Community Care Alliance

Minutes With the
Medical Director

HCC Coding for Providers, Chapter 2

Payment for healthcare continues to shift from fee for service to value-based payment. Initially Medicare drove the transformation, but commercial payers have entered the market. From traditional health insurance to consortiums of employers, the migration to reimbursement for value continues to accelerate. Community Care Alliance is committed to providing our members with the knowledge and tools to achieve success in this new market place.

In late March Cathryn Benedict and I presented the second installment of HCC coding for providers. During this visit you had the opportunity to meet Cathryn, who previously worked in Denver's population health network, helping healthcare providers transition to value-based payment. She brings a vast array of experience and will assist providers in simple workflow adaptions.

We reviewed the basic concepts of HCC coding, expanded the depth of the discussion, and drilled down on-site specific data. Three new HCC tip sheets were added to the tool library, and we explored how to insert them into your workflow.

Our goal is to help you work smarter, not harder.

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