Optum

Clinical Documentation Improvement (CDI) Add-on



The Optum[®] Clinical Documentation Improvement (CDI) Add-on provides essential information to assist coders in the translation of clinical documentation for complete and accurate coding, as well as assisting clinicians in thorough documentation at the point of care.

Proper code identification ensures clinical quality, substantiates medical necessity and aids in justification for appropriate reimbursement. Health record documentation as designated by the clinician is the foundation upon which coding decisions are based. As a result, accurate understanding of this documentation and a clear record upon presentation of the patient are critical. With the specificity of ICD-10-CM/PCS and the increased level of detail necessary for proper code selection, the documentation driving the code assignment must be detailed and provide accurate information for reimbursement justification.

Key features and benefits

- The CDI Add-on includes four different Optum sources:
 - Clinical Documentation Improvement Desk Reference for ICD-10-CM and Procedure Coding
 - Guide to Clinical Validation & Documentation Improvement for Coding
 - Physician Consulting ICD-10-CM CDI Improvement Training Content
 - Clinical Documentation Guidelines for Facilities
- Identify and clarify Any confusing, incomplete, conflicting or missing information in the physician documentation portion of the health record that is related to diagnoses or procedures.
- 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** Explains how more detailed documentation is necessary in the medical record because of ICD-10 and improves clinical knowledge as related to this increased specificity for both medical and coding staff.
- **Provide continuity of care** Coordination between the patient and members of the health care team that rely on documentation in the health record for determining ongoing treatment decisions.

Clinical Documentation Improvement*

Designed for physicians, hospitals, consultants

Available: Now | Item No: WA35

\$249.95 Single-user; multi-user licenses available

 May be purchased with a new or existing Optum online coding tools subscription; multi-user licenses available.

Search content across four sources of clinical documentation improvement tools:

- Optum Clinical Documentation Improvement Desk Reference for ICD-10-CM and
 Procedure Coding
- Optum Guide to Clinical Validation and Documentation Improvement for Coding
- Additional Physician Specific Clinical Documentation Improvement content from
 Optum Physician ICD-10-CM trainings
- Additional Facility Specific Clinical Documentation Improvement from Optum
 RevenueCyclePro.com

Clinical Documentation Improvement Conte Search content across 4 sources of clinical documentation in				1
-Optum360's ICD-10-CM Clinical Documentation Improveme -Optum360's Guide to Clinical Validation, Documentation en	int Desk Reference d Coding			
-Additional Physician Specific Clinical Documentation Improv -Additional Facility Specific Clinical Documentation Improver	rement content from Optum 360 Physician ICD-10-CM Trainings nent from Optum 360's RevenueCyclePro.com			
Search Criteria				
Search Logic: And Or			-	
Search by code: J45.0				
Search by clinical term: Asthma	HCPCS, ICD-9 Vol.1,3 or ICD-10-CM/PCS, maximum 4 codes delimited by comma)			Asthma
	ns delimited by space)			
				ASTHMA
Search	Reset Criteria			Please specify:
Clinical Documentation Improvement Sear	ch Results			1.Identify
ICD-10-CM Clinical Documentation Improvement Desk	Reference			 Exposure to environment
▼To Dotton		PDF		 Exposure to tobacco s
Clinical Topic Asthma	Associated Codes J45.2,J45.20,J45.21,J45.22,J45.3,J45.30,J45.31,J45.32,J45.4,J45.40		Email	 History of tobacco use
Chronic Obstructive Pulmonary Disease	J45.2,J45.20,J45.31,J45.32,J45.32,J45.30,J45.31,J45.32,J45.32,J45.42,J45.42,J45.32,J45.420,J45.420,J45.420,J45.400,J45.400,J45.400,J45.400,J40	6		 Occupational exposure
Encephalopathy	G92,G93.1,G93.40,G93.41,G93.49	(5) (5)		Tobacco dependence
Heart Failure	109.81,111.0,113.0,113.2,150.1,150.2,150.3,150.4,150.9,197.13	10		Tobacco use
▲To Top	100.01,111.0,110.0,110.2,100.1,100.2,100.3,100.4,100.0,101.10		7	2.Includes
			Records 1 - 4 of 4	
Guide to Clinical Validation, Documentation, and Codi	ng			Allergic (predominantly
Clinical Topic	Associated Codes	PDF	Email	 Allergic bronchitis
Acidosis	E87.2	15		 Allergic rhinitis with as
Chronic Obstructive Pulmonary Disease	J44.1	1		 Atopic asthma
Respiratory Failure	J95.821,J95.822,J96.00,J96.01,J96.02,J96.10,J96.11,J96.12,J96.20,J96.			 Extrinsic allergic asthr
Pulmonary and Respiratory Insufficiency or Distress	J80,J95.1,J95.2,J95.3,J98.4,R06.00,R06.89	1		 Hay fever with asthma
Chest Pain as Principal Diagnosis	R07.1,R07.2,R07.81,R07.82,R07.89,R07.9			 Idiosyncratic asthma
Heart Failure non-rheumatic	111.0,113.0,113.2,150.1,150.20,150.21,150.22,150.23,150.30,150.31	1		 Intrinsic nonallergic as
▲ To Top			Records 1 - 6 of 6	 Nonallergic asthma
Physician Documentation Improvement Instructions			Necolda 1 - 0 01 0	3.Type
▼To Dotton				 Mild intermittent
Clinical Topic	Associated Codes	PDF	Email	Mild persistent
Asthma	J45,J45.2,J45.20,J45.21,J45.22,J45.3,J45.30,J45.31,J45.32,J45.4	1		Moderate persistant
Chronic obstructive pulmonary disease	J44,J44.0,J44.1,J44.9			Severe persistant
Respiratory diseases affecting interstitium	J80,J81,J81.0,J81.1,J82	1		
Family History	Z80,Z80.0,Z80.1,Z80.2,Z80.3,Z80.4,Z80.41,Z80.42,Z80.43,Z80.49			• Other
			Records 1 - 4 of 4	 Exercise induced broken
Facility Documentation Improvement Instructions				 Cough variant asthn
To Dotton Clinical Topic	Associated Codes	PDF	Email	 Unspecified
Laparoscopic Gastric Restrictive Procedures	44.95,44.96,44.97,44.98	15		 Asthmatic bronchitis
Anxiety Disorders	300.00,300.01,300.02,300.09	1		 Childhood asthma
Bone Mass Measurement	76977,77078,77080,77081,78350,78351,G0130	1		 Late onset asthma
Chest Pain	786.50,786.51,786.59	6		 Document if any of the
Esophagitis	530.10,530.11,530.12,530.19,530.81,530.85	1		 Uncomplicated
2009 H1N1	488.1,488.11,488.12,488.19	1		 With (acute) exacert
Pulmonary Hypertension	416.0,416.8	1		 With status asthmati
Chronic Obstructive Pulmonary Disease	491.1,491.20,491.21,491.22,491.8,491.9,492.0,492.8,493.20,493.21	6		
Asthma	493.00,493.01,493.02,493.10,493.11,493.12,493.81,493.82,493.90,493.9			
The strange for a second s	518.51,518.53,518.81,518.83,518.84	1		
Respiratory Failure				
Respiratory Failure Bronchitis	466.0,466.11,466.19,490,491.0	6		

Asthma			
STHMA			
lease specify:			
Identify			
 Exposure to environmental tobacco smoke 			
Exposure to tobacco smoke in the perinatal period			
 History of tobacco use 			
· Occupational exposure to environmental tobacco s	moke		
 Tobacco dependence 			
Tobacco use			
Includes			
 Allergic (predominantly) asthma 			
Allergic bronchitis			
 Allergic rhinitis with asthma 			
 Atopic asthma 			
 Extrinsic allergic asthma 			
 Hay fever with asthma 			
 Idiosyncratic asthma 			
 Intrinsic nonallergic asthma 			
 Nonallergic asthma 			
Туре			
 Mild intermittent 			
 Mild persistent 			
 Moderate persistant 			
 Severe persistant 			
• Other			
 Exercise induced bronchospasm 			
 Cough variant asthma 			
Unspecified			
 Asthmatic bronchitis 			
 Childhood asthma 			
 Late onset asthma 			
 Document if any of the above type is 			
Uncomplicated			
With (acute) exacerbation			
 With status asthmaticus 			

CDI Add-on provides support with HCC efforts

When you have access to CDI support, you can significantly improve your ICD-10-CM code selection, which improves "RAF" scores for possible increased HCC reimbursement. The example below shows how CDI improvement can positively affect your HCC coding.

CDI support is valuable. It improves overall patient evaluation and aids in providing the a clearer opportunity for reimbursement.

Specific coding example with improved documentation with the CDI Add-on support

Specific Coding Example

A 76-year old white female presents today for routine follow-up.

During exam, noticed a **diabetic pressure ulcer** on patient's ankle. Patient states that it has been hurting and that she has been taking Tylenol to help with the pain. Does appear to have some yellowing tissue at the bottom, **which is stage III**. Will prescribe Norco to assist in pain management and refer patient to wound specialist. Wound is attributed to patient's existing, but otherwise **stable atherosclerosis due to diabetes**. Patient has had previous amputation of left great toe, due to other diabetic vascular complications.

Patient's diabetes is stable. A1C measured today at 6.2 percent. Patient states that she has been trying to eat a balanced diet. Continuing Metformin 500 mg at twice per day.

Patient's cardiac conditions of cardiomyopathy and CHF are stable. Recommend that she continue regular follow-up and medicine regime as recommended by her cardiologist.

Advised patient to follow-up with me in 4 weeks or sooner if **ulcer** worsens.

Element	RAF Value		
76-year-old female	0.452		
Medicaid eligible	0.161		
Diabetes with vascular complications	0.344		
Atherosclerosis of extremity with ulceration	1.779		
Cardiomyopathy	0.355		
Disease interaction (DM+CHF)	0.256		
CHF	Same HCC as cardiomyopathy		
Amputation of great toe	0.837		
Total	4.184		
PMPM Payment for Monthly Care	\$2,928.80		

All add-on modules may be purchased with a new or existing subscription to an Optum online coding tool; multi-user licenses available.

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