3M hierarchical condition category (HCC) services

- Educate organizations on HCC methodology to ensure documentation and coding compliance.
- Evaluate the state of organizations’ current HCC capture and risk-adjustment factor (RAF) scores to identify opportunities for improvement.
- Help organizations create an HCC program to ensure accurate chronic disease capture.

What are HCCs?
The Centers for Medicare & Medicaid Services (CMS) originally developed HCCs to adjust Medicare capitation payments for Medicare Advantage (Part C) plans. CMS adjusts Part C payments based on the health expenditure risk of its enrollees. HCCs use a risk-adjusted score that includes patient diagnosis and demographic information.

Using CMS HCC methodology as a starting point, the U.S. Department of Health and Human Services (HHS) developed a broader HCC methodology for commercial payers. HHS added modifications for each age range within various patient populations.

CMS uses HCCs when calculating the total performance score under the Hospital Value-Based Purchasing Program.

The challenge: Report patient diagnoses across the care continuum

Organizations capture HCCs by documenting and coding all of a patient’s diagnoses across all care settings for an entire year. HCC methodology groups each chronic disease or injury into a category that predicts future care needs and determines each patient’s RAF score. Payers use demographic information as well as diagnoses from inpatient, outpatient and physician practice encounters to calculate risk scores.

Your organization’s success with risk-adjustment depends on your ability to ensure accurate and complete documentation and coding. The sooner you understand the complexities of HCCs, the sooner you can realize the benefits of appropriate risk-adjustment calculation.

Can you answer the following questions with confidence?

- Does your data currently reflect accurate HCC risk scores based on reported diagnoses for your patient population?
- Are all chronic conditions documented in the medical record at least once per calendar year?
- Do you capture HCC diagnoses in all care settings?

If not, it may be time to consider a comprehensive HCC solution.
The solution: Healthcare consultants who really know HCC documentation and coding

Armed with extensive healthcare coding compliance and clinical backgrounds, the physicians, nurses and coding experts from 3M Consulting Services have a proven track record in providing quality and sustainable coding and documentation improvement programs to more than 1,500 hospitals nationwide.

3M consultants understand HCCs inside and out. They know how to implement a program to assist organizations in reporting accurate diagnoses that reflect patient risk.

The result? Comprehensive HCC capture.

3M designed these services for hospital inpatient and outpatient facilities as well as professional practices that need help understanding and capturing HCCs using their concurrent processes.

The HCC program includes three phases:
1. Data analysis and assessment
2. Implementation and education
3. Sustained improvement/follow-up

Call today

For more information on how 3M software and services can assist your organization, contact your 3M sales representative, call us toll-free at 800-367-2447, or visit us online at www.3m.com/hi