

## Home Health ICD-9/ICD-10 Alert

### Prospective Payment System: Understand The Coding Changes The New Year Brings

Plus some very important things don't change.

If you feel as if there are still a million things to figure out now that the 2008 change are arriving, you're not alone.

Home health agencies will "need to work out how they are going to fine tune their selection and sequencing of diagnoses," advises Chicago-based regulatory consultant **Rebecca Friedman Zuber**. Coders should represent, in descending order of importance, what the care plan aims to address.

"They will need to do a good job completing M0230/M0240/M0246, she stresses.

The new PPS case mix system will give much more consideration to diagnosis coding and related conditions, said **Pat Sevast** with the **Centers for Medicare & Medicaid Services**, speaking at the **OASIS Certificate & Competency Board's** first annual conference in Baltimore Nov. 12.

"Welcome to the new world," Sevast said. "It's no longer just primary diagnosis. [PPS is] not the same as before and it's not simple."

But following diagnosis coding guidelines should not change, stressed **Abt Associates' Henry Goldberg**, speaking at the same conference. "You're not supposed to change anything," he said of diagnosis coding.

You should already be coding your patients and completing OASIS accurately, Goldberg noted. Just continue to do so and work toward understanding how that will affect reimbursement under the prospective payment system refinements that take effect Jan. 1.

#### Focus On The Whole Picture

"Paint the picture of your patient" with diagnosis coding, urged **Sparkle Sparks** with Redmond, WA-based **OASIS Answers** in the session. Don't focus on whether it brings you more reimbursement, but whether it accurately depicts the patient, said Sparks, who taught two days of intensive coding training at the OCCB conference.

That said, the way diagnosis coding will affect payment will be changing drastically under PPS refinements, the experts admitted.

#### Get Used To The New Look

The coding items, M0230/M0240/M0246, look totally different on the new OASIS assessment form. There is now a four-column box with six lines. On each line you are asked for:

- (1) the M0230 primary or M0240 other diagnosis description;
- (2) the corresponding ICD-9 code and its severity;
- (3) the M0246 case mix diagnosis if it's bumped out of column 1 and 2 with a V code (optional); and

(4) the M0246 case mix diagnosis if it's a manifestation code that was bumped (optional).

PPS will use codes from all six lines in the box, Goldberg stressed. "It's important to pay attention to all six positions," he advised.

**Remember:** Only one diagnosis per line in the box scores case mix points, Goldberg reminded attendees. And for bumped case mix and manifestation codes in M0246 to count, they must correspond to the correct V code or etiology code on the same line.

Note: For more on the PPS refinements and how they will impact your agency, order **Eli's** Home Care Week at 1-800-874-9180.