

# BEST PRACTICES TO IMPROVE DOCUMENTATION ACCURACY

For Cigna Healthcare Medicare Advantage Providers  
September 2023

## Focus on International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) acute, history, and sequela codes

Our goal is to provide you with resources and support to help ensure more accurate coding and documentation. Compliant clinical documentation and coding are essential for every health care setting. Employing best practices and adhering to Centers for Medicare & Medicaid Services (CMS) and ICD-10-CM guidelines for documentation and coding of chronic conditions can help enhance the quality of patient care. \*

- **Acute code:** Used when current condition exists on an acute basis. Acute conditions do not typically occur in outpatient settings.
- **History code:** Used when there is history of a condition, but patient has no further symptoms and requires no further care.
- **Sequela code:** Used to capture active residual impacts/effects after an acute event/diagnosis.

### Coding and documentation examples

Condition	Questions to ask	Acute	History	Sequela
<b>Myocardial infarction (MI)</b>	Did MI occur within the last four weeks (28 days)?	Code category I21		
	Did MI occur four or more weeks ago and is patient still receiving care?	aftercare code Z48.812		
	Did MI occur within four weeks (28 days) of a previous myocardial infarction?	Code category I22 (Subsequent MI)		
	Did acute event occur four or more weeks ago, and patient does not have symptoms or require further care?		Code I25.2 (Old or healed MI)	
<b>Cancer</b>	Is malignancy currently undergoing treatment (i.e., surgery, chemotherapy, radiation, hormonal), or has patient chosen not to be treated?	Specific code for type of cancer		



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	Has the primary malignancy been excised/eradicated from its site, no further treatment is being directed to that site, and there is no evidence of disease?		Code category Z85	
<b>Stroke</b>	Has diagnosis been confirmed by a CTA or MRI?	Code category 163		
	Is patient experiencing residual effects of stroke after acute event?			Code category 169
	Does the patient have a history of a stroke or transient ischemic attack (TIA), currently has no identifiable manifestations, and is no longer in need of specific treatment? (resolved condition)		Code Z86.73	

**Additional information**

If you have any questions, please reach out to your local Provider Education Specialist, or contact [Providereducation@Cignahealthcare.com](mailto:Providereducation@Cignahealthcare.com). Additional information and resources can be found at [MedicareProviders@cigna.com/provider-education-tools](https://www.cigna.com/provider-education-tools).

\* Providers must confirm the accuracy of their diagnoses and ensure that their diagnosis and coding practices comply with the ICD-10-CM official guidelines for coding and reporting and all applicable legal requirements. Accurate coding and reporting allow Cigna Healthcare to provide the best possible benefits and resources to your patients. This guide does not replace the clinician's judgment. If after reviewing the flyer you believe any codes were previously submitted in error, contact your Provider Education Specialist, or email [Providereducation@Cignahealthcare.com](mailto:Providereducation@Cignahealthcare.com).



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