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M1024: Shed Some Light on Risk Adjustment Grey Area

Must you sacrifice risk adjustment to CMS' letter of the law?

At one time, there was an OASIS Q&A from CMS that permitted coders to list non-case mix diagnoses for risk adjustment in M1024 (Payment diagnoses). But that item, along with another that mentioned repeating case mix diagnoses in M1024 were removed in the Sept. 2009 Q&A update, says **Sparkle Sparks, MPT, HCS-D, COS-C**, with Redmond, WA-based **OASIS Answers**.

CMS is still working on the new risk adjustment model, but it will mimic the old model, Sparks says. M0246 did contribute to risk adjustment, so M1024 may as well. But at the present time, there is no longer official CMS guidance that gives you the option to list codes for risk adjustment in M1024 when they don't meet the CMS guidelines.

"There is more to coding than reimbursement," says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C**, consultant and principal of **Selman-Holman & Associates** and **CoDR -- Coding Done Right** in Denton, Texas. "There is painting an accurate picture of the patient's health to reflect the plan of care, and there is risk adjustment. When you can gain risk adjustment for listing a diagnosis code in M1024, which would impact your outcomes scores and accurately show the acuity of your patient population ... why wouldn't you code it?"

Tip: M1024 is not the only data item that will provide risk adjustment for those conditions that may no longer exist (resolved conditions) and fractures, Selman-Holman says. These conditions would also possibly be placed in M1010 (Inpatient Diagnoses) and M1016 (Diagnoses Requiring Change in Treatment Regimen).