Plastic & Hand Codes			
Breast Cancer	C50.X	C50.0-C50.929	Breast, Prostate, and Other Cancers and Tumors
Melanoma	C43.X	C43.0-C43.9	
Merkel Cell Carcinoma	C4A.X	C4A.o-C4A.9	
Pressure Ulcer of Skin	L89.X	L89.00-L89.9	Pressure Ulcer of Skin
Non-Pressure Chronic Ulcers	L97.X	L97.10-L97.92	Chronic Ulcer of Skin, Except Pressure
Gangrene	l96	-	Atherosclerosis of Extremity with Ulceration or Gangrene
Partial traumatic transphalangeal amputation of other and unspecified finger	S68.62X	S68.620S-S68.629S	Amputation Status, Lower Limb/Amputation Complication & Traumatic Amputation and Complications
Morbid Obesity	E66.X	E66.2, E66.01 & Z68.4145	Morbid Obesity
Diabetes with Complications	Type 1: E10.X	E10.21-E10.638, E10.649-E10.8	Dishetes with Chronic Complications
(Type 1 or 2)	Type 2: E11.X	E11.21-E11.638, E11.649-E11.8	Diabetes with Chronic Complications
Diabetes without complications	Type 1: E10.9	-	Dishetes without Complication
(Type 1 or 2)	Type 2: E11.9	-	Diabetes without Complication
Bipolar Disorder	F31.X		Major Donrossiya, Pinglar or Parangid Disordors
Major Depressive Disorder	F32.X, F33	F32.0-F32.8, F33.0-F33.4, F33.8-F33.9	Major Depressive, Bipolar or Paranoid Disorders
Essential Hypertension	l10	-	Non-Specific Symptom Codes and Non-HCC Codes
Sleep Apnea	G47.X	G47.0-G47.9	
Basal Cell Carcinoma	C44.1X	C44.11-C44.1192	
Squamous Cell Carcinoma	C44.1X	C44.12-C44.1392	
Carpal Tunnel Syndrome	G56.X	G56.o-G56.o3	
Trigger Finger	M65.3X	M65.30-M65.359	
Follicular Cyst	L72.X	L72.0-L72.3, L72.8-L72.9	
Osteoarthritis of first Carpometacarpal Joint	M18.X	M18.0-M18.5, M18.9	
Ganglion	M67.4X	M67.40-M67.49	
Pseudarthrosis after fusion or arthrodesis	M96.0	-	
Localized swelling, mass and lump of skin and subcutaneous tissue	R22.X	R22.0-R22.4, R22.9	
Bursopathy	M71.X	M71.0-M71.5,M71.8-M71.9	
Hyperthropy of Breast	N62	-	
Edema	R6o.X	R60.0-R60.1, R60.9	
Cutaneous abscess	Lo2.X	L02.0-L02.9	
Cellulitis	Lo3.X	Lo3.01-Lo3.9	
Actinic keratosis	L57.0	-	
Please remember, the diagnoses chosen must meet MEAT criteria, one of the following has to be supported: M-Monitored, E-Evaluated, A-Assessed, T-Treated. Documentation must be complete and accurate before selecting the specific diagnosis code, and always choose the most specific/or combination (s).			
Accountable Care Organization	Special thanks to Specialty Solutions and Plastic & Hand Surgical Associates for their participation in this project. For more information visit: http://mainehealthaco.org/cdi		

Monitored

Disease progression/ regression, ordering labs/rads/diagnostic tests

Review of logs (blood sugar, BP)

Evaluated

Reviewing labs/ test results
Relevant physical examination
Medication/ treatment effectiveness

M.E.A.T.

Assessed

Stable, improving, worsening, etc
Exacerbation of condition
Discussion/ counseling
Relevant record review

Treated

Referral to specialist
Adjusting, refilling, prescribing
medication

- •1 element required per DX code; more is better
- •These factors help providers to establish the presence of a diagnosis during an encounter ("if it wasn't documented, it doesn't exist")
- •Review problem list, document as 'current' or 'active'
- •Do not use 'history of' for chronic conditions unless is fully resolved. Instead use 'stable

Limbs

Hemiplegia, Amputation, Paralysis status

Organs

Dialysis status, Transplant status, respiratory failure

L.O.S.T.

Secondary Dx

diabetic nephropathy+chronic kidney disease stage IV, tie conditions togeter (because of/ related to/ secondary to)

Tubes/Tummy

any "ostomy", morbid obesity

*other commonly lost conditions: substance abuse. HIV. mental health severity

- Document anything that impacts your medical decision making to reflect the complexity and level of care provided.
- Documentation improves care, coverage, costs and compliance.
- •other commonly lost conditions: substance/alcohol abuse, AIDS or HIV, mental health severity and status

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