QI Weekly

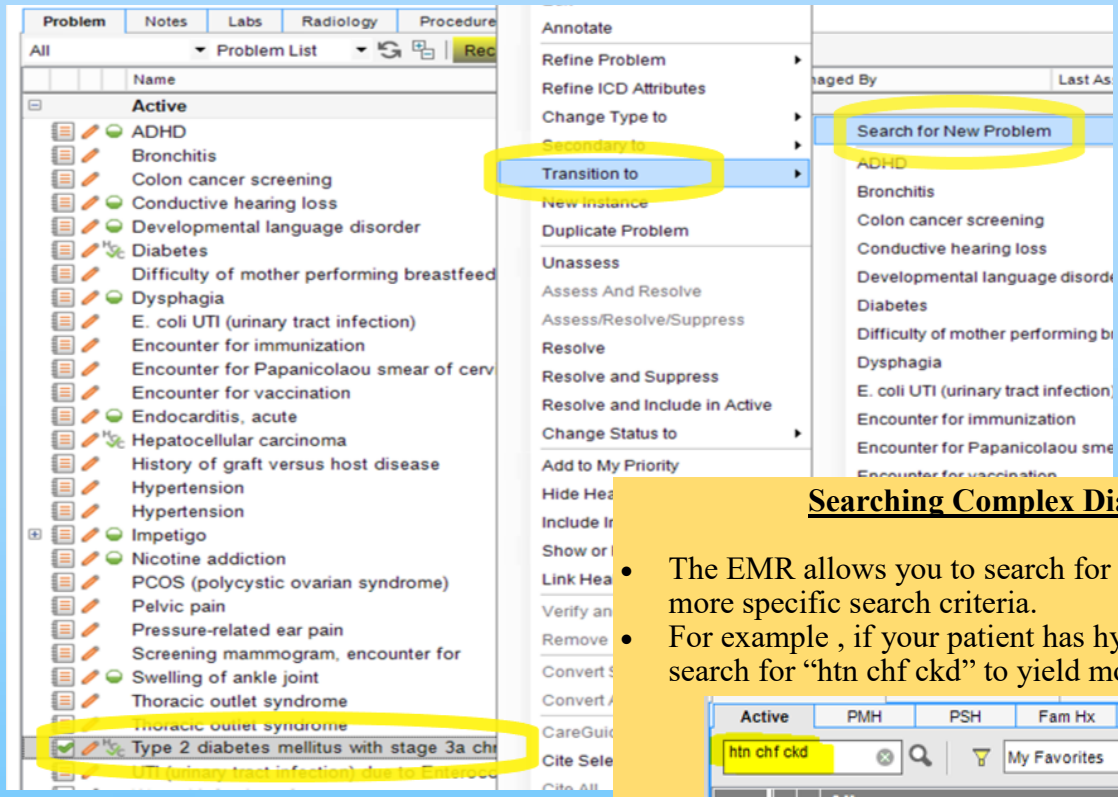
Transitioning HCC Codes

- HCC (hierarchical condition category) coding determines a patient's risk adjustment factor (RAF) score, which is used to decide the amount of money allocated to care for that patient for the year.
- The goal of the ACO is to deliver quality patient care at an average cost per year that is under the benchmark set by CMS.
- By coding to the **highest level of specificity possible,** a physician can increase a patient's risk score significantly, which increases the annual spend benchmark.

Coding Tips

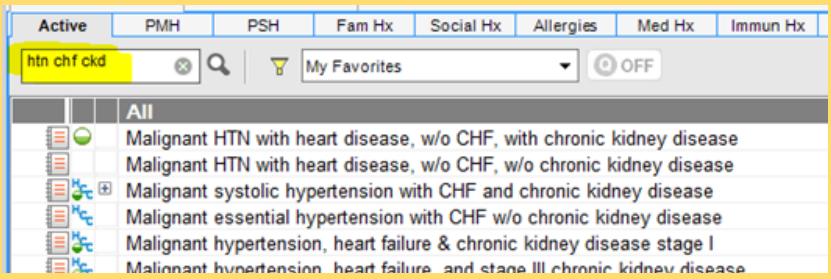
- Transitioning duplicative diagnoses into single, more specific diagnoses can help keep problem lists current, concise, and manageable.
- When a patient progresses from one disease stage to another or develops a complication, transition the initial diagnosis code, rather than completing and adding a new diagnosis.
- This practice can help to facilitate that all HCC codes are assessed **at least annually.**

Transitioning Diagnoses in Allscripts:



Searching Complex Diagnoses in Allscripts:

- The EMR allows you to search for complex codes easily by entering more specific search criteria.
- For example , if your patient has hypertensive CHF and CKD stage 5, search for "htn chf ckd" to yield more specific results



- If you see a "+" next to the description, you can click to get additional, more detailed options.