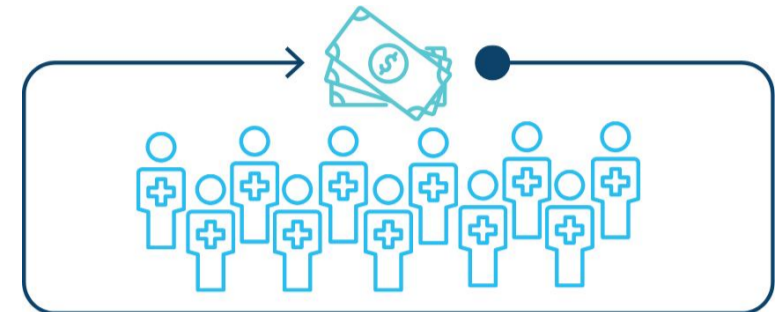


How the CMS risk-adjustment model works

Fee-for-service healthcare

In the commercial fee-for-service model, reimbursement is decided based on quantity: the number of patients each clinician sees, or the number of procedures they complete.

Unfortunately, this model often leads to packed provider schedules, clinician burnout, and inconsistent patient outcomes.



Value-based care

By contrast, under the value-based care model, it's more accurate to say that health systems are reimbursed based on quality.

But how are these reimbursements calculated? That's where risk adjustment comes in.



The CMS risk-adjustment model

Risk adjustment is a value-based care model in which CMS estimates the cost of care for each patient, and assigns them a risk score. Each patient's risk score determines how much the provider is paid for their care – not how often they use healthcare services.



The tricky bit

Where it gets complicated is in how CMS estimates each patient's cost of care. The main way they do this is through Hierarchical Condition Categories, or HCCs.

HCCs are groupings of diagnoses with higher links to morbidity and mortality.

High-risk diagnoses are grouped into different categories with similar diseases. ICD-10 codes that belong to a particular HCC group are known as risk-adjusting diagnoses, with each diagnosis given a corresponding HCC 'code'. With us so far? Well, here comes the tricky part...



- ▶ Chronic Bronchitis
- ▶ Emphysema

Clinicians, coders, MAs and scribes must:

- Know which diagnoses risk adjust
- Understand how those diagnoses should be documented
- Provide any required supporting evidence
- Use the correct language to describe risk-adjusting conditions

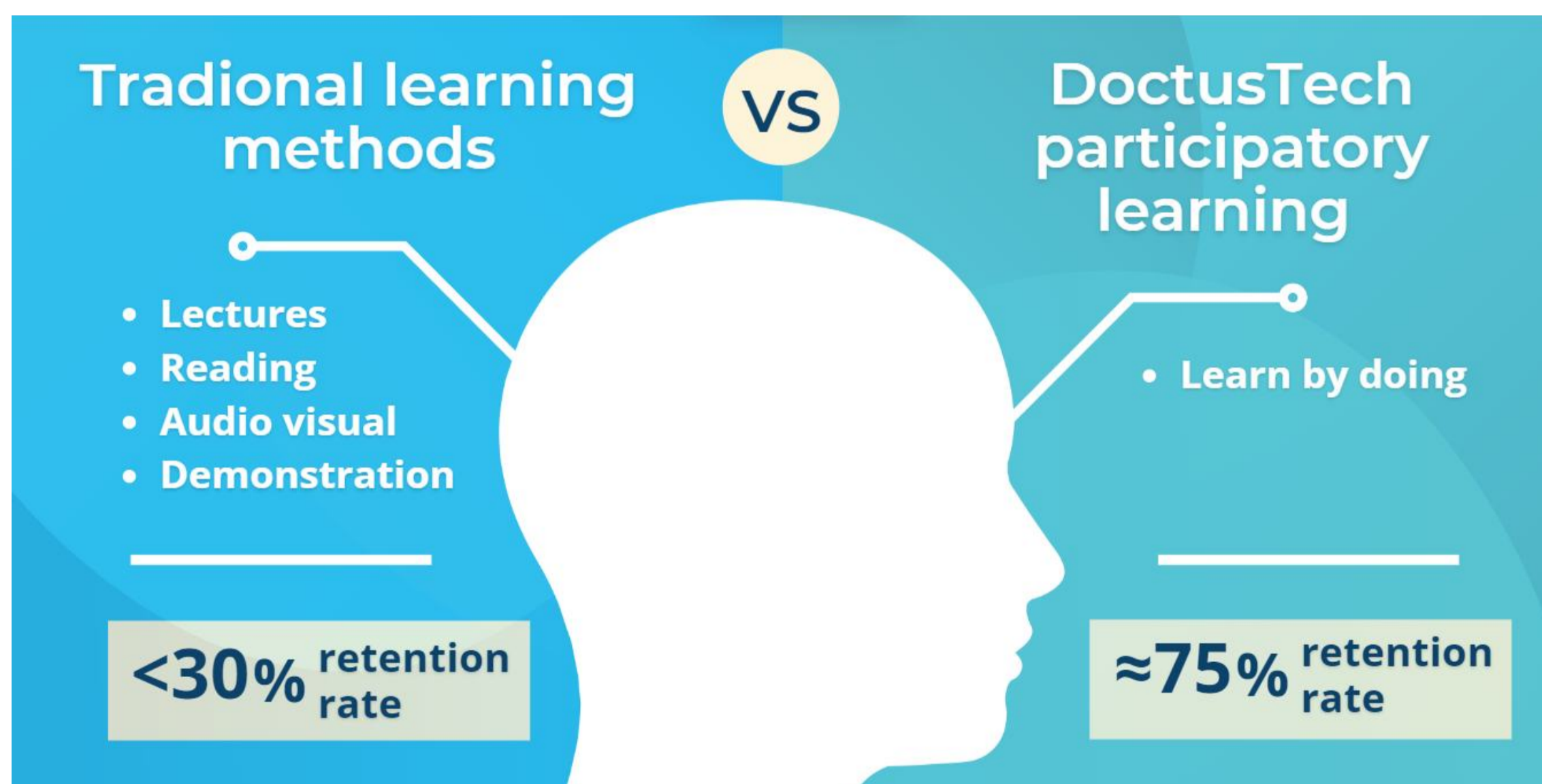
As such, documentation in the risk adjustment model is notoriously challenging:

"The documentation is intimidating. And it wasn't something that providers learned in medical school... If you're used to commercial documentation, you might be like, 'this is a burden'."

- CCO, leading at-risk physician group

Improving documentation accuracy

Clinicians and other staff often undertake [HCC coding education](#) to help them with documentation in the risk adjustment model. But traditional methods of HCC training don't always work:



DoctusTech employs app-based participatory learning methodology to achieve clinician engagement rates of 90%, and knowledge retention rates of 75%. [Book a demo today](#) to find out how we can help your team boost your RAF accuracy by as much as 30%.

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