BlueCross BlueShield of Vermont

An Independent Licensee of the Blue Cross and Blue Shield Association.

Coding Tips

This is one in a series of tip sheets focusing on accurate coding for specific conditions.

RE-ADDRESSING PATIENT CONDITION EVERY CALENDAR YEAR

Hold a face-to-face office visit or a telehealth visit to assess your patient's condition(s) annually.

Schedule an office visit

Schedule office visits with your patients before the end of the calendar year and remember to address all chronic conditions during each visit.

Follow DSP guidelines

Conduct office visits with your patients following DSP (Diagnosis, Status, Plan of care) guidelines to address the condition(s).

- Diagnosis – Document all conditions to the highest level of specificity
- Status – Stable, worsening, improving, controlled or uncontrolled
- Plan – Treatment, referral, follow-up

Questions? Contact Blue Cross VT Risk Adjustment at **riskadjustment@bcbsvt.com** or at **(802)-371-3540**.

ICD-10-CM diagnostic codes and the ICD-10-CM Official Guidelines for Coding and Reporting are subject to change. It's the responsibility of the provider to ensure that current ICD-10-CM diagnostic codes and the ICD-10-CM Official Guidelines for Coding are reviewed prior to the submission of claims.

Keep in mind that none of the information included in this document is intended to be legal advice and, as such, it remains the provider's responsibility to ensure that all the coding and documentation are done in accordance with all applicable state and federal laws and regulations.