Inspired by Innovation:
A Discussion: Optum360 Coding Solutions — Inspired by our customers to create innovative ways to overcome the REAL challenges of the medical coder

Ryan Devey I Optum360
Physician eSolutions Product Manager
Presentation disclaimer

All of the information provided is believed to be accurate and reliable; however, Optum360® assumes no responsibility for any errors. Optum360 is providing this information for educational purposes only and not as a replacement for professional judgment and experience; therefore any use of this information is at your sole risk and Optum360 neither assumes nor is responsible for its use.
How do I do, what I do, better/faster?

In this discussion, we will determine:

• What impedes you from doing your job efficiently?
• What resources do you need to do your job more efficiently?
• How can you put money BACK into your pockets through increased coding accuracy that matches your clinical documentation?
• What coding resources are available to you to accomplish increased accuracy and as a result, more timely reimbursement?
The coder’s challenges: A discussion

• Finding codes?
• Finding coding content/guidelines?
• Medicare/Medicaid?
• Clinician documentation?
• Working denial and aging reports?
• Others??? We want to KNOW!
Overcoming challenges through innovation and technology built on the backs of Optum360 customers.
Finding codes

**Code searching – Optum360**

**CodeLogic™ uses:**

- ✔ Code book indexes
- ✔ Code descriptions
- ✔ Code lay descriptions
- ✔ Coder’s dictionary references
- ✔ Crosscodes
- ✔ Mapping
- ✔ Synonyms
- ✔ Acronyms
- ✔ More…

<table>
<thead>
<tr>
<th>Search Results for ASTHMA</th>
<th>Sort by: ☑ Weighted Ranking □ Alphanumeric Listing</th>
</tr>
</thead>
<tbody>
<tr>
<td>CPT®</td>
<td></td>
</tr>
<tr>
<td><img src="image" alt="Code search results for ASTHMA" /></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HCPCS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="HCPCS search results for ASTHMA" /></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ICD-9-CM Vol. 1</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="ICD-9-CM search results for ASTHMA" /></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ICD-10-CM</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><img src="image" alt="ICD-10-CM search results for ASTHMA" /></td>
<td></td>
</tr>
</tbody>
</table>
Finding codes

Code book indexes

ICD-10-CM Index to Diseases and Injuries

Enter a term or phrase:

Fracture

Refine Search: ankle

Index Search History:

Index Selection

Fracture
Diabetes, diabetic (mellitus) (sugar)
Elbow - see condition
Coronary (artery) - see condition
Spina bifida (spina bifi)
Discoid (with)
Condition - see Disease
Disease, diseased (see also Syndrome)
Pain
Ache(s) - see Pain

Foville's (peduncular) disease or syndrome G46.3
Fox (Fordsyce) disease (apocrine miliaria) L75.2
Fracture, burst - see Fracture, traumatic, by site
Fracture, chronic - see Fracture, pathological
Fracture, insufficiency - see Fracture, pathologic, by site

Fracture, pathological (pathologic) (see also Fracture, traumatic) M84.40

ankle M84.47-
carpus M84.44-
clavicle M84.41-
dental implant M27.63
dental restorative material K08.539
due to
neoplastic disease NEC (see also Neoplasm) M84.50

ankle M84.57-
carpus M84.54-
clavicle M84.51-
femur M84.55-
fibula M84.56-
finger M84.54-
hip M84.59

humeral M84.52
Finding content/guidelines
Example: The AMA CPT® Content Module

• The American Medical Association (AMA) Content Module Add-on includes three different publications IN THEIR ENTIRETY:

  ✓ The CPT® Assistant Newsletter: Every article from every monthly edition for multiple years.

  ✓ The CPT® Changes: An Insider’s View. Every publication from 2006 to 2015.

  ✓ The AMA Knowledge Base: Access to thousands of answers to questions asked by AMA members and customers regarding CPT® codes and their use.

• AMA/Optum360 EXCLUSIVE: Users have the ability to access any publication in its entirety. Users no longer are limited to just articles associated with codes. Users can now search by month, year, etc., and see full newsletters, with all articles available in each publication.

• AMA/Optum360 EXCLUSIVE: Users can gain unique insight into a CPT® code by accessing questions asked by coders who use these CPT® codes. If you have a question about the use of a CPT® code, chances are, others had that same question, asked, and the AMA provided an answer.
Finding content/guidelines  
Example: The AMA CPT® Content Module

• **Search by newsletter month/year, keyword, code, etc.**: Whether you are using Optum360 proprietary CodeLogic to find a code, or using our unique search functionality to find information specific to the AMA’s content for a particular CPT® code, you will be able to easily access the AMA content for any code, across all three AMA publications all at once, within many locations in EncoderPro.com.

• **Access years of newsletters, publications and questions.** There are literally hundreds of volumes of content, all easily searchable by code/keyword, and we add to the library each month with the latest newsletters and question/answers from the AMA. Users of this add-on always have access to the most current AMA information, and to volumes of historical AMA content. No other online solution provides access to this valuable AMA content like Optum360.
Finding content/guidelines
Example: The AMA CPT® Content Module

AMA CPT® Content Module

Search Options

CPT® Assistant  CPT® Changes  CPT® Knowledge Base

*If you desire to submit a question for a response from the AMA, click the link below which will allow you to access the AMA Knowledge Base. User will be directed to the CPT® Network link, which will allow you the ability to purchase access and ask question via the CPT® Network. Submit an Electronic Inquiry (Question) directly to CPT® Network.

Search Filters

All Years
- 2016
  - January
  - February
  - March
  - April
  - May
  - June
  - July
  - August
  - September
  - October
  - November
  - December
- 2015
- 2014
- 2013
- 2012
- 2011
- 2010
- 2009
- 2008
- 2007
- 2006
- 2005
- 2004
- 2003
- 2002
- 2001
- 2000
- 1999

Search Criteria

Search for keyword or code: 11000  May use “Search Filters” on the left for specific date searches

<table>
<thead>
<tr>
<th>Year</th>
<th>Issue</th>
<th>Source</th>
<th>Title</th>
<th>Snippet</th>
<th>Relevance</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td>January</td>
<td>CPT® Assistant</td>
<td>Bulletin 2 2014</td>
<td>Assistant Official source for CPT coding guidance Volume 2d Bulletin 2/2014 AMERICAN MEDICAL ASSOCIATION BULLETIN 2014 Performance Measurement What is Performance Measurement? Performance measurement is the process of collecting data that is used to assess the processes performed in an organization in effort to determine the likelihood of achieving desired outcomes. To discover...</td>
<td>0.9996804</td>
</tr>
<tr>
<td>2012</td>
<td>October</td>
<td>CPT® Assistant</td>
<td>Treatment of Burns</td>
<td>of these codes Coding Tip Debridement codes 11000, 11047 should not be reported to describe debridement and Debridement subsection of the Integumentary system (codes 11000-11047). This article discusses...</td>
<td>1.4997337</td>
</tr>
<tr>
<td>2011</td>
<td>May</td>
<td>CPT® Assistant</td>
<td>Integumentary System Debridement</td>
<td>Surgery Integumentary System, 11000, 11001 Surgery Integumentary System, 11000, 11001 (Q&amp;A) (May 1999) May 1999 page 10 Coding Consultation Surgery Integumentary System, 11000, 11001 (Q&amp;A) is it appropriate to report CPT codes 11980 codes 11980 and 11981, CPT code 11901 implies each additional 10% of the body surface or traction...</td>
<td>1.4997337</td>
</tr>
<tr>
<td>1998</td>
<td>November</td>
<td>CPT® Assistant</td>
<td>Review of the 1999 CPT Coding Changes</td>
<td>11000Debridement of extensive eczematous or infected skin, up to 10% of body surface 11001Debridement additional...</td>
<td>0.9996804</td>
</tr>
</tbody>
</table>

Records 1 - 5 of 5
Treatment of Burns

The treatment of burn injuries varies depending on the depth, extent (i.e., percentage of the body surface area involved), and anatomic location of the burn injury. Likewise, the initial and subsequent wound care and use of CPT codes 16000-16036 depends on the characteristics of the burn wound and the specific needs of each patient.

The structure of the family of burn codes (16000-16036) is based on the depth of the burn wound(s), (i.e., first, second, third, and fourth degree), and the percentage of the total body surface area (TBSA) involved, which is best determined using the Lund-Browder diagram and table (see Figure 1). From a CPT coding perspective, with the exception of code 16000, burn depth is not used specifically to select a code in this series. The code descriptors categorize the size of the burn wound as small, medium, or large corresponding with the percentage of TBSA.

- Nutritional support to offset large caloric losses and assist in healing

Depending on the severity and extent of the burn wound(s), management of complications, such as dehydration, shock, infection, multiple organ dysfunction syndrome, electrolyte imbalance, cardiac arrhythmias, and respiratory distress requires reporting of the appropriate level evaluation and management (E/M) service code(s) (e.g., critical care, emergency department, inpatient or outpatient care). When performed, other services (e.g., pulmonary testing and therapy, physical and occupational therapy) and procedures (e.g., mechanical ventilation, central line placement, hyperalimentation administration, grafting, hyperbaric oxygenation, dialysis, tracheostomy creation, pacemaker insertion) should be reported in addition to any local treatment of the burned surface reported with codes 16000-16036. This article will update reporting guidelines for these codes.

Rule of Nines

The Rule of Nines is an estimation of the percentage of a body's surface that is burned, which is calculated by dividing the total body surface into 9% segments. With an infant or child, however, the rule deviates because of the relatively larger surface area of the child's head at the younger ages.
Medicare/Medicaid — Navigating the impossible

Medicare content (claim review)

Physician Compliance Edit

Claim Information (Bold Fields are required)

- Claim Identifier
- Claim Date of Service: 02/28/2016
- Date of Birth: 01/01/1971
- Gender
- Provider Specialty
- Medicare Contractor: CGS Administrators, LLC
- List of States and Their Medicare Contracted Carriers
- CPT and/or HCPCS Codes

Run Check #1 | Clear Check #1 | Print ABN

Edit results are based on non-facility rules, regardless of which fee type option is selected. The fee type selection simply changes the data displayed in the "Fee" and "Total RVU" columns.

Example table:

<table>
<thead>
<tr>
<th>Line</th>
<th>Date Of Service</th>
<th>Code</th>
<th>Mod</th>
<th>Mod</th>
<th>Primary Dx</th>
<th>Secondary Dx</th>
<th>Fee</th>
<th>Total RVU</th>
<th>Work RVU</th>
<th>Edit Conflicts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>02/28/2016</td>
<td>13152</td>
<td></td>
<td></td>
<td>E11.55</td>
<td></td>
<td>514.87</td>
<td>14.38</td>
<td>5.34</td>
<td>OK</td>
</tr>
<tr>
<td>2</td>
<td>02/28/2016</td>
<td>11000</td>
<td></td>
<td></td>
<td>E11.55</td>
<td></td>
<td>55.14</td>
<td>1.54</td>
<td>0.60</td>
<td>mUO</td>
</tr>
<tr>
<td>3</td>
<td>02/28/2016</td>
<td>36410</td>
<td></td>
<td></td>
<td>E11.85</td>
<td></td>
<td>17.19</td>
<td>0.48</td>
<td>0.18</td>
<td>LBI, RPO, mUO</td>
</tr>
</tbody>
</table>

Records 1 - 3 of 3
## Medicare/Medicaid — Navigating the impossible

### Medicare content (claim review)

<table>
<thead>
<tr>
<th>Line #</th>
<th>Icon</th>
<th>Edit Type</th>
<th>Edit Conflict</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>muO</td>
<td>Review</td>
<td>Medicare Unbundle - Modifier Override</td>
<td>Per CCI Guidelines, Procedure Code 11000 [DBRDMT EXTENSIV ECZEMAINFECT SKIN UP 10% BDY SURF] has a CCI conflict with Procedure Code 13152 [REPAIR COMPLEX EYELID/NOSE/EAR/LIP 2.0-7.5 CM]]. Review documentation to determine if a modifier is appropriate.</td>
</tr>
<tr>
<td>3</td>
<td>LiN</td>
<td>Review</td>
<td>LCD Part B Missing or Invalid Diagnosis</td>
<td>Per LCD or NCD guidelines, CMS ID(s) A52470, a diagnosis code(s), which meets medical necessity for procedure code 36410, is missing or invalid.</td>
</tr>
<tr>
<td>3</td>
<td>BPO</td>
<td>Review</td>
<td>LCD Part B Invalid Place of Service</td>
<td>Per LCD or NCD, CMS ID(s) A52470, the place of service does not meet policy requirements for procedure code 36410.</td>
</tr>
<tr>
<td>4</td>
<td>muO</td>
<td>Review</td>
<td>Medicare Unbundle - Modifier Override</td>
<td>Per CCI Guidelines, Procedure Code 36410 [VNPNXR 3 YEARS/&gt; PHYSIQHP SKILL] has a CCI conflict with Procedure Code 11000 [DBRDMT EXTENSIV ECZEMAINFECT SKIN UP 10% BDY SURF)]. Review documentation to determine if a modifier is appropriate.</td>
</tr>
</tbody>
</table>
Medicare/Medicaid — Navigating the impossible

Medicare content (content searching by code)
Medicare/Medicaid — Navigating the impossible

Medicaid content (claim review)
✓ Searching thousands of edits and guidelines FOR YOU!

Edit results are based on non-facility rules, regardless of which fee type option is selected. The fee type section simply changes the data displayed in the "Fee" and "Total RVU" columns.
Medicare/Medicaid — Navigating the impossible

Medicaid content (content searching by code, keyword or state)
The Clinical Documentation Improvement Add-on

- The Clinical Documentation Improvement (CDI) Add-on includes four different sources for CDI improvement content:
  - Optum360: The ICD-10-CM Clinical Documentation Improvement Desk Reference
  - Optum360: The Guide to Clinical Validation Documentation and Coding Reference
  - Optum360: Physician Consulting ICD-10-CM CDI Improvement Training Content
  - Optum360: Clinical Documentation Guidelines for Facilities

- **Identify and clarify**...any confusing, incomplete, conflicting or missing information in the physician-documentation portion of the health recorded that is related to diagnoses or procedures.
The Clinical Documentation Improvement Add-on

- **Search clinical terms, codes, keywords, print and/or email**...documentation that can be necessary for any clinician, coder or any other health care individual needing information for accurate code identification and a more robust and accurate depiction of patient severity.

- **Foster and enhance**...communication between members of the CDI team, coders and medical staff.

- **Provide ICD-10-CM education**...to medical staff members on the increased granularity inherent in ICD-10-CM and how it necessitates more detailed documentation in the medical record, as well as educating coding staff members clinical knowledge as it relates to the specificity in ICD-10.

- **Provide continuity of care**...for the patient, between members of the health care team that rely on documentation in the health record for determining ongoing treatment decisions.
The Clinical Documentation Improvement Add-on

### Clinical Documentation Improvement Content

#### Search Criteria

- **Search Logic**: ＆ And ＆ Or ＆
- **Search by code**: 
- **Search by clinical term**: diabetes

(Code Sets: CPT, HCPCS, ICD-9 Vol 1, 3 or ICD-10-CM/PCS, maximum 4 codes delimited by comma)

(maximum to 4 terms delimited by space)

#### Clinical Documentation Improvement Search Results

<table>
<thead>
<tr>
<th>Clinical Topic</th>
<th>Associated Codes</th>
<th>PDF</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age-related</td>
<td>H25.0,H25.1,H25.2,H25.6,H25.9</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
<tr>
<td>Diabetes Mellitus</td>
<td>E08,E08.00,E08.01,E08.10,E08.11,E08.21,E08.22,E08.29,E08.31,E08.311...</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Topic</th>
<th>Associated Codes</th>
<th>PDF</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetic Ketoacidosis</td>
<td>E07.2</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Topic</th>
<th>Associated Codes</th>
<th>PDF</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Charcot’s Arthropathy</td>
<td>E08.610,E09.010,E10.010,E11.010,E13.010,G95.0,G99.0,M14.6,M14.60,M14.61...</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
<tr>
<td>Diabetes Mellitus in pregnancy, child birth and puerperium</td>
<td>O24.O24.0,O24.01,O24.011,O24.012,O24.013,O24.019,O24.02,O24.03,O24.1...</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Clinical Topic</th>
<th>Associated Codes</th>
<th>PDF</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diabetes Mellitus with Cataracts</td>
<td>240.50,249.51,260.00,250.01,250.02,250.03,250.50,250.51,250.52,250.53...</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
<tr>
<td>Diabetes with Diabetic Retinopathy</td>
<td>249.50,249.51,362.01,362.02,362.03,362.04,362.05,362.06,362.07</td>
<td><img src="#" alt="Icon" /></td>
<td><img src="#" alt="Icon" /></td>
</tr>
</tbody>
</table>
(complication/comorbidity) condition when sequenced as the principal diagnosis.

**Physician Note**
Many payers, including Medicare, have quality measures in place to determine that quality and cost effective care is provided to the patient. It is imperative that the diabetes and any associated conditions or complications be documented in the medical record. Documentation should include statements that demonstrate the condition and therapy was monitored, evaluated, assessed/addressed, and/or treated on the current encounter.

**Drug or chemical induced diabetes mellitus (E09.-)**
Diabetes due to drug or chemical ingestion is found in category E09. Poisoning would be reported for overdose or substance taken improperly; adverse effect indicates it was properly prescribed and taken but which resulted in an adverse reaction.

**Key Terms**
Key terms found in the documentation may include:

Steroid induced diabetes

**Clinical Tip**
Some drugs and chemicals, whether considered therapeutic or not, can have unintended consequences and can cause diabetic conditions. Examples of drugs known to cause diabetes include: hormone supplements, antihypertensive diuretics and beta blockers, antipsychotics and some antidepressants, some anticonvulsants, antiretrovirals, and...
Contact information
Ryan Devey, Physician eSolutions Product Manager
1-480-822-1004
ryan.devey@optum360.com