

Cerner Flash

Ambulatory: Stanson HCC Software Product in Cerner

August 15, 2023

Stanson HCC Software Product in Cerner Overview

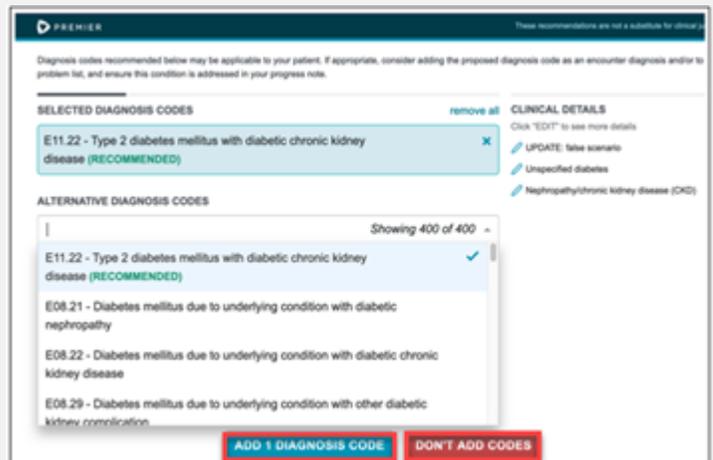
New Workflow effective today: To improve the capture of HCC risk adjustment codes, the Stanson HCC Software product has been integrated into Cerner. Follow the workflow below to achieve the desired outcomes.

Positions Impacted: All Ambulatory Provider positions.

Workflow for Cerner and Stanson

When documenting the patient's diagnosis, medications, and lab orders into Cerner using an HCC diagnosis, a window will display when a more appropriate HCC code is available.

- 1) An alert window will display when the Provider adds a diagnosis to the **Assessment and Plan** portion of the patient's visit if a more specific code is recommended, or if a new diagnosis that has not been coded yet is inferred from the clinical documentation in the chart.
- 2) Providers are encouraged to address the pop-up by clicking **"ADD"** (if appropriate), or **"DON'T ADD"** (if not appropriate).
 - Ignoring the request will cause the alert to fire again in the future.
- 3) **Select Add Diagnosis Code:**
 - a. The Provider agrees with recommended diagnosis.
 - b. Diagnosis will be added to the Diagnosis and Problems list (may need to assign priority- see below).
- 4) **Select Do Not Add Codes**
 - a. The Provider disagrees with the recommended diagnosis.
 - b. Two options for declining the code:
 - **Decline with valid reason:** Removes alert from that visit and alert will not fire again for the remainder of the calendar year.
 - **Decline without reason specified:** Removes alert from that visit and alert will not fire again for a specified time frame - typically 90 days

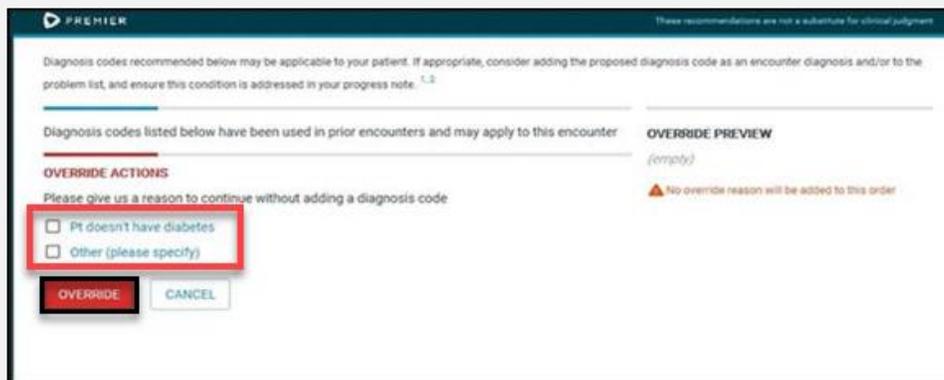


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- 5) If **Add Diagnosis Code** is selected, Providers **must** assign priority to the added diagnosis code, or it will **not** be associated to the Note or the claim.
- a. Once added, refresh the page to ensure the added codes are applied to the claim and display in the **Assessment and Plan** section of the Workflow Page and Note.

Diagnosis & Problems				
Classification: Medical and Patient Sta		Add as: This Visit		Add problem
Priority	Problem Name	Code	Onset	Classification
1	(HCC) COPD (chronic obstructive pulmonary disease)	J44.9 (ICD-10-CM)	--	Medical
2	ASHD (arteriosclerotic heart disease)	I25.10 (ICD-10-CM)	--	Medical
3	Elevated alkaline phosphatase level	R74.8 (ICD-10-CM)	--	Medical
	Body mass index [BMI] 39.0-39.9, adult	Z68.39 (ICD-10-CM)	--	Medical
	(HCC) Morbid (severe) obesity due to excess calories	E66.01 (ICD-10-CM)	--	Medical

- 6) If **Don't Add Codes** is selected, please select the reason for declining the recommended diagnosis code or the alert **will** reappear after 90 days.
- a. Click **Override** when complete.



PREMIER

These recommendations are not a substitute for clinical judgment.

Diagnosis codes recommended below may be applicable to your patient. If appropriate, consider adding the proposed diagnosis code as an encounter diagnosis and/or to the problem list, and ensure this condition is addressed in your progress note. ^{1,2}

Diagnosis codes listed below have been used in prior encounters and may apply to this encounter

OVERIDE ACTIONS

Please give us a reason to continue without adding a diagnosis code

Pt doesn't have diabetes

Other (please specify)

OVERIDE PREVIEW

(empty)

OVERIDE **CANCEL**

OVERIDE **CANCEL**

OVERIDE **CANCEL**

Important Notes:

- Do **not** ignore the alerts, as they will not address the potentially improved coding documentation, and the alerts will appear later until added or declined.
- Remember to **“CREATE NOTE”** **after** all your diagnoses and documentation are complete to ensure that all current and new HCC codes are captured.
- Currently, you **must** manually ensure that the new HCC codes are added to your patient's problem list, but an automated process will be released this Fall by Stanson.