



arkansas
health & wellness™

Partnership for Quality Program

6/12/2020

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What is Partnership for Quality (P4Q)



P4Q is a provider engagement/ Risk Adjustment program incentivizing providers incrementally for their work on addressing chronic conditions. Providers earn bonus payments for proactively assessing members' current conditions in an effort to improve health and provide clinical quality care. Bonuses are earned for completed AND verified Appointment Agendas and/or submission of Comprehensive Physical Exam medical record.

Appointment Agenda alone or

Comprehensive Physical Exam along with an Appointment Agenda

- Providers can enter relevant documentation in the Arkansas Health & Wellness Secure Provider Portal under the "Provider Analytics" section.
- Measurement Period is from June 1, 2020 - December 31, 2020

What is Partnership for Quality (P4Q)



- Targeted Lines of Business (LOB)
 - Wellcare Medicare Business (does not replace or duplicate existing program)
 - Ambetter from Arkansas Health & Wellness Marketplace Business
 - Allwell from Arkansas Health & Wellness Medicare Business
- Who is included in the program?
 - Members included are those with disease conditions that are required to be assessed, addressed, and reported annually.
 - Member Selections are identified at the beginning of the program and are subject to change in future programs.
 - Member selections can be found utilizing the Secure Provider Portal.

P4Q Provider Responsibilities



- Schedule and conduct an exam with targeted members and use the Appointment Agenda as a guide assessing the validity of each condition identified.
- Log into the P4Q Dashboard under the Provider Analytic section of the Secure Provider Account, complete the check-boxes and submit the claims.
- Submit the claim using the correct ICD-10, CPT[®], CPTII[®] or NDC Codes.
 - You may also print the Appointment Agenda, sign and date the form, and submit the Completed Appointment Agenda and/or a Comprehensive Exam Medical Record by fax at 1-813-464-8879 or send via secure email to agenda@wellcare.com

Provider Bonus Structure for P4Q



- Bonus = \$100 for every Assessed Member
- Can increase up to \$200 and \$300 based on meeting thresholds outlined below.

% of Appointment Agenda Completed/Paid	Bonus Amount Per Paid Appointment Agenda
<50%	\$100
>50 to <80%	\$200
>80%	\$300

- Assessed member defined as:
 - **100%** of diagnosis coding gaps are assessed
 - Diagnosis gaps assessed by submitting diagnosis code(s) on a medical claim OR
 - Diagnosis gaps assessed by Checking the exclusion box in the P4Q Dashboard OR
 - Gaps assessed by checking “Assessed and Documented” in, or the “No Longer Valid” box or by submitting a Comprehensive Physical Exam Medical Record along with a completed an Appointment Agenda with boxes checked as above.
 - Provider must submit an acceptable claim with all “Assessed and Documented” diagnosis included demonstrating that an assessment was completed.

2020 P4Q Appointment Agenda



Components of the Appointment Agenda:

1. Health Condition History

Providers should check one box for each Disease Category listed on the agenda.

- ‘Active Diagnosis & Documented’ – Patient is currently presenting with this condition. Providers must submit a claim with a diagnosis code that maps to the Disease Category listed on the agenda.
- ‘Resolved/Not Present’ – Patient is not presenting with this condition. Provider must submit a claim with a 2020 face to face visit and should submit appropriate codes for conditions the Patient is currently presenting.

The Health Condition History/CoC component is all or nothing, ALL Disease Categories must have a box checked and verified with a claim to be eligible for the Bonus.

2. Care Guidance

This section is a guide only checking boxes in this section will not close care gaps. Address and document the Care Gaps below. Care Gaps are closed by a claim, CPT, CPTII, HCPCS, DX codes or applicable documentation. For additional information, please reference your care gap report.

Providers should submit the Agenda once the Health Condition History/CoC component is completed in its entirety. They do NOT need to complete the Care Guidance components prior to submitting.

The signature component can be completed by a credentialed provider or the facilitator of the program.

SMITH, BOB 0991637186				Member Phone : (314) 555-5555	
Member DOB : 1/1/2019					
TIN Name : AGAPE COMMUNITY HEALTH C					
Provider Name and ID : GLORIOSA REYNA ANTIPORDA 1497775316					
AGENDA - Use as a guide during the patient's visit.					
Health Condition History / Continuity of Care					
These conditions are based on claims submitted by providers and/or the member's medical history as of 4/30/2020. Please update diagnoses, as these conditions may no longer exist, their severity level may have changed, or they may have been replaced by other conditions.					
Suspected Rx/Condition	Type	Source	Diagnosis	Active Diagnosis & Documented	Resolved / Not Present
Central Nervous System, low	Assessed	ICD-10	G62.9 POLYNEUROPATHY UNSPECIFIED	<input type="checkbox"/>	<input type="checkbox"/>
Gastro, low	Persistence Gap	ICD-10	R16.0 HEPATOMEGALY NEC	<input type="checkbox"/>	<input type="checkbox"/>
Hematological, very high	Assessed	ICD-10	D57.00 HB-SS DISEASE WITH CRISIS UNS	<input type="checkbox"/>	<input type="checkbox"/>
Metabolic, high	Assessed	ICD-10	E83.111 HEMOCHROMATOSIS D/T REPEATED RBC TX	<input type="checkbox"/>	<input type="checkbox"/>
Malignancies	Assessed	NDC	49884072401 HYDROXYUREA CAP 500MG	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric, medium low	Persistence Gap	ICD-10	F43.10 POST-TRAUMATIC STRESS DISORDER UNS	<input type="checkbox"/>	<input type="checkbox"/>
Pulmonary, medium	Persistence Gap	ICD-10	J96.01 ACUTE RESPIRATORY FAIL W/HYPOXIA	<input type="checkbox"/>	<input type="checkbox"/>
Skeletal, low	Assessed	ICD-10	M81.0 AGE-REL OSTEOPOR W/O CURR PATH FX	<input type="checkbox"/>	<input type="checkbox"/>
Persistence = DX Code(s) have appeared in prior claims			Predictive = Possible condition(s) based on prior claims		
Care Guidance					
Address and document the Care Gaps below. Care Gaps are closed by a claim, CPT, CPTII, HCPCS, DX codes or applicable documentation. For additional information, please reference your Care Gap Report.					
Measure	Sub Measure	Anchor Date	Compliant Indicator	Condition Reviewed	
ADULT BMI ASSESSMENT	ADULT BMI ASSESSMENT	12/31/2019	Y	<input type="checkbox"/>	
ADULTS ACCESS TO PREVENTIVE/AMBULATORY HEALTH SERVICES	TOTAL	12/31/2019	Y	<input type="checkbox"/>	
CERVICAL CANCER SCREENING	CERVICAL CANCER SCREENING	12/31/2019	N	<input type="checkbox"/>	
MEDICATION RECONCILIATION POST-DISCHARGE	TOTAL	7/5/2019	N	<input type="checkbox"/>	
ANNUAL WELLNESS VISIT CENT	ANNUAL WELLNESS VISIT CENT	12/31/2019	N	<input type="checkbox"/>	

P4Q Comprehensive Physical Exam: CPE Documentation – Assessment and Plan



The Items below must be part of the Medical Record to meet the Partnership for Quality (P4Q) Program documentation requirements:

- Completed Appointment Agenda**
- Patient's name and date of birth on all pages of documentation**
- Date of service on all pages of documentation**
- History - This should include:**
 - Past medical, family, social history
 - Review of Systems (ROS)
 - History of Present Illness
- Physical examination - This should include:**
 - Height
 - Weight
 - BMI
 - Blood Pressure
 - Amputations
 - Functional deficits
 - Dialysis shunt
 - Temporary/permanent stomas
 - Abnormal findings
- Assessment**

Assess all known conditions, including chronic conditions, which affect the care and treatment of the patient.
- Treatment - Document the initiation of or changes in treatment. This can include:**
 - Medications: • statins • insulin • chemo • radiation • ACE/ARBs • DMARD for rheumatoid arthritis
*Documentation of medications should be linked to diagnosis
 - Patient Instructions
 - Therapy
Referrals: specialist, mammogram, eye exam, colonoscopy, etc.
 - Review and Summary
Summarize all results including diagnostic, radiology and pathology
- Provider name, signature, credentials, and date**

In addition to the above, please address the following with members as needed:
- Quality Measures**
 - Diabetic Patients:
 - Calculated HbA1C (value & date)
 - Monitoring for Nephropathy
 - Dilated Retinal Eye Exam
 - Depression Screening
 - Colorectal Cancer Screening
 - Breast Cancer Screening
 - Functional Status Assessment – review of ADL and IADL; cognitive status, ambulation status, Hearing/Vision/ Speech, other functional independence (exercise, ability to perform job)

Accessing the Secure Provider Portal

Ready to Login

Features Join Our Network [CREATE ACCOUNT](#)

The Tools You Need Now!

Our site has been designed to help you get your job done.

- **Check Eligibility**
Find out if a member is eligible for service.
- **Authorize Services**
See if the service you provide is reimbursable.
- **Manage Claims**
Submit or track your claims and get paid fast.

Login

User Name (*Email*)

Password

[Forgot Password / Unlock Account](#)

[Login](#)

Need To Create An Account?

Registration is fast and simple, give it a try.

[Create An Account](#)

How to Register

Our registration process is quick and simple. Please click the button to learn how to register.

[Provider Registration Video](#)

[Provider Registration PDF](#)

Navigating to Provider Analytics



From the Provider Portal click on the ***Provider Analytics*** link to be directed to the landing page.

A screenshot of the Provider Portal dashboard. At the top, there is a navigation bar with icons for Eligibility, Patients, Authorizations, Claims, and Messaging. Below this is a search bar with the text "Viewing Dashboard For:" and two dropdown menus, followed by a "GO" button. The main content area is divided into several sections. On the left, there is a "Quick Eligibility Check" section with input fields for "Member ID or Last Name" (containing "123456789 or Smith") and "Birthdate" (containing "mm/dd/yyyy"), and a "Check Eligibility" button. Below this is a "Recent Claims" section with a table. On the right, there is a "Welcome" section with a list of menu items: "Add a TIN to My ACCOUNT", "Reports", "Patient Analytics", and "Provider Analytics". The "Provider Analytics" item is highlighted with a red rectangular box. A large red arrow with the number "1" inside points from the "Provider Analytics" link in the menu to the "Recent Claims" table. Below the table, there is a "Recent Activity" section.

STATUS	RECEIVED DATE	MEMBER NAME	CLAIM NO.
	03/20/2017		
	03/20/2017		
	03/20/2017		

P4Q Portal Navigation



Select P4Q - Appointment Agenda

Provider Analytics

Overview Dashboards

[Summary](#)

[Cost Utilization/Services](#)

P4P Dashboards

[Quality](#)

[2020 MEDICAID P4P SCORECARD](#)

[2020 AMBETTER P4P SCORECARD](#)

[2020 ALLWELL P4P SCORECARD](#)

[P4P Payment History](#)

[P4Q - Appointment Agenda](#)

Resources

[Case Study Support Resource](#)

[FAQ](#)

[Tool Navigation Guide](#)

Alerts

[None](#)

P4Q Portal Navigation



☰ **P4Q - Appointment**

Show Me:

Line of Business

(All)

(All)

MARKETPLACE

MEDICAID

ANTIP

GUSALI

Diagn

I50.3

E10.5

A41.0

E87.5

Providers can also choose to filter by Line of Business.

☰ **P4Q - Appointment Agenda**

Coded Thru Claims as of: 4/30/2020

Member:

NPI: ALL

Appointment Agendas

Export List | TIN | NPI | Member

Member ID	Member Last Name	Member First Name	Date of Birth	NPI	Assessed	Unassessed	Assessed %
0991637186	SMITH	BOB	1/1/2019	1497775316	5	3	62.5%
U9240617801	EVANS	CHARLES	1/12/1960	1497775316	5	1	83.3%
U9272826801	WOMBLE	FRANKIE	11/19/1959	1497775316	5	0	100.0%
9438858806	SMITH	BOB	1/1/2019	1053638551	4	1	80.0%
U9032448401	SMITH	BOB	1/1/2019	1497775316	4	3	57.1%
7462108933	SMITH	BOB	1/1/2019	1497775316	3	6	33.3%
8145143624	MONROE	SHEILA L	12/25/1991	1497775316	3	2	60.0%
8146799132	SMITH	BOB	1/1/2019	1497775316	3	4	42.9%

NPI:

Assessable

Disease Condition	Diagnosis	Date	Status	Active Diagnosis & Documented	Resolved Not Present
Gastro. low	R16.0 HEPATOMEGALY NEC	Assessed 07/05/2019 05/14/2020	Light Green	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hematological. very high	D57.00 HB-SS DISEASE WITH CRISIS UNS	Coded Through Claims 02/19/2020 05/14/2020	Dark Green	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Malignancies	49884072401 HYDROXYUREA CAP 500MG	Coded Through Claims 03/24/2020	Dark Green	<input type="checkbox"/>	<input type="checkbox"/>
Metabolic. high	E83.111 HEMOCHROMATOSIS D/T REPEATED RBC TX	Coded Through Claims 02/20/2020	Dark Green	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric. medium low	F43.10 POST-TRAUMATIC STRESS DISORDER UNS	Unassessed 10/24/2018	Yellow	<input type="checkbox"/>	<input type="checkbox"/>

Member ID column will contain either MKP or MCR ID Number.

Member Status:
 Dark Green: Completed
 Light Green: Claim in Process
 Yellow: Not Completed

All data shown here is for illustrative purposes only. No actual PHI data is presented.

P4Q Portal Navigation



Users can export their list to excel.

Providers can search for a specific patient by typing in either the name or ID of the patient.

The info button is a drop-down menu containing links to FAQ on program rules and potentially detailed lists of diagnosis codes under each disease condition

P4Q - Appointment Agenda

Coded Thru Claims as of: 4/30/2020 LOB: ALL NPI: ALL

Member: **Export List** TIN NPI Member

Member ID	Member Last Name	Member First Name	Date of Birth	NPI	Assessed	Unassessed	Assessed %
0991637186	SMITH	BOB	1/1/2019	1497775316	5	3	62.5%
U9240617801	EVANS	CHARLES	1/12/1960	1497775316	5	1	83.3%
U9272826801	WOMBLE	FRANKIE	11/19/1959	1497775316	5	0	100.0%
9438858806	SMITH	BOB	1/1/2019	1053638551	4	1	80.0%
U9032448401	SMITH	BOB	1/1/2019	1497775316	4	3	57.1%
7462108933	SMITH	BOB	1/1/2019	1497775316	3	6	33.3%
8145143624	MONROE	SHEILA L	12/25/1991	1497775316	3	2	60.0%
8146799132	SMITH	ROB	1/1/2019	1497775316	3	4	42.9%

NPI:

Member: DOB:

Assessable

Disease Condition	Diagnosis	Assessment Status	DOS	Mod Date	Status	Active Diagnosis & Documented	Resolved Not Present
Gastro_low	R16.0 HEPATOMEGALY NEC	Assessed	07/05/2019	05/14/2020	●	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hematological_very_high	D57.00 HB-SS DISEASE WITH CRISIS UNS	Coded Through Claims	02/19/2020	05/14/2020	●	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Malignancies	49884072401 HYDROXYUREA CAP 500MG	Coded Through Claims	03/24/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Metabolic_high	E83.111 HEMOCHROMATOSIS D/T REPEATED RBC TX	Coded Through Claims	02/20/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric_medium_low	F43.10 POST-TRAUMATIC STRESS DISORDER UNS	Unassessed	10/24/2018		●	<input type="checkbox"/>	<input type="checkbox"/>

All data shown here is for illustrative purposes only. No actual PHI data is presented.

P4Q Portal Navigation



P4Q - Appointment Agenda

Coded Thru Claims as of: 4/30/2020 LOB: ALL TIN: NPI: ALL

Member:

Appointment Agendas:

Member ID	Member Last Name	Member First Name	Date of Birth	NPI	Assessed	Unassessed	Assessed %
0991637186	SMITH	BOB	1/1/2019	1497775316	5	3	62.5%
U9240617801	EVANS	CHARLES	1/12/1960	1497775316	5	1	83.3%
U9272826801	WOMBLE	FRANKIE	11/19/1959	1497775316	5	0	100.0%
9438858806	SMITH	BOB	1/1/2019	1053638551	4	1	80.0%
U9032448401	SMITH	BOB	1/1/2019	1497775316	4	3	57.1%
7462108933	SMITH	BOB	1/1/2019	1497775316	3	6	33.3%
8145143624	MONROE	SHEILA L	12/25/1991	1497775316	3	2	60.0%
8146799132	SMITH	ROR	1/1/2019	1497775316	3	4	42.9%

NPI: Member: BOB SMITH DOB:

Assessable

Disease Condition	Diagnosis	Assessment Status	DOS	Mod Date	Status	Active Diagnosis & Documented	Resolved Not Present
Gastro_low	R16.0 HEPATOMEGALY NEC	Assessed	07/05/2019	05/14/2020	●	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hematological_very_high	D57.00 HB-SS DISEASE WITH CRISIS UNS	Coded Through Claims	02/19/2020	05/14/2020	●	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Malignancies	49884072401 HYDROXYUREA CAP 500MG	Coded Through Claims	03/24/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Metabolic_high	E83.111 HEMOCHROMATOSIS D/T REPEATED RBC TX	Coded Through Claims	02/20/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric_medium_low	F43.10 POST-TRAUMATIC STRESS DISORDER UNS	Unassessed	10/24/2018		●	<input type="checkbox"/>	<input type="checkbox"/>

Once a box is checked or unchecked, the provider or authorized personnel needs to click "update" to save the updates

Note: If users export to Excel, they still need to go back into the P4Q dashboard to enter any exclusions.

P4Q Portal Navigation



P4Q - Appointment Agenda

Coded Thru Claims as of: 4/30/2020 LOB: ALL TIN: NPI: ALL

Member:

Appointment Agendas

Export List TIN NPI Member

Member ID	Member Last Name	Member First Name	Date of Birth	NPI	Assessed	Unassessed	Assessed %
0991637186	SMITH	BOB	1/1/2019	1497775316	5	3	62
U9240617801	EVANS	CHARLES	1/12/1960	1497775316	5	1	83
U9272826801	WOMBLE	FRANKIE	11/19/1959	1497775316	5	0	100
9438858806	SMITH	BOB	1/1/2019	1053638551	4	1	80
U9032448401	SMITH	BOB	1/1/2019	1497775316	4	3	57
7462108933	SMITH	BOB	1/1/2019	1497775316	3	6	33
8145143624	MONROE	SHEILA L	12/25/1991	1497775316	2	2	60
8146799132	SMITH	ROB	1/1/2019	1497775316	4	4	42.9%

NPI:

Member:

I attest that I am certified to make updates.

*

Enter Name

Assessable

Disease Condition	Diagnosis	Assessment Status	DOS	Mod Date	Status	Active Diagnosis & Documented	Resolved Not Present
Gastro, low	R16.0 HEPATOMEGALY NEC	Assessed	07/05/2019	05/14/2020	●	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hematological, very high	D57.00 HB-SS DISEASE WITH CRISIS UNS	Coded Through Claims	02/19/2020	05/14/2020	●	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Malignancies	49884072401 HYDROXYUREA CAP 500MG	Coded Through Claims	03/24/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Metabolic, high	E83.111 HEMOCHROMATOSIS D/T REPEATED RBC TX	Coded Through Claims	02/20/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric, medium low	F43.10 POST-TRAUMATIC STRESS DISORDER UNS	Unassessed	10/24/2018		●	<input type="checkbox"/>	<input type="checkbox"/>

Authorized personnel needs to enter their name to attest to the changes.

I attest that I am certified to make updates.

*

Enter Name

P4Q Portal Navigation



☰ 🔍 👤 P4Q - Appointment Agenda 🔔 ℹ️ 🌈

Coded Thru Claims as of: 4/30/2020 LOB: ALL TIN: NPI: ALL

Member:
Export List TIN NPI Member

Member ID	Member Last Name	Member First Name	Date of Birth	NPI	Assessed	Unassessed	Assessed %
0991637186	SMITH	BOB	1/1/2019	1497775316	5	3	62.5%
U9240617801	EVANS	CHARLES	1/12/1960	1497775316	5	1	83.3%
U9272826801	WOMBLE	FRANKIE	11/19/1959	1497775316	5	0	100.0%
9438858806	SMITH	BOB	1/1/2019	1053638551	4	1	80.0%
U9032448401	SMITH	BOB	1/1/2019	1497775316	4	3	57.1%
7462108933	SMITH	BOB	1/1/2019	1497775316	3	6	33.3%
8145143624	MONROE	SHEILA L	12/25/1991	1497775316	3	2	60.0%
8146799132	SMITH	BOB	1/1/2019	1497775316	3	4	42.9%

NPI:

Member: DOB: Update

Assessable

Disease Condition	Diagnosis	Assessment Status	DOS	Mod Date	Status	Active Diagnosis & Documented	Resolved Not Present
Gastro, low	R16.0 HEPATOMEGALY NEC	Assessed	07/05/2019	05/14/2020	●	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Hematological, very high	D57.00 HB-SS DISEASE WITH CRISIS UNS	Coded Through Claims	02/19/2020	05/14/2020	●	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Malignancies	49884072401 HYDROXYUREA CAP 500MG	Coded Through Claims	03/24/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Metabolic, high	E83.111 HEMOCHROMATOSIS D/T REPEATED RBC TX	Coded Through Claims	02/20/2020		●	<input type="checkbox"/>	<input type="checkbox"/>
Psychiatric, medium low	F43.10 POST-TRAUMATIC STRESS DISORDER UNS	Unassessed	10/24/2018		●	<input type="checkbox"/>	<input type="checkbox"/>

The member's record will now reflect the updated data.

All data shown here is for illustrative purposes only. No actual PHI data is presented.

Education Requests

Would you like training for you and your staff?

You can submit your requests to

Providers@arhealthwellness.com

or contact your Provider Relations Specialist directly



Coding and Documentation

Medical records may be requested to support data received via claims, on the Appointment Agendas and/or entered into the Provider Analytic tool.

Verifying Conditions for the P4Q Program



- ✓ Not all historic conditions appearing for P4Q are persisting conditions.
 - Some are shown to give a history of the member. Because members don't generally use the medical system unless they have an emergency, the provider should continue to assess them to ensure they are being properly managed before an emergency occurs.

Example: Myocardial Infarction (MI)

The member may not be currently experience a MI, rather the condition may now be a history of MI.

Provider Action: Document that condition is now historical and whether the patient follows a medication regimen and/or seeing a specialist.

Verifying Conditions for the P4Q Program



- ✓ Suspected conditions were derived from a variety of sources.
 - Claims data – a condition may have derived from the hospital, but the provider office now needs to confirm if the condition continues with any side effects or sequela
 - Example:** Acute Deep Vein Thrombosis (DVT)
The member was discharged from the hospital with Acute DVT and is now being managed prophylactically with compression stockings and medication.
 - Provider Action:** Document whether condition is chronic or recurrent or if it has resolved (history of). Make sure to support this with documentation that states if patient following a medication regimen and/or seeing a specialist.

Disease Condition

Documentation and Coding



- Be as specific as possible when documenting conditions
- One word, such as “chronic” can make a big difference in Disease Condition coding.

COMPLETE AND ACCURATE DOCUMENTATION IS KEY

DISEASE	DOCUMENTED CONDITION	HHS-HCC
Bronchitis	Bronchitis	No HHS-HCC
	Chronic Bronchitis	HHS-HCC 160
Depression	Depression NOS	No HHS-HCC
	Severe Depression, single episode	HHS-HCC 88
Hypertension	Hypertension	No HHS-HCC
	Hypertension with heart failure	HHS-HCC 187
Chronic Kidney Disease	CKD	No HHS-HCC
	CKD 4	HHS-HCC 188
	CKD 5	HHS-HCC 187
	ESRD	HHS-HCC 184

Illustrative purposes only HHS-HCC V05



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health & wellness™

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