

PRIMARY DIAGNOSIS FAQs

Under PDGM, how may clinical are grouped into each 30-day period?

Twelve groups and they are based on the patient's principal diagnosis.

What does the patient's principle diagnosis mean?

The reported principal diagnosis provides information to describe the primary reason for which patients are receiving home health services under the Medicare home health benefit.

How many valid primary codes map into one of the 12 clinical groupings?

CMS has identified 43,287 ICD-10 codes (out of 68,000) as valid primary codes. All other ICD-10 codes are not considered valid primary codes.

What else is taken into consideration for the primary reason for a homecare admission?

A Face-to-Face encounter must also support and be related to the primary reason for the home care admission. Agencies should take steps now to analyze current practices surrounding the Face-to-Face and physician communication for any clarifications.

What are comorbidities?

A comorbidity is defined as a medical condition coexisting in addition to a principal diagnosis. Comorbidity is tied to poorer health outcomes, more complex medical need and management, and higher care costs.

What are some examples of comorbidities?

Heart disease, skin disease, behavioral health issues (including substance use disorders), endocrine disease, gastrointestinal disease, and respiratory disease, infectious diseases – to name a few.

What are the circumstances home health 30-day periods of care can receive a comorbidity adjustment?

- **Low comorbidity adjustment:** There is a reported secondary diagnosis that is associated with higher resource use.
- **High comorbidity adjustment:** There are two or more secondary diagnoses that are associated with higher resource use when both are reported together compared to if they were reported separately. That is, the two diagnoses may interact with one another, resulting in higher resource use.
- **No comorbidity adjustment:** There is no reported secondary diagnosis that falls into the PDGM diagnoses categories.

Are there any secondary diagnoses allowed in a home health claim?

The home health claim allows for up to 24 secondary diagnoses.

What should clinicians do regarding comorbidity adjustment levels?

Clinicians need to complete an OASIS assessment that fully captures a patient's condition at the start of care. To ensure all comorbidities are captured, it is important that all clinicians involved in the patient's care understand the disease process and review the patient history and physical, physician notes and OASIS item responses as a relevant comorbidity might be hidden in this documentation.

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