



Executive Summary:

PDGM Primary Diagnoses and Comorbidities

Primary Diagnosis

Under PDGM, each 30-day period is grouped into one of 12 clinical groups based on the patient's principal diagnosis. 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.

CMS has identified 43,287 ICD-10 codes (out of 68,000) as valid primary codes and has mapped each of these codes into one of 12 clinical groupings. All other ICD-10 codes are not considered valid primary codes. Using a nonvalid code as the primary diagnosis would result in nonpayment to the agency. Also note:

- Nonspecific codes like Unspecified Osteoarthritis M19.90 tend not to map to a clinical grouping under PDGM.
- The 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.

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.

PDGM includes a comorbidity adjustment category based on the presence of secondary diagnoses. Depending on a patient's secondary diagnoses, a 30-day period may receive no comorbidity adjustment, a low comorbidity adjustment, or a high comorbidity adjustment.

CMS has developed a HH specific comorbidity list with broad, body-system clinical categories used to group comorbidities for PDGM:

- Heart disease
- Respiratory disease
- Circulatory disease
- Cerebral vascular disease
- Gastrointestinal disease
- Neurological conditions
- Endocrine disease

- Neoplasms
- Genitourinary/Renal disease
- Skin disease
- Musculoskeletal disease
- Behavioral health issues (including substance use disorders)
- Infectious diseases

Of those 68,000 ICD-10 codes, only approximately 3000 are designated as comorbidity diagnoses and interactions that are associated with higher resource use.



Home health 30-day periods of care can receive a comorbidity adjustment under the following circumstances:

- 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.

More information and best practices:

Please note that each 30-day period can have only one comorbidity adjustment level.

- The home health claim allows for up to 24 secondary diagnoses.
- It will be important to ensure that all comorbidities are captured on the claim to ensure the episode payment is properly adjusted, and the patient is receiving the appropriate care according to the patient's need.
- CMS has posted a Comorbidity Interaction
 Table on its website, but it is not searchable.
 To calculate the comorbidity adjustment, CMS will be extracting the primary diagnosis and all comorbidities from the claim.
- OASIS accuracy is critical to support the claim.
- Clinicians need to complete an OASIS assessment that fully captures a patient's condition at the start of care.

- Episodes need to be coded to the highest level of specificity and all documentation needs to support the OASIS assessment as well as code selection and sequencing.
- Often, comorbidities are not clearly outlined in the documentation received from the referral source. 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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