Risk Adjustment Documentation & Coding

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CHAPTER 5

Developing Risk-Adjustment Policies

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Review: Coding Rules to Follow

- Guidelines for coding and reporting
- Instructions at the category or code level
- Centers for Medicare & Medicaid (CMS) guidance for compliant risk-adjustment coding
- American Hospital Association's (AHA's) *Coding Clinic for ICD-10-CM and ICD-10-PCS*
    - **Where else can we go to find rules for coding when the answers are not in the codebook or *Coding Clinic*?**

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Where to Begin? Ask Questions

- **Question 1: Are You Sure There Isn't a Rule for That?**
  - **Which of the following is *not* the subject of guidance in the codebook or *Coding Clinic*?**
    - What to report when the type of diabetes is not specified in the documentation
    - What to report when the patient is diagnosed with aceruloplasminemia after examining the patient's blood work and family history

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Where To Begin? Ask Questions *(continued)*

- **Question 2: Is a Policy Necessary?**
  - The two issues are time and money:
    - A common problem is causing production disruption.
      - When, specifically, should family history codes be abstracted?
    - A common problem is affecting the quality scores of coders.
      - How do I handle ‘history of cancer’ when the patient is documented as still undergoing chemotherapy?
    - Is there high financial risk in an audit if this issue isn’t resolved?
      - What do I do when a physician reverse-stages a pressure ulcer in documentation, but states the depth of the ulcer at its worst stage? Which stage can I compliantly abstract?

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Where To Begin? Ask Questions *(continued)*

- **Question 2: Is a Policy Necessary?** *(continued)*
  - Another issue to consider:
    - Compliance with epidemiology standards
      - Abstraction of B20 (HIV disease) vs Z21 (HIV-positive status) does not change the HCCs or RxHCCs, but the difference to the patient and to epidemiologists is substantial.

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Coding Policy Team

- Quality assurance (QA) representative
- Coding representative
- Training representative
- Management
- In some cases, payer clients

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Researching Online

- **How can you tell if the information on a website is reliable?**

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Researching Online *(continued)*

- **What is the difference between *Fact* and *Inference*?**

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Researching Online *(continued)*

- **How is a search performed?**
  - Use the current year in the search string.
  - Omit articles and conjunctions from the string.
  - Narrow the search to a specific source if it is pertinent (ie, NIH, CMS, NORD).
  - Choose key words—up to four—to narrow the search.
    - 2018 Aceruloplasminemia NORD
  - Do not use advice or opinions found online. Instead, follow the same sources used by the advice/opinions. Find citations for everything.

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Researching Online *(continued)*

- **Other issues to consider**
  - Is the entry fair and balanced?
  - Is the source credible?
  - Is it authored by an individual or by an organization?
  - Is the source pertinent to risk adjustment/diagnostic coding?

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Source → Age of Data ↓	Other Source (Websites, Forums, Coding Blogs)	Specialty Societies (American College of Cardiology, American Urological Association)	Federal Sources (National Institutes of Health; Chronic Conditions Data Warehouse)	CMS Documents (Medicare Learning Network, Medicare Internet-Only Manuals)	RA-Specific Documents From CMS, ICD-10-CM Guidelines, AHA's *Coding Clinic*
Undated	Not recommended	Limited value	N/A	N/A	N/A
Before ICD-10-CM implementation	Not recommended	Limited value for coding; Better value for clinical indicators	Somewhat authoritative	Moderately authoritative	Guidelines, *Coding Clinic* for ICD-9-CM: authoritative when not superseded by new information in ICD-10-CM; CMS RA guidance moderately authoritative
Since ICD-10-CM implementation	Limited value	Authoritative for clinical indicators	Moderately authoritative	Authoritative	Authoritative
In the past 12 months	Limited value	Authoritative for clinical indicators; Limited value for coding advice without government citation	Moderately authoritative	Authoritative	Authoritative

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Writing the Policy

- Support the policy with source document citations.
- Keep the official policy brief and simple.
- Communicate and train for the new policy.
- Maintain a record of the policy even when it becomes obsolete.

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Writing the Policy *(continued)*

- **What are some coding issues you want to see addressed in a coding policy?**

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Order Out of Chaos

- **Well-crafted coding policies generate:**
  - More consistent coding results
  - Reduced risk during audits
  - Increased productivity
  - Higher quality scores
  - More job satisfaction among coders
  - More job attractiveness to prospective employees
- **Why would coding policies add to job attractiveness and satisfaction?**

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