

Home Health ICD-9/ICD-10 Alert

CODING 101: SECURE CASE MIX POINTS IN 5 STEPS

Don't overlook co-morbidities.

Case mix points are still important in making certain your agency received the correct reimbursement for the care you provided. Make sure you keep the following four points in mind when listing your patients' diagnosis codes.

1. Know when to report a V code. If you place a V code in the primary or any of the secondary diagnosis positions in M0230 and M0240 -- and the V code replaces a case mix diagnosis -- you have an opportunity to gain case mix points for the episode.

In general, sequencing V codes is discretionary unless it is a V code with multiple, dual, or paired coding instructions such as "use additional code" or "code first," says **Trish Twombly, RN, BSN, HCS-D, CHCE**, director of coding with Foundation Management Services in Denton, Texas. When you see instructions such as these, follow manifestation coding guidelines, and sequence the V code accordingly.

2. Determine the focus of care. Look to the OASIS assessment and the information you have from the hospital or physician. Together with the plan of care, these documents determine the focus of care and the secondary diagnoses that may impact the care. The primary diagnosis is the diagnosis most related to the current home health plan of care, says **Jun Mapili, PT, MAEd**, with Global Home Care in Troy, Mich.

3. Don't forget co-morbidities. Don't overlook co-morbidities that are addressed in the plan of care or that may affect the plan of care or rehab prognosis. These conditions can earn case mix points because they will impact the care you provide.

4. Keep an eye on non-routine supplies. The clinical portion of the home health resource group (HHRG) isn't the only measure sequencing can impact. It will also affect non-routine supply (NRS) reimbursement as well as your agency's risk adjustment.