Risk Adjustment Coding Microcredential

Content Outline

A. Risk Adjustment Methodology (32-36% of questions)

1. Understand risk adjustment methodology.
2. Differentiate among the risk adjustment models.
3. Apply risk adjustment knowledge to appropriately assign hierarchical condition categories (HCCs).
4. Understand HCC disease interactions.
5. Understand the components of the risk adjustment factor (RAF) score, and how it is used to evaluate key performance indicators.

B. Risk Adjustment Documentation and Compliance (32-36% of questions)

1. Distinguish between acceptable versus unacceptable data sources to use when abstracting for risk adjustment coding.
2. Distinguish between acceptable versus unacceptable facilities, specialty types, and care-support credentials when reviewing documentation in the health record.
3. Recognize a compliant provider signature on a medical document.
4. Assess sufficiency of documentation to support coding of a diagnosis using the Monitor-Evaluate-Assess-Treat (MEAT) or Treatment-Assessment-Monitor-Plan-Evaluate-Refer (TAMPER®) criteria.
5. Describe how risk adjustment data validation (RADV) audits support the hierarchical condition categories (HCC) validation for payment.

C. Medical Terminology Anatomy (15-17% of questions)

1. Recognize or define commonly used medical terminology, acronyms, eponyms, etc.
2. Understand the location and physiology of anatomic structures.
3. Recognize chronic illnesses and identify common symptoms and treatments for chronic conditions.

D. Quality or Regulatory Reform (15-17% of questions)

1. Describe the quality components that indicate performance under risk adjustment models (e.g., STAR rating).
2. Describe Accountable Care Organizations (ACO) and the Merit-based Incentive Payment System (MIPS) and their impact on value-based care.
3. Recognize areas of possible noncompliance as established by the Office of Inspector General (OIG) and its work plan.
4. Define the functions of the Medicare Shared Savings Program (MSSP) including the benefits, model (one sided vs. two side risk, etc.), and impact on quality of care.

E. Foundational Coding

Candidates should have experience and skills in the following areas related to foundational coding. The ability to complete these tasks will be assessed in conjunction with the task statements shown in domains A-D. The number of questions that incorporate Foundational Coding will vary.

1. Review a health record and apply applicable coding guidelines and conventions.
2. Assign diagnoses based on the provider's documentation.

F. Frequently Coded HCC Conditions
Candidates should be familiar with the following frequently coded Hierarchical Condition Categories (HCC) conditions. These HCC conditions will be assessed in conjunction with the task statements shown in domains A-D. The number of questions that incorporate Frequently Coded HCC Conditions will vary.

- Social determinants of health (SDOH)
- Rheumatologic diseases – Systemic lupus erythematosus (SLE, Lupus1), Systemic sclerosis, Sicca syndrome (Sjögren's syndrome), Rheumatoid arthritis (RA), Ankylosing spondylitis, Polymyalgia rheumatic
- Cardiac Arrhythmias
- Coronary Artery Disease
- Deep Vein Thrombosis
- Heart Failure, Pulmonary Hypertension
- Hypertension
- Chronic Kidney Disease/ Failure
- Myocardial Infarction and Angina
- Common vascular disease - Atherosclerosis of the aorta, Atherosclerosis of the renal artery, Atherosclerosis of the extremities, Atherosclerosis of the extremities with intermittent claudication, Atherosclerosis of the extremities with ulceration, Thoracic aortic aneurysm, Abdominal aortic aneurysm, Peripheral vascular disease due to diabetes mellitus, Peripheral vascular disease, Phlebitis and thrombophlebitis of the femoral vein, Phlebitis and thrombophlebitis of other deep vessels of lower extremities
- Peripheral vascular disease (PVD)
- Aneurysms
- Pulmonary Disease-Bronchitis, Emphysema, COPD, Bronchiectasis & Asthma
- Pulmonary Embolism
- Parkinson's disease and Parkinsonism How about Alzheimer's dementia
- Seizure and seizure disorder
- Stroke and late effects (sequelae) of stroke
- Pressure and Non-Pressure ulcers
- AIDS and HIV
- Fractures
- Osteomyelitis
- Malnutrition
- Immunodeficiency status
- Morbid obesity and body Mass Index (BMI)
- Cachexia
- Diabetes Mellitus, Long Term (current) us of Insulin
- Dementia
- Depression, Anxiety and Bipolar Disorder
- Drug Dependence
- Cancer (neoplasm)
- Liver Disease/Failure
- Crohn's Disease, Ulcerative Colitis
- Diabetes Mellitus with Complications
- Bone Marrow Transplant / Heart Transplant/ Heart-Lung Transplant/ Liver Transplant/ Lung Transplant (Status & Complications-Rejection/failure/infection) & Encounter for aftercare following transplant
- Absence of extremities (e.g. toe, ankle, leg below knee)
- Ostomy statuses (e.g. colostomy, gastrostomy, tracheostomy)
- Other pediatric and commercial diagnoses from the HHS HCC model?
- Other OBGYN, pediatric, respiratory, congenital disorder