

Download Hcc Diagnosis Codes 2014

Intro. The Centers for Medicare & Medicaid Services (CMS) hierarchical condition categories (HCC) model, implemented in 2004, is a risk-adjustment model used to adjust Medicare payments to health care plans for the health expenditure risk of their enrollees. ICD-10 is a diagnostic coding system implemented by the World Health Organization (WHO) in 1993 to replace ICD-9. The system was developed by WHO in the 1970s and is now used in almost every country in the world, except the United States. Page 2 Medicare Risk Adjustment Models: DxCG vs. CMS-HCC Background: The Center for Medicare and Medicaid Services hierarchical condition category (CMS-HCC) model was implemented in 2004 to adjust Medicare capitation payments to private health care plans for the health expenditure. CMS posted an updated listing of acceptable physician types for risk adjustment purposes on the CSSC Operations Website. Note that CMS has deleted specialty 70, Multi-Specialty Physician Group as an acceptable type, and added Interventional Pain Management (09), Speech Language Pathology (15), Hospice and Palliative Care (17), and Geriatric Psychiatry (27).