

Risk Adjustment Coding Corner

Neighborhood News – October 2023

Commonly Miscoded Conditions

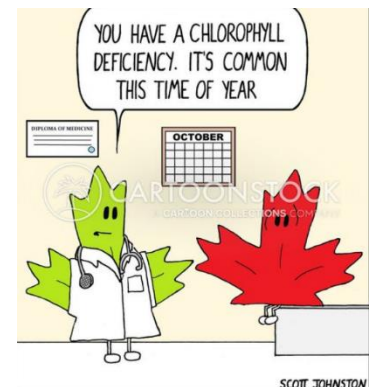
Neighborhood Health Plan of Rhode Island would like to highlight three of the most miscoded conditions, often targeted by the Office of Inspector General (OIG) during audits:

1. Acute stroke
2. Acute heart attack
3. Acute stroke and acute heart attack combination

| <u>Incorrect</u> | <u>Correct</u> |
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| <p>Claims with acute stroke (cerebrovascular accident or CVA) coded in the outpatient setting with no corresponding inpatient claim.</p> | <p>Documentation in the outpatient setting indicating one of the following ICD-10 diagnosis codes:</p> <ul style="list-style-type: none"> • Z86.73: History of stroke (not experiencing a CVA and no residual deficits) <p style="text-align: center;">or</p> <ul style="list-style-type: none"> • I69.xx: Sequelae of cerebrovascular disease (had a confirmed CVA, now with a residual deficit) |

Medical Decision Making (MDM) and Documentation

- Treatment options and medications reviewed all support medical necessity.
- A patient’s chronic condition(s) may not be the reason for the visit, however, if the chronic condition affects your MDM, this should be included in your visit note.
- “It is not necessary for a provider to be in charge of a patient’s comorbidity in order for it to be abstracted; the comorbidity simply needs to affect MDM or treatment in the current encounter.”—Sheri Poe Bernard, CCS-P, CDEO, CPC, CRC



References

- [OIG Report on Incorrect Acute Stroke Diagnoses](#)
- [AAPC Knowledge Center: Miscoded Acute Stroke Diagnoses Cost Millions](#)
- Risk Adjustment Documentation & Coding 2nd edition