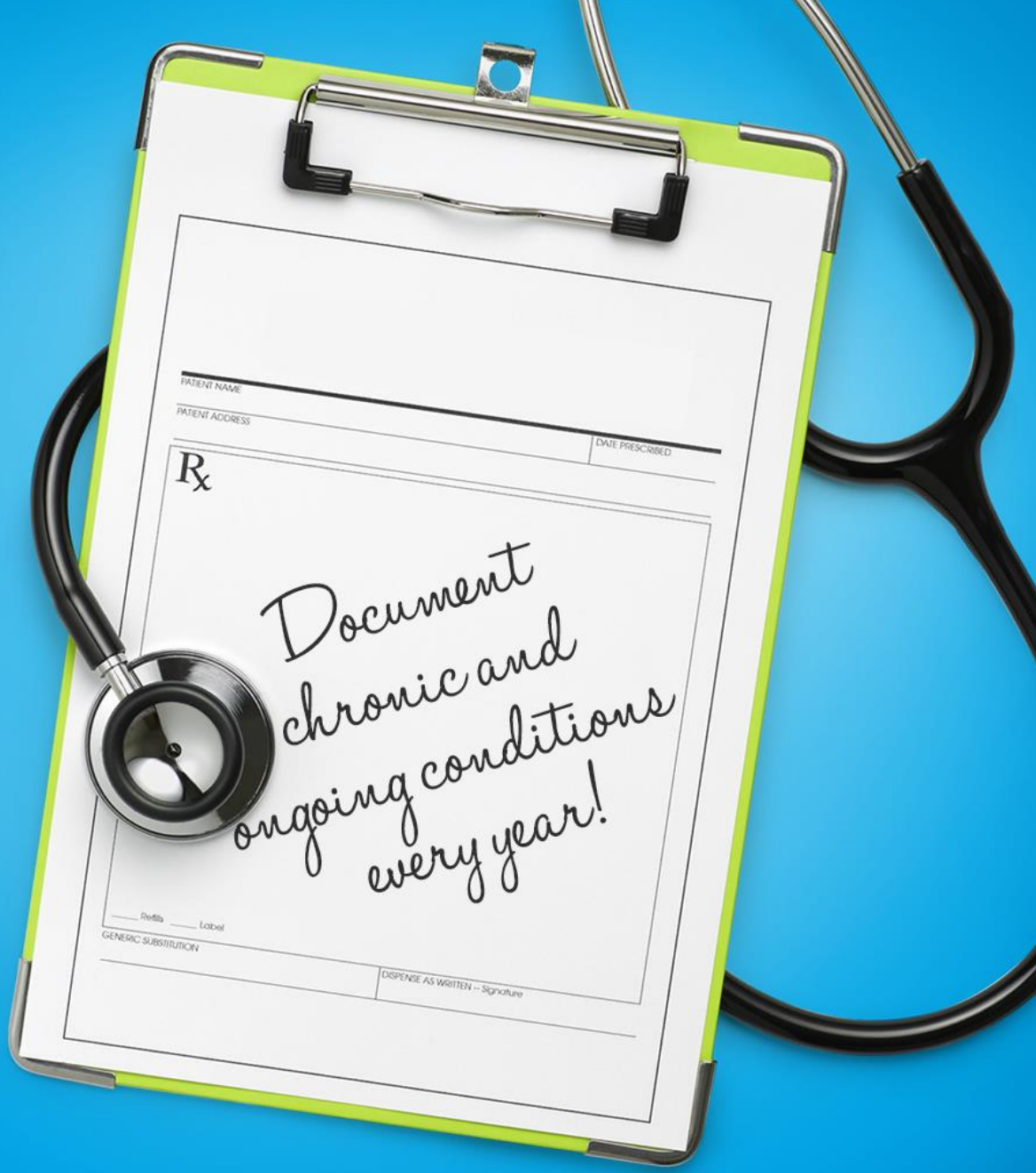
Welcome to the 2021 UDC Program

5 in 5

Monthly Tips and Live Q&A Session

May 26th, 2021

12:15 – 12:45 p.m.



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May 2021 TOPICS

Discussion Topics

1. ***HPI Condition Validation***
   - M-E-A-T can be captured in the HPI
   - May include key words such as "stable, well-controlled, managed by"
   - Avoid ambiguous documentation (see additional slide)
2. ***Telehealth Reminders***
   - Some patients continuing telehealth visits
   - Remember to document audio and visual to qualify for face to face
   - Validate any patient reported conditions
3. ***Quarter 1 2021 UDC Payments***
   - Payments are being finalized and will be sent out by mid-June
   - Payment reports will be posted to NaviNet after payments are made
4. ***UDC Progress Report enhancements***
   - Entity/Practice summary now includes % of closed gaps through the reporting date. It also shows % of agreed/disagreed gaps and gaps which were marked further evaluation needed
   - This same info is broken out by practitioner on the Practice Level summary tab
5. ***UDC Best Practice Spotlight***
   - Nicole, UPMC Pinnacle – thank you!

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PHI Documentation Examples

Ambiguous HPI:

Hypertension

This is a chronic problem. Associated symptoms include anxiety. Pertinent negatives include no blurred vision, chest pain, headaches, orthopnea, palpitations, peripheral edema, PND, shortness of breath or sweats. Risk factors for coronary artery disease include sedentary lifestyle, stress, post-menopausal state, obesity, diabetes mellitus, dyslipidemia and family history. Past treatments include ACE inhibitors and diuretics. Compliance problems include exercise and diet. There is no history of PVD.

Unclear whether these are specific to this patient or just a statement of risk factors in general.

Specific HPI:

Diabetes

She presents for her follow-up diabetic visit. She has type 2 diabetes mellitus. Patient's current risk factors for coronary artery disease include morbid obesity, post-menopausal, angina, and dyslipidemia. Regular follow-up with Ophtho. FBS range 120-170 mg/dl.

Clearly shows the risk factors are related to this specific patient and they are current.

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Progress Report Enhancements

Practice Name: ABC Family Practice
Practice ID: 001000001
Data Valid for Diagnosis Gaps Closed through: 05/06/2021

	1000001
Medicare Advantage Attribution	200
Members with Open Diagnosis Gaps	120
Open Diagnosis Gaps	250
Closed Diagnosis Gaps	150
% Closed (See Note Below)	63%
Agreed Diagnosis Gaps	100
% Agreed	67%
Disagreed Diagnosis Gaps	40
% Disagreed	27%
Further Evaluation Needed	10
% Further Evaluation Needed	7%
Estimated Compensation	$11,550.00

*Note: % Closed Gaps is the percentage of gaps closed through this reporting date. Gap data is subject to change. Calculation is Closed Diagnosis Gaps/(Open Diagnosis Gaps + Closed Diagnosis Gaps)

Practitioner	Medicare Advantage Attribution	Members with Open Diagnosis Gaps	Open Diagnosis Gaps	Closed Diagnosis Gaps	% Closed	Agreed Diagnosis Gaps	% Agreed	Disagreed Diagnosis Gaps	% Disagreed	Further Evaluation Needed	% of Gaps Needing Further Evaluation
Practitioner #1	0	0	0	14	100%	3	21%	5	36%	6	43%
Practitioner #3	47	15	37	29	44%	15	52%	7	24%	7	24%
Practitioner #4	24	4	5	32	86%	16	50%	10	31%	6	19%
Practitioner #5	17	2	6	7	54%	6	86%	0	0%	1	14%
Practitioner #6	26	9	17	21	55%	11	52%	6	29%	4	19%
Practitioner #7	27	3	7	40	85%	23	58%	13	33%	4	10%
Practitioner #8	21	8	19	25	57%	19	76%	6	24%	0	0%
Practitioner #9	38	21	37	20	35%	8	40%	11	55%	1	5%

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Highmark Monthly Coding Knowledge College

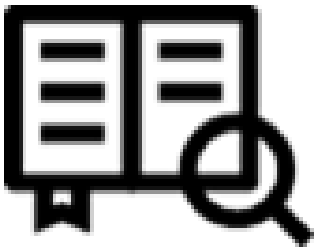
WHAT: Live session that will focus on **Alzheimer's and Dementia** to review strategies for improving your documentation and coding for risk adjustment.

WHEN: June 9, 2021, from 12:15-12:45 p.m.

WHERE: Zoom webinar. Registration required using this link (may have to copy/paste into browser): https://highmarkhealth.zoom.us/webinar/register/WN_djwHor6dSoC0FydSGZ2Bkg

ADDITIONAL COURSE INFORMATION:

This course will offer **0.5 *AMA PRA Category 1 Credit™*** for providers and **0.5 CEU for coders**



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UDC Best Practice Spotlight: Nicole, UPMC Pinnacle

67 Offices

MA Membership: 5,551

Run a daily report listing upcoming appointments. Filter report for current and next day appointments.

→ Search for patients in UDC Portal to see Open Conditions.

→ Research patient's chart to find diagnoses on the problem list. If they aren't on problem list, review chart to see where they may have come from.

→ Diagnoses on the patient's chart are added to the problem list. A note is then added in a future encounter reminding the provider about what HCC codes need to be charted.

→ Provider addresses open conditions during patient visit.

→ After the appointment, once the provider notes are completed, the eForm is then able to be completed.

→ **UDC Form Submitted!**

- *Dot phrases are used to add the basic note*
- *Diagnoses are copy/pasted directly into the patient's chart from the UDC Portal*

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Questions?

UDCHelp@highmark.com

This email address is available for practices to submit any type of questions related to the UDC Program – questions about general documentation practices, specific documentation questions, program rules, payments, specific questions about a particular Member's Form

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