Elevate Medicare Advantage Risk Adjustment: Capturing “History of” Conditions

It’s important to capture diagnosis codes that accurately reflect the current health status of Medicare members. If a patient is no longer actively receiving treatment for a condition, the diagnosis should be documented as “history of ________”.

Upon review of data, frequent areas of concern are:

» **Solid tumor cancer** – should only have an active diagnosis while receiving treatment (with additional support documentation required).

» **Cerebrovascular accident** – should have an active diagnosis during the initial event, then a “sequela” or “H/O CVA” diagnosis in the future (with any resulting complications or deficits identified).

» **Non-ST-elevation myocardial infarction** – should have an active diagnosis during the initial event, then a “sequela” or “H/O NSTEMI” diagnosis in follow-up visits.

Please note, chronic conditions that require continual monitoring and treatment should remain as active conditions (e.g. diabetes mellitus, hypertension, congestive heart failure, chronic obstructive pulmonary disease, etc.).

Capturing active diagnosis codes for a patient’s past medical history will result in inaccurate federal compensation for the care of our Medicare members.

Contact DHMP’s Elevate Medicare Risk Adjustment Analyst at 303-602-2134 if you have any questions regarding this training or about Medicare risk adjustment in general. Thank you!