

# CAPTURING AND CONFIRMING CHRONIC CONDITIONS YEARLY

## Medicare Advantage

### 2020 Chronic Care Quality Initiatives

One of Cigna's quality initiatives is related to the capture and confirming of chronic diagnoses/conditions among Medicare Advantage patients. Confirming chronic diagnoses every year is critical to improving patient health. Failure to document active conditions with a treatment plan every year indicates to CMS that the condition no longer exists.

### Chronic Condition Documentation Consistency (CCDC)

The CCDC report is an internal tool that identifies diagnoses that have not been confirmed in an applicable year. For example, the CCDC identifies a condition such as diabetes confirmed in 2019, but not recaptured in 2020. To improve chronic condition documentation consistency, the CCDC provides clinicians with an analysis of conditions not reported in the applicable calendar year. The CCDC may also provide a reason that a condition has not been confirmed.

### Sources of diagnoses/chronic conditions

Conditions are reported from a variety of sources, including:

- Health Maintenance Records (HMRs) – refer to acronyms on far right of HMR
- 360s and/or Arcadia 360 Comprehensive Assessments
- Primary care claims
- Specialist claims
- Hospital inpatient records
- Chart reviews of primary care and specialist records

Turn to back for more important information. 

### CIGNA IS HERE TO HELP

Cigna has an overarching commitment to accurate and complete coding and documentation.



Together, all the way.®

## IMPORTANT

When completing HMRs, 360s and/or Arcadia 360 Comprehensive Assessments, it is critical to:

- 1) Select the most appropriate/applicable diagnosis ;
- 2) Document (validate) the diagnosis with a treatment plan ; and
- 3) Do not document or support a document that you believe does NOT exist.

## USE REMINDERS TO CAPTURE SPECIALIST CLAIMS

It is important to review specialist and hospital records to ensure that all chronic conditions are reflected. To help ensure records are available when completing HMRs, 360s and/or Arcadia 360 Comprehensive Assessments, some providers:

- Use a reminder system to track referrals to specialists and the subsequent receipt of the records from that visit.
- Send a fax request for the specialist's records when the referral is made so the request is already in the specialist's office.

## TIPS FOR SUCCESS

- **Complete** all HMRs, 360s and/or Arcadia 360 Comprehensive Assessments as soon as possible in the year. When completing HMRs, consider the HMR source.
- **Review** any specialist records in your system and files.
- **Select** the most appropriate/applicable diagnosis. Review radiology studies, labs and discharge summaries to improve diagnostic capture.
- **Validate** diagnoses in the progress note A&P. Incorporate a specific diagnosis addressing laterality when appropriate.
- **Include** a treatment plan. Treatment plans may include medications, diet, referrals, diagnostic testing and monitoring.
- **Contact** your provider education specialist or or [CCQI@healthspring.com](mailto:CCQI@healthspring.com) if you believe any codes were previously submitted in error. Please provide the patient's name and diagnosis code so the code can be researched and retracted, if appropriate.

## CIGNA IS HERE TO HELP

If you're having difficulty obtaining records from another provider, please notify your Cigna Network Operations Representative for immediate assistance.

