps but relying on queries alone leaves money on the table You need to prevent documentation errors from happening in the first place by getting your physicians to pay closer attention to what they write down The medical record should tell a story Coding specialist need to understand what the physician is thinking and know when the provider isn t documenting the complete information to assign the most specific diagnosis code Ensure that all opportunities for documentation improvement are identified For the medical record to be accurate and timely a physician query process should be in place Ongoing chart reviews and provider education reinforces the essential points of good documentation and helps to bridge the gap between what the provider needs clinically documented in the medical record from one visit to the next and the coding guidelines that are required to support the codes being submitted

Decoding **Cms Hierarchical Condition Categories 2015 Pharmacy**: Revealing the Captivating Potential of Verbal Expression

In a period characterized by interconnectedness and an insatiable thirst for knowledge, the captivating potential of verbal expression has emerged as a formidable force. Its ability to evoke sentiments, stimulate introspection, and incite profound transformations is genuinely awe-inspiring. Within the pages of "Cms Hierarchical Condition Categories 2015 Pharmacy," a mesmerizing literary creation penned by way of a celebrated wordsmith, readers attempt an enlightening odyssey, unraveling the intricate significance of language and its enduring impact on our lives. In this appraisal, we shall explore the book is central themes, evaluate its distinctive writing style, and gauge its pervasive influence on the hearts and minds of its readership.

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