



Maintaining Excellence Through Industry Changes  
Utilizing Education

The image shows three men in business attire sitting around a white table in a modern office setting. They are engaged in a discussion, with one man gesturing while speaking. A laptop is open on the table. In the background, another person is visible working at a desk. The scene is brightly lit with large windows.

# Agenda

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- Overview – Optum360 Learning
- Examples of Current Instructor –Led Education
  - Code Changes for CMS Fiscal Year 2017 ICD-10-CM
  - Risk Adjustment - Hierarchical Condition Categories (HCC)
  - Evaluation and Management Codes – Advanced Concepts
- Demo of eLearning and CDI Video Education

# Invaluable Resources

- Optum360 provides invaluable industry resources.
  - Our educators help professionals involved in the business of healthcare get the most extensive and up to date education to be proficient in their practices and facilities.



# Learners

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- Optum360 offers an array of comprehensive education and training programs to ensure all impacted resources within your organization are adequately prepared or educated. Our training can be designed for your specific facility, learners, and rules.

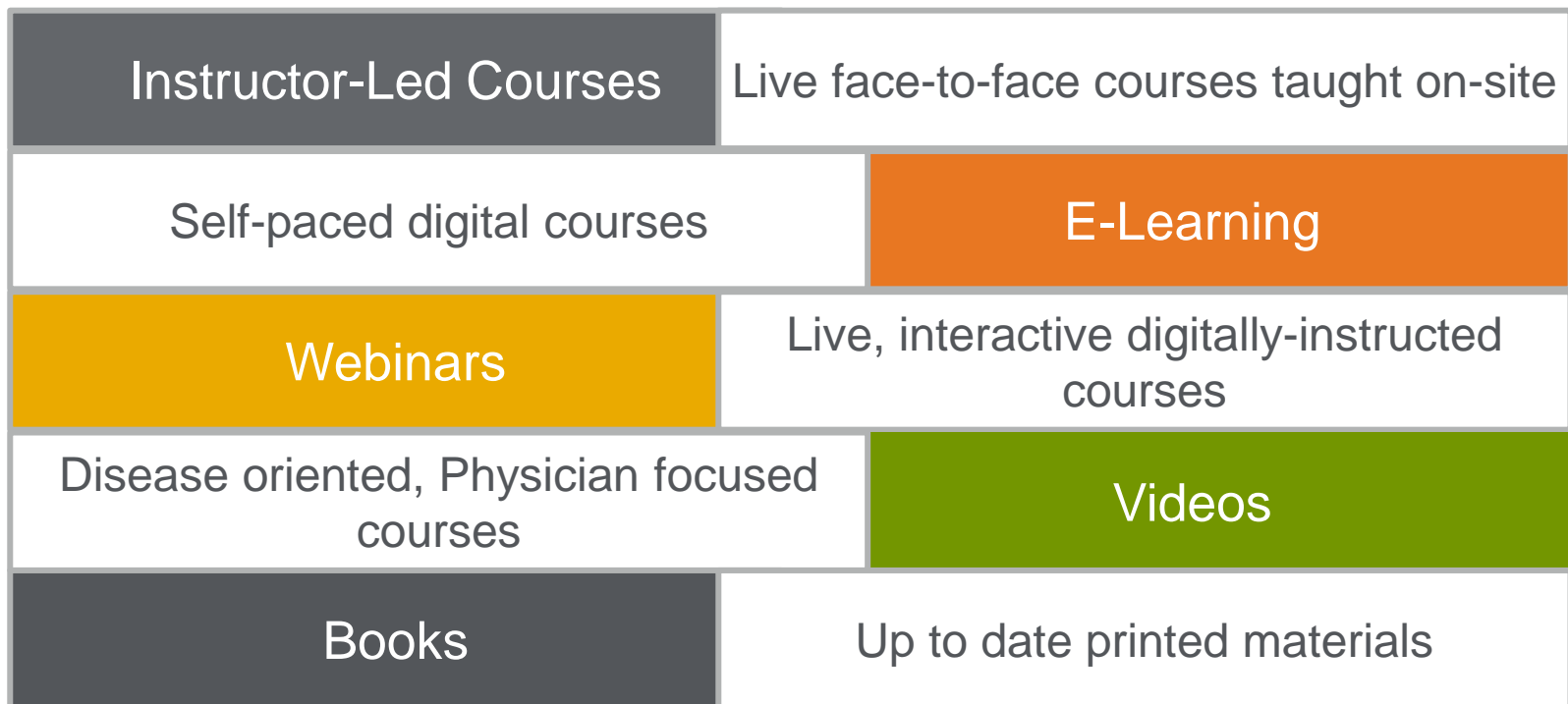
## Examples of learners:

<b>Coders</b>	<b>Clinical Documentation Specialists</b>	<b>Providers</b>	<b>Nurses</b>
<b>Revenue Cycle Staff</b>	<b>IT Staff</b>	<b>Reporting and Analytics</b>	<b>Ancillary Providers</b>

# Formats of Education

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- Continuous education ensures staff is able to maintain their credentials and keep current with industry updates and changes
- Optum360 offers various formats of education for every type of learner.



## Education Course Samples









Training Code  
Changes for  
FY 2017 -  
**ICD-10-CM**



# Overview of FY2017 Code Changes

Number of **New**, **Revised**, and/or **Deleted** codes

ICD-10-CM			ICD-10-PCS		
					
1974	425	311	3287	491	12

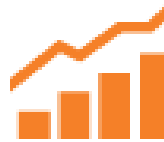
**7,040 total changes**



# Overview of FY2017 Code Changes



Reorganization of the code set



PCS New Technology Section Expansion



'Suspected to be' removal in OB



Improved Descriptions



New Root Operation - Perfusion



Increase in Laterality codes

- **32%** of new codes in CM
- **75%** of new codes in PCS

# How do the changes impact us?

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## ICD-10-CM

- Will it?

## ICD-10-PCS

- Increased specificity in PCS will require
  - ↑ anatomy knowledge for some coders
  - ↑ time to read op reports to select correct code
- Cardiology *heavily* impacted by additional vein and artery specificity

**Remember, we've been through changes before...  
and survived!**

		
1	0	0

## Certain infectious and parasitic diseases (A00-B99)

### Highlights

- A92.5. Zika Virus

		
79	0	9

## Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified (R00-R99)

### Highlights



- 43 new codes for National Institute of Health Stroke Scale (NIHSS) scores,
- Microscopic hematuria, expansion of total Glasgow Coma Score, bacteriuria, abnormal radiologic findings on diagnostic imaging, and expansion of abnormal Prostate Specific Antigen (PSA).



- Expansion of total Glasgow Coma Score
- Bacteriuria, abnormal radiologic findings on diagnostic imaging, and expansion of abnormal Prostate Specific Antigen (PSA).

		
1974	425	311

## FY2017 Code Changes

### Highlights



- Medical and Surgical section, root operation definitions for the root operations **Control** and **Creation** revised
- Extracorporeal Therapies section, new root operation **Perfusion** created
- PCS guidelines revised in response to public comment and internal review






# Section 0

		
3742	487	11

## Medical and Surgical

### Highlights

- |                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|   | <ul style="list-style-type: none"><li>• Codes focused on approach and artery and vein specificity<ul style="list-style-type: none"><li>– Bypass / Creation / Destruction / Dilation</li><li>– Excision / Extirpation / Fusion / Insertion</li><li>– Introduction / Monitoring / Occlusion / Perfusion</li><li>– Release / Removal / Repair / Replacement</li><li>– Reposition / Restriction / Revision / Supplement</li><li>– Transfusion / Transplantation</li></ul></li></ul> |
|  | <ul style="list-style-type: none"><li>• Term change from 'site' to 'artery' in descriptions</li><li>• Inclusion of 'descending' in descriptions</li></ul>                                                                                                                                                                                                                                                                                                                       |

			<h2>New Technology</h2>
27	4	0	
<h2>Highlights</h2>		<ul style="list-style-type: none"><li>• Codes focused on approach<ul style="list-style-type: none"><li>– Filtration</li><li>– Fusion</li><li>– Introduction</li><li>– Replacement</li><li>– Reposition</li></ul></li></ul>	
		<ul style="list-style-type: none"><li>• Inclusion of the term 'site' in the descriptions</li></ul>	

## Risk Adjustment - **Hierarchical Condition Categories (HCC)**





# Overview: Hierarchical Condition Category Definition

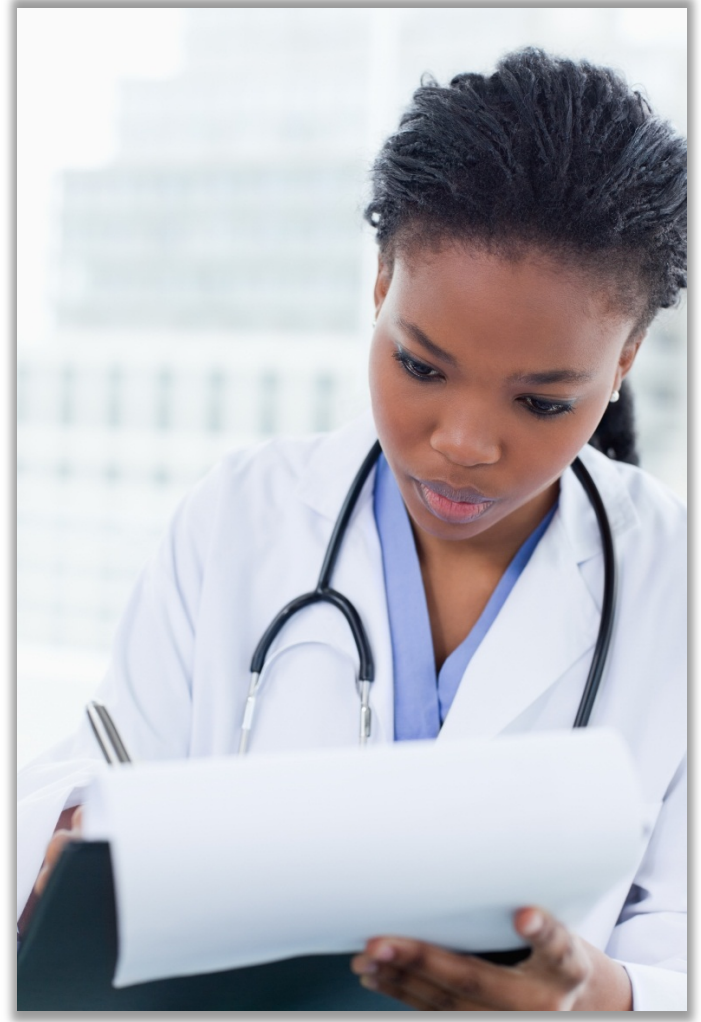
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**Hierarchical Condition Category (HCC)** is a reimbursement methodology to assist with predictive modeling of **health expenditure risks for beneficiaries**

- Adjusts payment so that there is **higher reimbursement** for **sicker patients**
- Designed to assist in keeping a beneficiary healthier by addressing chronic conditions before they become major illnesses
- Defined by two types of hierarchical condition categories (HCCs):
  - **Centers for Medicare and Medicaid Services (CMS)** HCCs for Medicare Part C (Medicare Advantage)
  - **U.S. Department of Health and Human Services** HCCs for Commercial Managed Care in Health Information Exchange

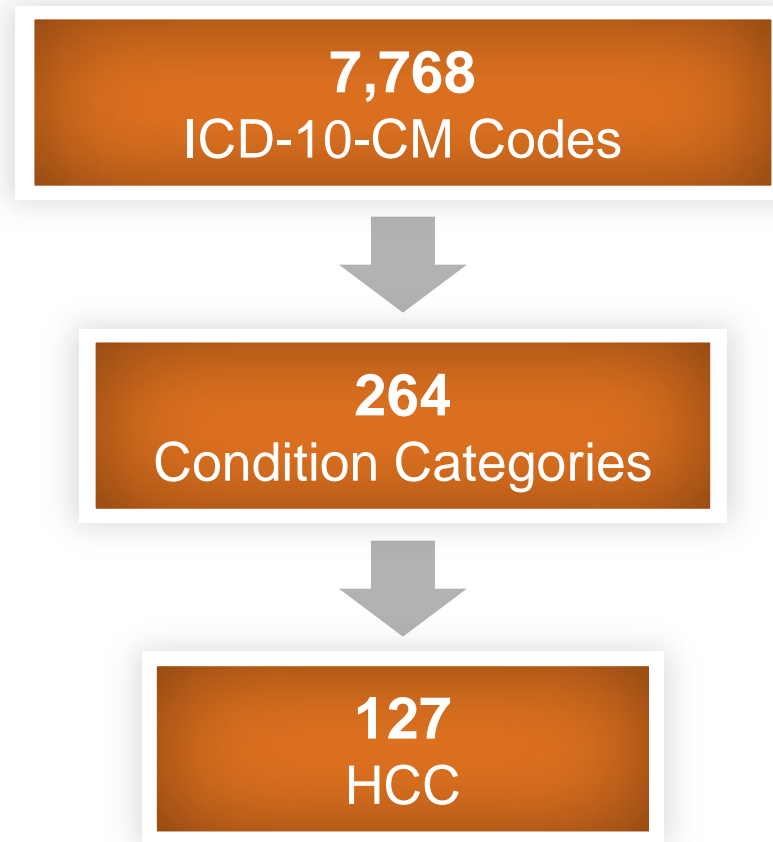
## Overview: HCC Methodology

- **HCC** represents a group or category of medical conditions mapping to a corresponding group of ICD-9-CM/ICD-10-CM diagnoses codes
- The number of HCCs and associated diagnosis codes changes from year to year, and can vary between models
- The **RxHCC** qualifies for an additional payment due to **increased medication management and costs**



# Overview: Example HCC Diagnosis Mapping

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Data Source: Kautter, J., Pope, G. C., Ingber, M., et al. *The HHS-HCC Risk Adjustment Model for Individual and Small Group Markets under the Affordable Care Act*. Medicare & Medicaid Research Review 2014: Volume 4, Number 3. Accessed at [http://www.cms.gov/mmrr/Downloads/MMRR2014\\_004\\_03\\_a03.pdf](http://www.cms.gov/mmrr/Downloads/MMRR2014_004_03_a03.pdf)

# Overview: Comparison of HCC to RxHCC

RxHCCs predicts those expenditures for which CMS Part D is responsible (prescription drug costs):

## RxHCC

- Represent the **additional cost of medication management** for a patient
- The RxHCC model does not incorporate medical costs
- Not all RxHCCs are also HCCs
- The RxHCC designations cover **many diagnoses not covered** in the HCC
- No physical prescription necessary

## HCC

- HCCs represent non-medication based treatment costs for a patient
- The HCC model **does not incorporate Medicare Part D (medication management) costs**
- **Almost all HCC diagnoses are also RxHCC codes**

Evaluation &  
Management –  
**Advanced Concepts**



# History Element: Past, Family, and Social History

## Complete PFSH (New Patient):

- Include *one* specific item from *all three* categories

## Specific Item Examples Include:

### Past History

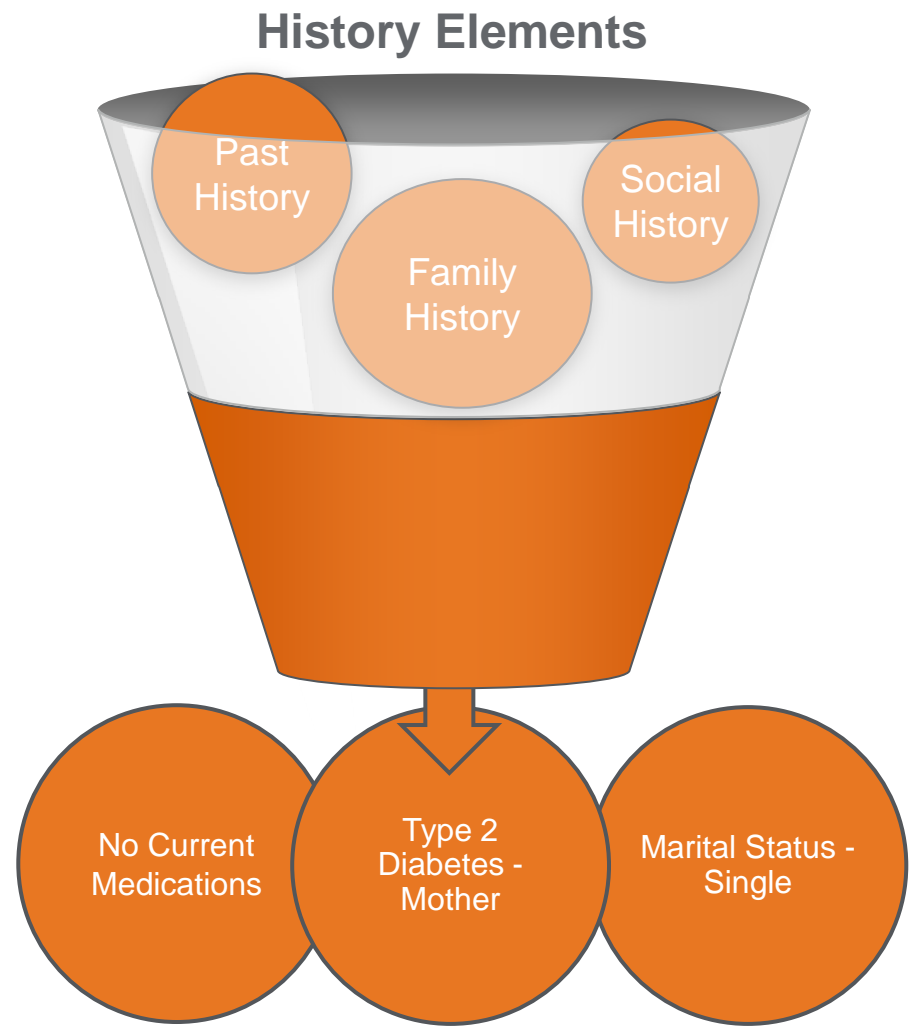
- Cholecystectomy 06/17/15
- No current medications

### Family History

- Colon cancer – successfully treated 1994 – Father
- Type 2 diabetes – Mother

### Social History

- Marital status: Single
- Nicotine use – has never used nicotine in any form



# History Element: Past, Family, and Social History

## Complete PFSH (Est. Patient):

- Include *one* specific item from *two* or *all three* categories

## Specific Item Examples Include:

### Past History

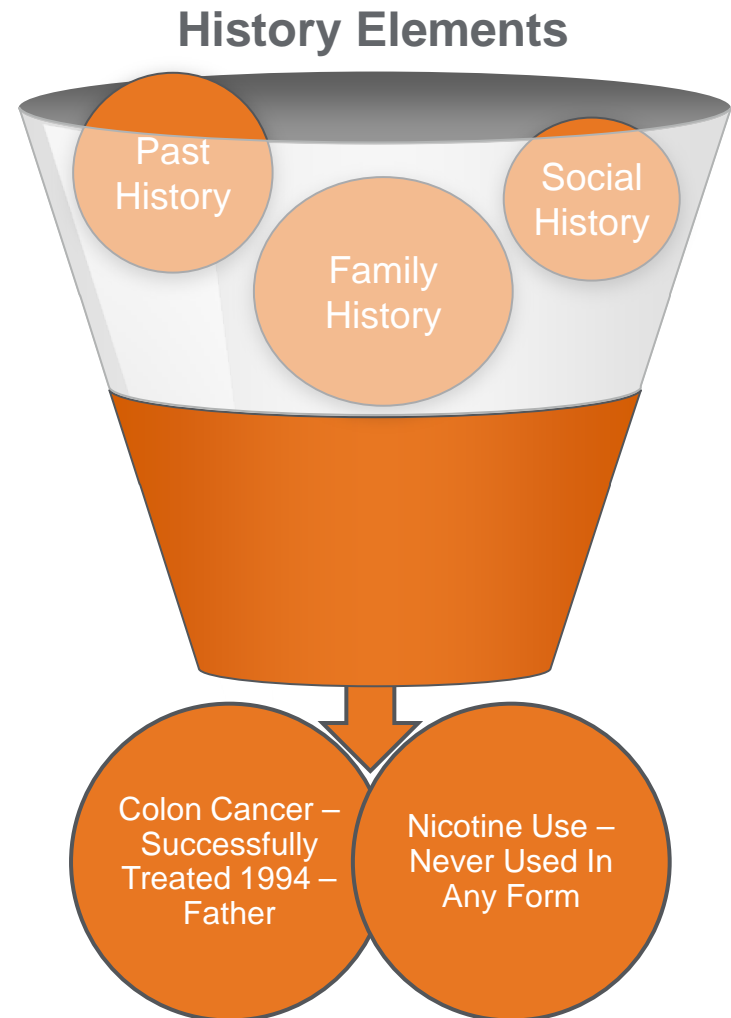
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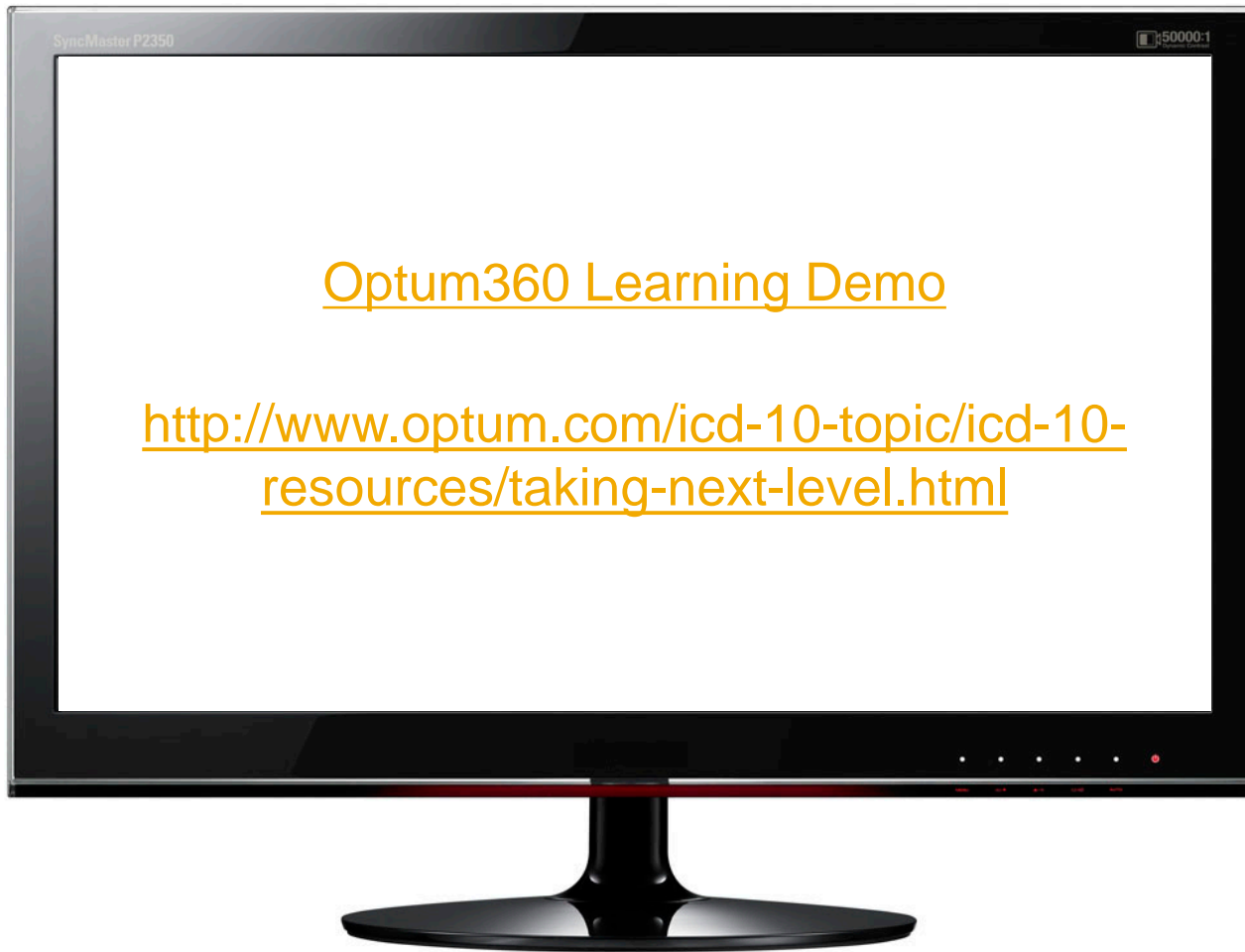


## Demos of eLearning and CDI Video Education



# Self-Running Demos

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# Thank you

Contact information

Becky Herrera, Educator – Optum360 Learning

Phone: 612-632-6812

Email: [rebecca.herrera@optum360.com](mailto:rebecca.herrera@optum360.com)