



## **Network Notification**

**Notice Date:** May 26, 2020  
**To:** CareSource Ohio Providers  
**From:** CareSource  
**Subject:** Accurate ICD-10 Coding

---

### **Summary**

Risk Adjustment is a payment mechanism for health plans based on forecasted dollars from claims experience. CareSource collects all known diagnoses for each patient, capturing the complete illness burden of the member, thereby improving disease management, case management and population health management.

### **Importance**

Each year, the reported diagnoses from the previous year is wiped clean. Yearly reporting on claims of all acute and chronic conditions the member is being treated for is essential to ensure CareSource resources are properly allocated. This ensuring members receive the care management services specific to their needs. As a result, you may be notified of Risk Adjustment Diagnoses Gaps that we ask you to address via a claim (if the member has the illness), and via the CareSource Provider Portal and the Collabor8 Diagnosis' Coding Validation portal.

### **Questions**

If you have questions concerning risk adjustment in general, please send your inquiry to [raprovidereducation@caresource.com](mailto:raprovidereducation@caresource.com).

If you have a question about Risk Adjustment Gaps Closures, please send your inquiry to [providerengagement@pulse8.com](mailto:providerengagement@pulse8.com).

The link below provides Medicare guidance on risk adjustment.

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/mc86c07.pdf>

Thank you for collaborating to provide quality care to our members!

OH-Multi-P-100058