Minding The Gaps FAQ

Q: What is Medicare Risk Adjustment and why is it important?

A: Risk Adjustment ensures adequate Medicare funding for a patient's care each calendar year. Each January 1, a patient's risk score is reset for a new year based on claim codes that providers associated with the patient's medical diagnoses when they billed for care during the previous year. Next year's budget for their care is rebuilt with this year's claim codes.

Q: What are Hierarchical Condition Categories?

A: Hierarchical Condition Categories, or HCCs, are sets of medical codes that are linked to specific clinical diagnoses. Since 2004, HCCs have been used by the Centers for Medicare and Medicaid Services (CMS) to identify individuals with serious acute or chronic conditions. Each HCC represents diagnoses with similar clinical complexity and expected annual care costs. This allows Medicare to project the expected risk and future annual cost of care for these conditions.

Q: What are CPT II codes and why are they important to include with claims?

A: CPT Category II codes are supplemental tracking codes that can be used for quality performance measurement by providing actual health care data when submitted with the CPT (diagnosis) code. For example, there are CPT II codes that provide blood pressure readings as well as actual HgA1c values. The use of the tracking codes for performance measurement will decrease the need for record abstraction and chart review, and thereby reduce administrative burdens on physicians and other health care professionals.

Q: How does CHOICE support providers with member pre-visit planning, and closing gaps in care?

A: CHOICE can provide support in multiple ways:

- CHOICE provides monthly member specific HEDIS and other Quality Measures gaps in care (GIC) reports and can provide historical diagnoses information to assist in completing Risk Adjustment during a comprehensive visit.
- CHOICE care managers can assist with scheduling Annual Wellness/Comprehensive Visits
- The CHOICE Clinical Quality team can provide individual workflow training for your clinical office staff and billers/coders
- You can always email us for more information at <u>Choice.ProviderRelations@vnsny.org</u>

Q: Where can I find additional information and resources for Provider Education topics related to Quality Measure Performance and Risk Adjustment?

A: Visit the VNSNY CHOICE Provider Website for additional information and provider resource:

https://www.vnsnychoice.org/for-health-professionals-overview/provider-toolkit/