

Kindred The Valley Hospitals Health System Northern Nevada HEALTH SYSTEM

Powered by The Valley Health System and Kindred Hospitals

February 2025

Newsletter

Volume 116

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#VegasStrong

Henderson Hospital

which includes the facilities below:

- West Henderson Hospital
- Desert View Hospital
- Centennial Hills Hospital
- Mountain View Hospital
- Southern Hills Hospital
- Sunrise Hospital
- Valley Hospital
- University Medical Center of Southern Nevada

(702) 800-7084 (775) 391-6484 Compliance Line:

Visit our Website

Contact Us:

www.silverstateaco.com

(702) 751-0834

SilverStateACO@ SilverStateACO.com

Northern Nevada:

- Carson Tahoe Regional Medical Center
- Northern Nevada Medical Center
- Sierra Medical Center

These notifications allow practices the ability to reach out to the patient and make an appointment for them to have a follow-up visit. These follow-up visits can be coded as a Transitional Care Management

Experian and TCM Visits

Each Silver State ACO participating practice has access to the Experian MemberMatch system. This system will notify the practice when any of its attributed patients is discharged from an Experian contracted hospital,



- Spring Valley Hospital
- Summerlin Hospital

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Northern Nevada: Thursday, Feb. 13, 2025

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(TCM) Visit. A TCM visit pays substantially more than a regular Medicare visit. This visit has been shown to reduce the likelihood of the patient being readmitted to the hospital.

Find out more about the CMS guidelines on TCM Visits, *click here*.

Silver State ACO urges its participants to make use of the Experian notification system. If you would like staff to be educated (or reeducated) in its use, please do not hesitate to request help. For any questions, to request training or additional log-ins, please contact Rena Kantor, Director of Operations, directly (rena@silverstateaco.com or 702-751-0945).

Tips to Improve Coding Accuracy and Reduce Costs

Accurate coding is the foundation of effective healthcare management, especially when a practice is part of an Accountable Care Organization

(ACO) striving to meet quality benchmarks and manage costs efficiently. Poor coding practices can lead to revenue loss, compliance risks, and missed opportunities to capture the care you're providing to patients. Here are some simple, practical tips to enhance coding accuracy and reduce costs:



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- Invest in Ongoing Training for Coding Staff: Medical coding is always changing—new codes, updated rules, and shifting payer requirements can be a lot to handle. That's why it's crucial to offer regular training to your coding team. Focus on:
 - New and revised codes
 - Documentation requirements for specific conditions
 - Common coding errors and how to avoid them

For specific support on ICD-10 coding, the Centers for Medicare & Medicaid Services (CMS) has a great resource page. <u>Click this link</u> to view.

- Get Providers and Coders on the Same Page: Strong communication between providers and coders is essential. Make it easy for them to collaborate by:
 - Holding regular meetings to address documentation gaps



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- Open-door policy for coders to seek clarification from physicians
- Offer training for providers, so they understand why detailed documentation matters
- Use Technology to Your Advantage: Tech tools like computerassisted coding (CAC) software and smart EHR systems can make a big difference. These tools can:
 - Spot missing documentation
 - Suggest the right codes based on clinical notes
 - Flag potential errors for review
- Focus on High-Impact Areas: Not all codes are created equal.
 Some, like those for chronic conditions or preventive services, have a bigger impact on your bottom line. Make sure to:
 - Code chronic conditions (like diabetes) with as much detail as possible
 - Get risk-adjusted coding right to reflect patient complexity
 - Double-check that preventive services and screenings are properly documented
 - Train staff on Hierarchical Condition Categories (HCCs) and their significance
- Give Feedback in Real Time: Mistakes are easier to fix when they're caught early. Set up a system to provide immediate feedback on coding and documentation issues. This helps:
 - Prevent repeated errors
 - Reinforce good habits
 - Improve overall accuracy
- Stay on Top of Denials: Denials can be a big drain on time and money. To keep them to a minimum:
 - o Fix coding issues that commonly lead to claim rejections
 - Watch for patterns in denials and address root causes
 - Set up a process for quickly fixing and resubmitting denied claims

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Improving coding accuracy doesn't have to be complicated. It's a team effort that involves coders, providers, and administrative staff working together to enhance documentation, streamline processes, and adopt

the right tools. By focusing on these strategies, your practice can assist with reducing costs, ensure compliance, and ultimately deliver even better care to your patients. If you're looking for more guidance, the American Medical Association (AMA) provides helpful tools and updates. **Click this link** to check out their resource page.

Have you read this carefully? If so, to be entered to win a prize at the March practice meeting, you may respond to the newsletter email with "Heart Health" in the subject line.

Preventing and Reporting Potential Fraud

CMS has reminded all ACOs that they can help prevent fraud and abuse by ensuring that there is "a method for employees or contractors of the ACO, ACO participants, ACO providers or suppliers, and other individuals or entities performing functions or services related to ACO activities to anonymously report suspected problems related to the ACO to the compliance officer." ACOs can report



potential fraud or abuse to government agencies, including the Office of Inspector General (OIG).

Silver State ACO wants to remind anyone employed by, engaged with, or providing services on our behalf or on behalf of any of our participants or preferred providers, that we maintain a dedicated compliance line. Anyone who suspects suspicious behavior may call 702-751-0834 to report it, without fear of retribution. Messages may be left anonymously but should contain enough information for the ACO Compliance Officer to be able to research the complaint.

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2025 Quarterly Practice Meeting Dates



SOUTHERN NEVADA Tuesday, Feb. 11, 2025 Wednesday, April 30, 2025

Wednesday, July 30, 2025 Wednesday, Nov. 5, 2025

All Southern Nevada Practice meetings will be held at <u>Summerlin</u> Hospital and begin at 11:30 am. Lunch is served.

NORTHERN NEVADA

Thursday, Feb. 13, 2025

*Thursday, May 1, 2025 (at Carson Tahoe Medical Center)

Thursday, July 31, 2025

Thursday, Nov. 6, 2025

Northern Nevada Practice Meetings will be held at <u>Northern Nevada Sparks Medical Building</u>, Suite 201. (Unless otherwise noted) Meet & Greet begins at 5 pm; <u>Meeting begins at 5:30</u>.

SILVER STATE ACO Compliance Line 702-751-0834

Available for secure reporting of any suspected compliance issues, without fear of retribution.



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