Banner Plans & Networks

CLINICAL DOCUMENTATION: NEOPLASMS AND METASTATIC CANERS

THE DIAGNOSIS	Neoplasms (primary sites) and Metastatic cancers (secondary)
COMMON CONDITIONS INCLUDED IN HCC GROUPs: 17, 18, 19, 20, 21, 22, 23	Malignant neoplasm of unspecified site of left female breast (C50.912) Malignant neoplasm of unspecified site of right female breast (C50.911) Malignant neoplasm of prostate (C61) Malignant neoplasm of colon, unspecified (C18.9) Malignant neoplasm of unspecified part of unspecified lung or bronchus (C34.90) Malignant melanoma of skin, unspecified (C43.9) Chronic lymphocytic leukemia (CLL) of B-cell type in remission (C91.11) Multiple myeloma in remission (C90.01) Malignant neoplasm of head of pancreas (C25.0) Non-Hodgkin lymphoma, unspecified, unspecified site (C85.90) Hodgkin lymphoma, unspecified, unspecified site (C81.90) Malignant neoplasm of left ovary (C56.2) Malignant neoplasm of right ovary (C56.1) Malignant neoplasm of uterus, part unspecified (C53.9) Secondary malignant neoplasm of unspecified lung (C78.00) Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions (C77.8)
V28 MODEL CHANGES RAF score = ** Varies** Ranges from: 01.86 (HCC 23) and up to 4.209 (HCC 17)	 The changes to the cancer HCC groups for V28 are as follows: They added two new HCC groups. They were assigned new HCC numbers. The RAF value went up for all groups except for one, which dropped by only 0.004. What didn't change is the definition of "Active vs History of" or the documentation needed to support the HCC diagnosis. Active cancer is defined as: Current disease and the patient has <u>not</u> participated in any treatment option. The patient is currently under treatment (ex. chemotherapy or radiation) for a primary or secondary neoplasm. "Achieved remission" for leukemia, multiple myeloma, or malignant plasma cell neoplasms diagnoses only. "History of" refers to the patient successfully completed some type of treatment and there is either: No evidence of any existing primary lesions. The neoplasm was eradicated (ex. Surgery). The patient is not currently under any treatment after prior successful treatment.

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	 Active surveillance after eradicated or excised neoplasm (ex. Follow-up PSA levels). Items to include in your documentation: Laterality – if applies (left female breast, right kidney, etc.) Specificity – if known (overlapping sites, cerebral meninges) Specialist – who is the provider caring for the treatment plan? Treatment plan – surgery, chemotherapy, etc. Tolerance to the treatment plan Complications, if any
MEAT the	#1: Assessment and Plan example:
DOCUMENTATION	Personal history of malignant neoplasm of prostate (Z85.4)
	Male erectile dysfunction, unspecified (N52.9)
M= Monitor	Mr. P is here for his annual physical exam. It has been 6 years since he his robotic radical prostatectomy. His PSA levels continue to be below 1.0, yet he recently started experiencing more erectile dysfunction. Discussed with patient the different medications for treating ED. Patient opted to try tadalafil. Pt to follow-up in 3 months or sooner if needed.
E = Evaluate	M – Signs and symptoms, such as erectile dysfunction.
A =	E – Test results or vital signs, such as PSA levels.
Assess/Address	A - Order tests or patient discussion, such as ED medications.
T = Treat	T – Medications, therapy, or other modalities, such as tadalafil.
	#2 Assessment and Plan example:
	Malignant melanoma of right upper limb, including shoulder (C43.61)
	Ms. W was recently diagnosed with malignant melanoma on her right upper arm, just below her shoulder after her needle biopsy came back positive. She saw her med onc provider, Dr. O, two weeks ago, and the plan is to do surgery next week with Dr. R. She isn't sure if she will need additional treatments. The patient states she is nervous but is more nervous to let the cancer continue to grow. Pre-op exam performed, and patient is cleared for surgery.
	M – Signs and symptoms, such as nervousness.
	\mathbf{E} – Test results or vital signs, such as biopsy results.
	 A – Order tests or patient discussion, such as presurgical exam.
	T – Medications, therapy, or other modalities, such as surgery.