



DELAWARE VALLEY ACO  
an accountable care organization



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# HCC HEMATOLOGY ONCOLOGY SESSION





# HIERARCHICAL CONDITION CATEGORY

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PURPOSE



# The Purpose of Hierarchical Condition Category (HCC) Coding

- To accurately reflect the health of your patient population
  - Risk adjustment scores are higher for a patient with a greater disease burden and less for the more healthy patient
  - The diagnosis codes that are reported by your practice on the patient claims determine the patient's disease burden and risk score
  - Chronic Conditions are reported once per year (or more based on visit pattern of the patient and the complexity of their condition)

# The Purpose of Hierarchical Condition Category (HCC) Coding (continued)

- There are over 9,700 ICD-10-CM codes that map to one or more of the 86 HCC codes included in the 2021 CMS-HCC Risk Adjustment Model. Examples of Conditions represented include:
  - Amputation
  - Chronic Kidney Disease
  - Chronic Obstructive Pulmonary Disease
  - Coagulation Defects
  - Congestive Heart Failure
  - Diabetes Mellitus
  - Morbid Obesity
  - Peripheral Vascular Disease
  - Others such as MI, CVA, and Fractures

# Two Patients, Same Diagnosis, Different Care

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- Patient A is newly diagnosed with influenza and pneumonia
  - Patient A is 35
  - Patient has no chronic diseases
- Patient B is newly diagnosed with influenza and pneumonia
  - Patient B is 72
  - Patient comorbidities:
    - Diabetes, type 2
    - Chronic bronchitis
    - Emphysema

# Two Patients, Same Diagnosis, Different Care (continued)

- Capturing the difference is called risk adjustment
  - If the comorbidities are not documented and coded for Patient B, the true cost of the encounter is not captured
  - Comorbidities bring extra risk, requiring extra utilization of resources
  - Erroneously reporting a more complex diagnosis can lead to overpayment

# General HCC Principles

- Code for all conditions that affect or influence patient care, treatment or management
- Code to the highest level of specificity
- Code all chronic conditions at least once annually
- Ensure all conditions are updated in patient's chart based on Summary of Care documents received from hospitals or specialty consults
- Limit the number of "Unspecified" or "Other" codes, unless there is not sufficient clinical information to support a more specific code
- Include additional diagnoses to the appropriate primary diagnoses such as: code BMI with obesity, and code long-term insulin use with diabetes
- Up to (12) ICD-10 codes can be submitted on a claim







# HCC Hematology/Oncology Categories

- HCC 8: Metastatic Cancer and Acute Leukemia
- HCC 9: Lung and Other Severe Cancers
- HCC 10: Lymphoma and Other Cancers
- HCC 11: Colorectal, Bladder, and Other Cancer
- HCC 12: Breast, Prostate, and Other Cancers and Tumors
- HCC 46: Severe Hematological Disorders
- HCC 47: Disorders of Immunity
- HCC 48: Coagulation Defects and Other Specified Hematological Disorders

# ONCOLOGY





# Malignant Neoplasms

- Coding
  - To properly code a neoplasm, it is first necessary to determine if the neoplasm is benign, in-situ, malignant, or of uncertain histologic behavior
  - Code to the highest specificity including location
  - Code any complications associated with malignancies or therapies
    - Anemia
    - Pathologic fractures
    - Adverse effects of antineoplastic and immunosuppressive drugs

# HCC Coding Example 1: The Impact of Specified Coding

**Example:** A 72 year old male presents for a follow up visit for Hodgkin’s Lymphoma. The patient has a prior stem cell transplant and agranulocytosis due to chemotherapy.

ICD-10 Code	Description- Partial Coding	HCC Weight
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, neck	0.675
Not coded	Stem cell transplant status	0.000
Not coded	Agranulocytosis secondary to cancer chemotherapy	0.000
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.394</b>
	<b>Total Score:</b>	<b>1.069</b>
	<b>PMPM Payment:</b>	<b>\$855.20</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$10,262.40</b>
ICD-10 Code	Description- Coding Highest Specificity	HCC Weight
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, neck	0.675
Z94.84	Stem cell transplant status	0.832
D70.1	Agranulocytosis secondary to cancer chemotherapy	0.665
N/A	Interaction between immune disorders and cancer	<b>0.838</b>
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.308</b>
	<b>Total Score:</b>	<b>3.404</b>
	<b>PMPM Payment:</b>	<b>\$2,723.20</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$32,678.40</b>



# HCC Coding Example 2: The Impact of Specified Coding

**Example:** A 78 year old female presents with renal cancer. The patient has end stage renal disease with dependence on renal dialysis.

ICD-10 Code	Description- Partial Coding	HCC Weight
C64.1	Malignant neoplasm of right kidney	0.307
Not coded	End stage renal disease with dependence on renal dialysis	0.000
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.451</b>
	<b>Total Score:</b>	<b>0.758</b>
	<b>PMPM Payment:</b>	<b>\$606.40</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$7,276.80</b>
ICD-10 Code	Description- Coding Highest Specificity	HCC Weight
C64.1	Malignant neoplasm of right kidney	0.307
N18.6, Z99.2	End stage renal disease with dependence on renal dialysis	0.435
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.451</b>
	<b>Total Score:</b>	<b>1.193</b>
	<b>PMPM Payment:</b>	<b>\$954.40</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$11,452.80</b>

# Metastatic Cancers

- Coding
  - If malignant, any secondary (metastatic) sites should also be coded to the highest specificity
  - Ensure both primary and secondary malignancies are coded
    - Note: When an encounter is for a primary malignancy with metastasis and treatment is directed toward the metastatic (secondary) site(s) only, the metastatic site(s) is designated as the principal/first-listed diagnosis. The primary malignancy is coded as an additional code.



# HCC Coding Example 3: The Impact of Specified Coding

**Example:** A 65 year old male presents for prostate cancer with metastasis to the bone.

ICD-10 Code	Description- Partial Coding	HCC Weight
C61	Malignant neoplasm of prostate	0.150
Not coded	Secondary malignant neoplasm of bone	0.00
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.308</b>
	<b>Total Score:</b>	<b>0.458</b>
	<b>PMPM Payment:</b>	<b>\$366.40</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$4,396.80</b>
ICD-10 Code	Description- Coding Highest Specificity	HCC Weight
C61	Malignant neoplasm of prostate	Inclusive
C79.51	Secondary malignant neoplasm of bone	2.659
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.308</b>
	<b>Total Score:</b>	<b>2.967</b>
	<b>PMPM Payment:</b>	<b>\$2,373.60</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$28,483.20</b>

# History of Cancer vs. Active Cancers

- Coding
  - When a primary malignancy has been previously excised or eradicated from its site, there is no further treatment directed to that site, and there is no evidence of any existing primary malignancy, a code from category Z85, Personal history of malignant neoplasm, should be used to indicate the former site of the malignancy.



# HEMATOLOGY



# Diseases of the Blood

- Coding
  - We commonly see the below diseases of the blood documented yet not always coded:
    - Thrombocytopenia
      - Platelet count less than 150,000 platelets per microliter
      - Includes both acute and chronic
    - Coagulation Defects
      - Includes both acquired and hereditary
      - Examples:
        - Von Willebrand's Disease
        - Primary Thrombophilia
          - Factor V Leiden
          - Prothrombin Gene Mutation



# Diseases of the Blood (cont)

- Coding
  - We commonly see the below diseases of the blood documented yet not always coded:
    - Purpura
      - Senile Purpura: D69.2
    - Neutropenia
      - Agranulocytosis
        - Congenital
        - Secondary to cancer chemotherapy
        - Drug induced

# HCC Coding Example 4: The Impact of Specified Coding

**Example:** A 68 year old female presents for a follow up visit. The patient has colorectal cancer with ongoing treatment, a permanent colostomy and a known diagnosis of Von Willebrand's disease.

ICD-10 Code	Description- Partial Coding	HCC Weight
C19	Malignant neoplasm of rectosigmoid junction	0.307
Not coded	Colostomy status	0.000
Not coded	Von Willebrand's disease	0.000
	<b>Demographic Risk Factor (Community, Non Dual, Aged):</b>	<b>0.323</b>
	<b>Total Score:</b>	<b>0.630</b>
	<b>PMPM Payment:</b>	<b>\$504.00</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$6,048.00</b>
ICD-10 Code	Description- Coding Highest Specificity	HCC Weight
C19	Malignant neoplasm of rectosigmoid junction	0.307
Z93.3	Colostomy status	0.534
D68.0	Von Willebrand's disease	0.192
	<b>Demographic Risk Factor (Community, Non-Dual, Aged):</b>	<b>0.323</b>
	<b>Total Score:</b>	<b>1.356</b>
	<b>PMPM Payment:</b>	<b>\$1,084.80</b>
	<b>Medicare expects this patient to cost:</b>	<b>\$13,017.60</b>



# ICD-10 HCC Status Code Quick List

ICD-10 Diagnosis Code	Code Description	HCC Weight
Z79.4	Long term (current) use of Insulin	0.105
Z89.411	Amputation of R Great Toe	0.519
Z89.412	Amputation of L Great Toe	0.519
Z89.421	Amputation of other R Toe(s)	0.519
Z89.422	Amputation of other L Toe(s)	0.519
Z89.431	Amputation of R Foot	0.519
Z89.432	Amputation of L Foot	0.519
Z89.441	Amputation of R Ankle	0.519
Z89.442	Amputation of L Ankle	0.519
Z89.511	Amputation of R Leg below Knee	0.519
Z89.512	Amputation of L Leg below Knee	0.519
Z89.611	Amputation of R Leg above Knee	0.519
Z89.612	Amputation of L Leg above Knee	0.519
Z91.15	Patient's noncompliance with Renal Dialysis	0.435
Z93.0	Tracheostomy Status	1.000
Z93.1	Gastrostomy Status	0.534

ICD-10 Diagnosis Code	Code Description	HCC Weight
Z93.2	Ileostomy Status	0.534
Z93.3	Colostomy Status	0.534
Z93.4	Other artificial openings of Gastrointestinal Tract Status	0.534
Z93.5	Cystostomy Status (requires 5th digit)	0.534
Z93.6	Other artificial openings of Urinary Tract Status	0.534
Z93.8	Other artificial opening status	0.534
Z94.1	Heart Transplant Status	0.832
Z94.2	Lung Transplant Status	0.832
Z94.3	Heart & Lungs Transplant Status	0.832
Z94.4	Liver Transplant Status	0.832
Z94.81	Bone Marrow Transplant Status	0.832
Z94.82	Intestine Transplant Status	0.832
Z94.83	Pancreas Transplant Status	0.832
Z94.84	Stem Cells Transplant Status	0.832
Z95.811	Presence of Heart Assist Device	0.832
Z95.812	Presence of fully implantable Artificial Heart	0.832
Z99.11	Dependence on Respirator Status	1.000
Z99.2	Dependence on Renal Dialysis	0.435

# References

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