

## Provider Clinical Documentation Tips

Consistently document patient's active, chronic diagnoses in the **"Assessment / Impression"** and **"Plan"** to the highest level of known specificity and include the current status and supporting **\*M-E-A-T criteria** for each condition to support accurate diagnosis code assignment during the encounter.



**"Documentation Risk Areas" examples are included below in red**

### \*M-E-A-T Criteria

- ✓ M | Monitor/Manage/Medicate
- ✓ E | Evaluate/Examine
- ✓ A | Assess
- ✓ T | Treat

**Documentation risk area: acute care conditions documented and reported in the outpatient/office visit/telehealth setting** include, but not limited to: Acute CVA/Stroke, Acute Myocardial Infarction/AMI (greater than 28 days from inpatient encounter), Unstable Angina, Acute/Acute on Chronic CHF, Acute/Acute on Chronic Respiratory Failure, Acute Pulmonary Embolism (PE), Acute Deep Vein Thrombosis (DVT), Acute Kidney Injury (AKI), Acute Tubular Necrosis (ATN), Sepsis, Shock, Coma, Cardiac Arrest, Ventricular fibrillation, Bowel Obstruction/SBO, Bowel Perforation, Hemorrhage, etc.

Diagnosis	Documentation Specificity Examples
Angina	<p><b>Specify status:</b> Stable, <b>*Unstable</b> (e.g., accelerated, crescendo, pre-infarction, post-infarctional, etc.)</p> <p><b>Specify etiology:</b> Due to spasm (angiospastic, Prinzmetal, variant, etc.), with atherosclerotic heart disease, or other cause</p> <p><b>Specify active treatment / monitoring indicated for angina, or if condition was episodic and has resolved.</b></p> <p><b>*Acute status ("unstable" angina) may be treated in acute care/observation setting</b></p>
Arrhythmias	<p><b>Specify type:</b></p> <ul style="list-style-type: none"> <li>• <b>Atrial Fibrillation:</b> Chronic, Paroxysmal, Permanent, Persistent</li> <li>• <b>Atrial Flutter:</b> Atypical (Type 1), Typical (Type 2)</li> <li>• <b>Sick Sinus Syndrome</b></li> <li>• <b>AV Heart Block:</b> First Degree, Second Degree, Third Degree/Complete</li> <li>• <b>Paroxysmal Tachycardia:</b> Re-entry Ventricular Arrhythmia, Supraventricular Tachycardia, Ventricular Tachycardia, etc.</li> </ul> <p><b>Specify active treatment / monitoring indicated for arrhythmia, or if condition was episodic and has resolved</b></p> <p><b>Specify condition indicated for cardiac device (e.g., permanent cardiac pacemaker, AICD, etc.) and status, type of arrhythmia as applicable</b></p> <p><b>Specify clinical significance of cardiac diagnostic results (EKG, echocardiogram, etc. findings) as applicable</b></p>

Diagnosis	Documentation Specificity Examples
Chronic Heart Failure (CHF)	<p><b>Specify status:</b> Chronic, <b>*Acute, *Acute on Chronic</b></p> <p><b>Specify type:</b> Systolic, Diastolic or Combined type, with Normal EF, Preserved EF, Reduced EF, End Stage, etc.</p> <p><b>Clarify:</b> term "DIASTOLIC DYSFUNCTION" for the condition CHF as applicable</p> <p><b>*Acute status, *Acute on Chronic exacerbation status may be treated in acute care/ observation setting</b></p>
Chronic Kidney Disease (CKD)	<p><b>Specify CKD Stage:</b> 1, 2, 3a, 3b, 4, 5, ESRD (document baseline eGFR results, baseline creatinine)</p> <p><b>Specify underlying cause:</b> (e.g., Diabetes, Hypertension, etc.)</p> <p><b>CKD stage 5 &amp; ESRD specify:</b> if "requiring chronic dialysis" "non-compliance with dialysis", and complications of arteriovenous shunt as applicable</p> <p><b>*Acute status (i.e., AKI, Acute Renal Failure, ATN) may be treated in acute care/ observation setting</b></p>
Dementia	<p><b>Specify type:</b> Alzheimer's, Parkinson's, Vascular, Senile</p> <p><b>Specify acuity:</b> mild, moderate, severe</p> <p><b>Specify status:</b> *specify <u>with</u> or <u>without</u> behavioral disturbance, psychotic disturbance, mood disturbance, anxiety</p>
Asthma & COPD	<p><b>Specify "Asthma" status:</b> mild intermittent, mild persistent, moderate persistent, severe persistent</p> <p><b>Specify "COPD with" underlying additional pulmonary conditions</b> if known; including but not limited to:</p> <ul style="list-style-type: none"> <li>• <b>Chronic Bronchitis</b> (clarify obstructive/non-obstructive and etiology due to asthma, chemical, radiation, smoker, other)</li> <li>• <b>Emphysema</b> (with/without chronic bronchitis, other) <b>Bronchiectasis, Interstitial Lung Disease, Pulmonary Fibrosis</b></li> </ul> <p><b>Specify underlying condition for use of continuous supplemental oxygen, home oxygen</b> (e.g., chronic respiratory failure due to (please specify type / etiology with / without hypercarbia, with / without hypoxia, etc.)</p> <p><b>Specify clinical significance of diagnostic results findings</b> (e.g., CXR, Chest CT scan, PFT's, Other, etc.) as applicable</p>
Diabetes	<p><b>Specify type:</b> Type 1, Type 1.5, Type 2; Secondary (i.e., Due to drug or chemical, due to underlying condition such as genetic defects, pancreatic disease, etc.) or Prediabetes status</p> <p><b>Specify control status:</b> With hypoglycemia, With hyperglycemia and include supporting criteria</p> <p><b>Specify related diabetic manifestations / complications:</b> "Diabetes with (please specify condition as applicable)"</p> <p><b>Clarify term "Diabetes without complications"</b> when there may be common clinical complications present during the encounter (e.g., nephropathy, CKD (include stage), neuropathy, gastroparesis, peripheral angiopathy, PVD, foot ulcer/skin ulcer (include ulcer site(s)/depth), cataract, retinopathy, Diabetes with hyperlipidemia, Diabetes with microalbuminuria, Diabetes with erectile dysfunction, other specified complication as applicable etc.)</p> <p><b>*Acute diabetes status (e.g., DKA, etc.) may be treated in the hospital acute care/observation setting</b></p>

Diagnosis	Documentation Specificity Examples
Major Depression	<p><b>Specify:</b> Major Depression / Major Depressive Disorder, reactive depression; resolved, historic</p> <p><b>Specify episode:</b> single episode, <b>*recurrent</b>; <b>*Note: if recurrent and now in remission, specify remission status: in (full) remission, in partial remission as applicable</b></p> <p><b>Specify acuity:</b> mild, moderate, <b>*severe</b>: Note: if severe, specify with or without psychotic features as applicable</p> <p><b>Specify active treatment / antidepressants / counseling indicated for major depression as applicable</b></p>
Malignancy/ Cancer/ Neoplasm	<p><b>Specify type, stage, location:</b> Primary, Secondary, and Metastatic site(s) / location(s) of disease when applicable</p> <p><b>Specify status:</b> Active disease / Currently receiving active treatment / evidence of microscopic disease, or if historical, specify no evidence of disease, cancer-free, survivor, etc.</p> <p><b>Specify treatment type:</b> Neoadjuvant, Adjuvant, Curative, Palliative, Prophylactic, Experimental, Other treatment indicated for cancer / malignancy / neoplasm as applicable. If patient is not on active treatment but still has active disease, please specify.</p> <p><b>Specify Surveillance Plan:</b> "Active" surveillance of "active" neoplasm or "Follow-up" surveillance of "historic" neoplasm</p>
Pulmonary Embolism Deep Vein Thrombosis	<p><b>Specify status:</b> Chronic, <b>*Acute</b>, or history of</p> <p><b>Specify active treatment / anticoagulants indicated for active/chronic PE / DVT if applicable</b></p> <p><b>*Acute status may be treated in acute care setting</b></p>
Severe / Morbid Obesity BMI > 40	<p><b>Specify acuity:</b> Severe Obesity / Morbid Obesity when applicable</p> <p><b>Specify related nutritional diagnosis to exam:</b> e.g., if clinically "Obese" or "Severely Obese" on physical examination,</p> <p><b>Specify the nutritional diagnosis related to the BMI during encounter</b> (e.g., Severe / Morbid Obesity with BMI &gt; 40, <b>*BMI Severe / Morbid Obesity</b> with BMI &gt; 35.0 – 39.9 with <b>*one or more obesity related conditions</b>)</p> <p><b>Specify *obesity related manifestations:</b> (e.g., <b>*Obesity Hypoventilation Syndrome (OHS)</b>, OSA, Cor Pulmonale, CHF, Right Heart Failure, Diabetes, HTN, etc.)</p>