

Provider Education

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## HHS-HCC

Health and Human Services Patient Risk Coding for the Healthcare Exchange

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The individual and small group healthcare exchanges were created as part of the Patient Protection and Affordable Care Act (PPACA) in 2014. Patient risk adjustment for the healthcare exchange is one of three premium stabilization strategies to protect participating health plans from adverse patient selection or cherry picking that could undermine the stability of the program. In addition to risk adjustment, reinsurance and risk corridors make up the three "R" of the premium stabilization program. The goal of risk adjustment is to adjust compensation to health plans for the differences in the enrollee health mix. The premium stabilization program transfers funds from participating health plans with lower-than-average risk to plans with higher-than-average risk.

CHI Health Partners is a major participant in the Nebraska Healthcare Exchange with one of the largest plans on the exchange: Medica with CHI.

The shared savings agreement between Medica and CHI Health Partners is based on a budget that is determined, in part, by the risk scores of patients attributed to our network. As such, it is important that participating providers understand the importance of complete and accurate coding with supporting documentation in the medical record to appropriately indicate each patient's health status.

## **Population Risk-adjustment**

Health and Human Services (HHS) uses a similar methodology, the Risk Adjustment Factor (RAF), as the Centers for Medicare and Medicaid Service (CMS) use to risk-adjust payments to insurers under Medicare Advantage and to also set budgets for Accountable Care Organizations (ACO) under the Medicare Shared Savings Program (MSSP). RAF is a sum of multiple factors (patient demographics, acute and chronic health conditions that drive healthcare costs, condition severity and patient maturity metrics-for infants) that determine the health risk of an enrollee. The health conditions are identified using Hierarchical Condition Categories (HCC). The HHS-HCC model utilizes many of the same conditions as the Medicare Shared Savings program, but also includes specific codes to risk-adjust pediatric, neonatal and pregnant populations. Similar to the CMS methodology, the HHS-HCCs need to be re-coded each calendar year to count towards the patient's RAF score. Appropriate documentation in the medical chart demonstrating that the condition is either being Monitored, Evaluated, Assessed or Treated is also required.

The HHS-HCC risk adjustment methodology utilizes separate models for adults (age 21+), children (age 2-20), and infants (age 0-1) to account for cost differences in each age group. In the adult and child models, the relative risk assigned to an individual's age, sex, and diagnoses are added together to produce an individual risk score. The infant risk scores are determined by inclusion in one of 25 mutually exclusive groups, based on the infant's maturity (determined by length of gestation and birth weight) and the severity of diagnoses.

There are 127 HCC presently being utilized in the HHS model, with 7768 ICD-10 codes mapping to an HCC.(1) The HHS-HCC model is a concurrent model meaning codes submitted during the current year are used to determine that year's budget, while the CMS model is retrospective using codes submitted from a previous year to estimate future healthcare costs. As such, the HSS model utilizes both chronic and acute conditions to determine healthcare cost in the current year (where the CMS model, in general, focuses more on chronic health conditions that drive future healthcare costs). (1) Examples of acute conditions include maternity care, low birth weight babies, and organ transplants.

HHS restricts the sources of diagnosis codes to improve accuracy. Clinical laboratory diagnoses, for example, which may include "rule-outs" or other diagnoses not verified by a clinician are not allowed. Allowable diagnoses include those from inpatient and outpatient facility claims and professional claims with at least one associated CPT code to help identify a face-to-face encounter. The HHS-HCC also aims to limit the use of codes which might represent poor quality of care (e.g. pressure ulcers or complications of care), random acute events (e.g. trauma) or codes that are susceptible to discretionary diagnosis coding or "diagnostic discovery". (1)

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Less than 1 in 5 adult patients on the exchange will have an HCC, but these patients drive a majority (60-80% depending upon the cost sharing level) of the medical spend in the exchange insurance plans making it essential to capture these codes. The most common HCCs in the adult model include:

1.	HCC 21	Diabetes without complication
2.	HCC 8	Major Depression and Bipolar Disorders
3.	HCC 61	Asthma
4.	HCC 20	Diabetes with Chronic Complications
5.	HCC 160	COPD, including Bronchiectasis
6.	HCC 12	Breast and Prostate Cancer, Benign/Uncertain Brain Tumors
7.	HCC 142	Specified Heart Arrythmias
8.	HCC 130	Congestive Heart Failure
9.	HCC 56	Rheumatoid Arthritis and Specific Autoimmune Disorders
10.	HCC 209	Complicated Pregnancy with no or Minor Complications

Less than 10% of pediatric patients on the exchange will have an HCC. The 5 most prevalent HCCs in the Pediatric population are:

1. H(	CC 161	Asthma
2. HO	CC 88	Major Depressive and Bipolar Disorders
3. HO	CC120	Seizure Disorders and Convulsions
4. HO	CC 21	Diabetes without Complication
5. HO	CC 102	Autistic Disorder

Some keys to the HHS-HCC methodology include:

- ➤ HCC22 Type 1 diabetes: This code is additive to the other diabetes HCCs (19,20,21) to boost the risk score of patients with type 1 diabetes to account for their increased medical costs.
- ➤ Documentation of an accurate birth weight for premature infants is essential for accurate risk-adjustment of this population.
- > Asthma

2022 HHS-HCCs

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HCC002 Septicemia, Sepsis, Systemic Inflammatory Response Syndrome/Shock

HCC003 Central Nervous System Infections, Except Viral Meningitis

**HCC004 Viral or Unspecified Meningitis** 

**HCC006** Opportunistic Infections

**HCC008 Metastatic Cancer** 

HCC009 Lung, Brain, and Other Severe Cancers, Including Pediatric Acute Lymphoid

Leukemia

**HCC010 Non-Hodgkin Lymphomas and Other Cancers and Tumors** 

HCC011 Colorectal, Breast (Age < 50), Kidney, and Other Cancers

HCC012 Breast (Age 50+) and Prostate Cancer, Benign/Uncertain Brain Tumors, and

**Other Cancers and Tumors** 

HCC013 Thyroid Cancer, Melanoma, Neurofibromatosis, and Other Cancers and Tumors

**HCC018 Pancreas Transplant Status** 

**HCC019 Diabetes with Acute Complications** 

**HCC020 Diabetes with Chronic Complications** 

**HCC021 Diabetes without Complication** 

**HCC022 Type 1 Diabetes Mellitus, add-on to Diabetes HCCs** 

HCC023 Protein-Calorie Malnutrition

**HCC026 Mucopolysaccharidosis** 

**HCC027 Lipidoses and Glycogenosis** 

HCC029 Amyloidosis, Porphyria, and Other Metabolic Disorders

**HCC030 Adrenal, Pituitary, and Other Significant Endocrine Disorders** 

**HCC034 Liver Transplant Status/Complications** 

HCC035 1 7 Acute Liver Failure/Disease, Including Neonatal Hepatitis

**HCC035 2 Chronic Liver Failure/End-Stage Liver Disorders** 

**HCC036 Cirrhosis of Liver** 

**HCC037\_1 Chronic Viral Hepatitis C** 

**HCC037 2 Chronic Hepatitis, Except Chronic Viral Hepatitis C** 

**HCC041 Intestine Transplant Status/Complications** 

**HCC042 Peritonitis/Gastrointestinal Perforation/Necrotizing Enterocolitis** 

**HCC045 Intestinal Obstruction** 

**HCC046 Chronic Pancreatitis** 

**HCC047 Acute Pancreatitis** 

**HCC048 Inflammatory Bowel Disease** 

**HCC054 Necrotizing Fasciitis** 

HCC055 Bone/Joint/Muscle Infections/Necrosis

**HCC056 Rheumatoid Arthritis and Specified Autoimmune Disorders** 

HCC057 Systemic Lupus Erythematosus and Other Autoimmune Disorders

**HCC061 Osteogenesis Imperfecta and Other Osteodystrophies** 

**HCC062 Congenital/Developmental Skeletal and Connective Tissue Disorders** 

**HCC063 Cleft Lip/Cleft Palate** 

**HCC066** Hemophilia

**HCC067 Myelodysplastic Syndromes and Myelofibrosis** 

**HCC068 Aplastic Anemia** 

**HCC069** Acquired Hemolytic Anemia, Including Hemolytic Disease of Newborn **HCC070 Sickle Cell Anemia (Hb-SS) HCC071 Beta Thalassemia Major HCC073 Combined and Other Severe Immunodeficiencies HCC074 Disorders of the Immune Mechanism** HCC075 Coagulation Defects and Other Specified Hematological Disorders **HCC081 Drug Use with Psychotic Complications** HCC082 Drug Use Disorder, Moderate/Severe, or Drug Use with Non-Psychotic **Complications HCC083 Alcohol Use with Psychotic Complications** HCC084 Alcohol Use Disorder, Moderate/Severe, or Alcohol Use with Specified **Non-Psychotic Complications** HCC087\_1 Schizophrenia HCC087 2 Delusional and Other Specified Psychotic Disorders, Unspecified Psychosis **HCC088 Major Depressive Disorder, Severe, and Bipolar Disorders HCC090 Personality Disorders** HCC094 Anorexia/Bulimia Nervosa HCC096 Prader-Willi, Patau, Edwards, and Autosomal Deletion Syndromes HCC097 Down Syndrome, Fragile X, Other Chromosomal Anomalies, and Congenital **Malformation Syndromes HCC102 Autistic Disorder spinal cord HCC103 Pervasive Developmental Disorders, Except Autistic Disorder HCC106 Traumatic Complete Lesion Cervical Spinal Cord HCC107 Quadriplegia HCC108 Traumatic Complete Lesion Dorsal Spinal Cord HCC109 Paraplegia HCC110 Spinal Cord Disorders/Injuries HCC111 Amyotrophic Lateral Sclerosis and Other Anterior Horn Cell Disease HCC112 Quadriplegic Cerebral Palsy HCC113 Cerebral Palsy, Except Quadriplegic HCC114 Spina Bifida and Other Brain/Spinal/Nervous System Congenital Anomalies HCC115 Myasthenia Gravis/Myoneural Disorders and Guillain-Barre Syndrome/Inflammatory and Toxic Neuropathy HCC117 Muscular Dystrophy HCC118 Multiple Sclerosis** HCC119 Parkinson's, Huntington's, and Spinocerebellar Disease, and Other specified heart Neurodegenerative Disorders **HCC120 Seizure Disorders and Convulsions HCC121 Hydrocephalus HCC122 Coma, Brain Compression/Anoxic Damage HCC123 Narcolepsy and Cataplexy HCC125 Respirator Dependence/Tracheostomy Status HCC126 Respiratory Arrest** HCC127 Cardio-Respiratory Failure and Shock, Including Respiratory Distress Syndromes

**HCC128 Heart Assistive Device/Artificial Heart** 

HCC129 Heart Transplant Status/Complications
HCC130 Heart Failure
HCC131 Acute Myocardial Infarction
HCC132 Unstable Angina and Other Acute Ischemic Heart Disease
HCC135 Heart Infection/Inflammation, Except Rheumatic
HCC137 Hypoplastic Left Heart Syndrome and Other Severe Congenital Heart Disorders
HCC138 Major Congenital Heart/Circulatory Disorders
HCC139 Atrial and Ventricular Septal Defects, Patent Ductus Arteriosus, and Other
Congenital Heart/Circulatory Disorders
HCC142 Specified Heart Arrhythmias
HCC145 Intracranial Hemorrhage
HCC146 Ischemic or Unspecified Stroke
HCC149 Cerebral Aneurysm and Arteriovenous Malformation
HCC150 Hemiplegia/Hemiparesis
HCC151 Monoplegia, Other Paralytic Syndromes
HCC153 Atherosclerosis of the Extremities with Ulceration or Gangrene
HCC154 Vascular Disease with Complications
HCC156 Pulmonary Embolism and Deep Vein Thrombosis
HCC158 Lung Transplant Status/Complications
HCC159 Cystic Fibrosis
HCC160 Chronic Obstructive Pulmonary Disease, Including Bronchiectasis
HCC161_1 Severe Asthma
HCC161_2 Asthma, Except Severe
HCC162 Fibrosis of Lung and Other Lung Disorders
HCC163 Aspiration and Specified Bacterial Pneumonias and Other Severe Lung Infections
HCC174 Exudative Macular Degeneration 1.570
HCC183 Kidney Transplant Status/Complications
HCC184 End Stage Renal Disease
HCC187 Chronic Kidney Disease, Stage 5
HCC188 Chronic Kidney Disease, Severe (Stage 4)
HCC203 Ectopic and Molar Pregnancy
HCC204 Miscarriage with Complications
HCC205 Miscarriage with No or Minor Complications
HCC207 Pregnancy with Delivery with Major Complications
HCC208 Pregnancy with Delivery with Complications
HCC209 Pregnancy with Delivery with No or Minor Complications
HCC210 (Ongoing) Pregnancy without Delivery with Major Complications
HCC211 (Ongoing) Pregnancy without Delivery with Complications
HCC212 (Ongoing) Pregnancy without Delivery with No or Minor Complications
HCC217 Chronic Ulcer of Skin, Except Pressure
HCC218 Extensive Third Degree Burns
HCC219 Major Skin Burn or Condition
HCC223 Severe Head Injury
HCC226 Hip and Pelvic Fractures
HCC228 Vertebral Fractures without Spinal Cord Injury

HCC234 Traumatic Amputations and Amputation Complications
HCC251 Stem Cell, Including Bone Marrow, Transplant Status/Complications
HCC253 Artificial Openings for Feeding or Elimination
HCC254 Amputation Status, Upper Limb or Lower Limb

## References

- 1. Kautter J, Pope G, Ingber M, Freeman S, Patterson L, Cohen M, Keenan P.The HHS-HCC Risk Adjustment Model for Individual and Small Group Markets under the Affordable Care Act. MMRR 2014.4:3
- 2. Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2021; Notice Requirement for Non-Federal Governmental Plans (CMS-9916-P) <a href="https://www.federalregister.gov/d/2020-10045/p-208">https://www.federalregister.gov/d/2020-10045/p-208</a>.



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