



Chronic conditions coding

Why is diagnosis coding important?

Diagnosis coding is important because these codes paint a picture of that patient's health versus burden of illness. An accurate picture of each patient's health impacts both physicians and members in many ways including:

- Patient care.
- Population health.
- Medical necessity.
- Value-based care.
- Quality care initiatives.

Documenting the medical record

When documenting patient diagnoses, include:

- Date.
- Status.
- Complication.
- Associated conditions.
- History of present illness.





2023 chronic conditions coding opportunity

We are offering an opportunity for you to update and resubmit claims for patients we identify with a suspected diagnosis that was submitted on a previous encounter but has not been reported this year. To receive a \$10 reimbursement:

- A network provider representative will email your list of claims with the suspected diagnosis.
- Carefully review each patient on the list to validate the previously reported condition.
- If the condition still exists, update the ICD-10 code on the claim and resubmit before March 31, 2023.

Coding guidelines

Section IV: Diagnostic coding and reporting for outpatient services:

- H. Uncertain diagnoses — Do not code diagnoses that are listed in terms of uncertainty. Code only to the highest degree of certainty based on the medical record.
- I. Chronic diseases — Chronic disease may be coded as many times as the patient receives treatment and care for the condition.
- J. Coexisting conditions — Code all documented conditions that coexist at the time of the encounter/visit and that require or affect patient care treatment or management.

If you have questions about this program, contact Provider Services at **844-405-4296**.

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