This pamphlet provides examples of chronic illness and/or disability diagnoses codes. It also illustrates best practices for physicians and medical billing staff to code ICD-9-CM diagnosis codes on CMS-1500 Claim forms to the highest level of specificity. The Chronic Disease and Disability Payment System (CDPS) is a payment system Medicare programs can use to make health-based capititated payments for disabled Medicaid beneficiaries. It is important to note that the codes listed are not all inclusive and should not be considered as a definitive list of conditions chronically ill or disabled patients can present with after thorough examination from their physician. The complete understanding of the components of a comprehensive chronic illness care plan is our mutual goal to help individuals maintain the highest possible quality of life.

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**Chronic Disease and Disability Payment System Information**

- The acuity factor is an indicator of the resources needed to care for the patient
- CDPS organizes diagnoses into 19 major categories, which correspond to body systems and types of diagnoses
- Each diagnosis category and subcategory is assigned a weight
- The higher the weight, the higher the acuity factor

**What can Molina Healthcare participating providers do to help?**

- Encourage your patients to come in for office visits
- Welcome Postcards, Calls, Reminder cards
- Aged, Blind or Disabled (ABD) members should be seen at least 2 to 4 times per year for their chronic condition
- Submit accurate and timely encounters for every office visit
- Always report each chronic condition on the claim form
- Be specific on diagnosis coding, ill-defined and not otherwise classified (NOC) diagnoses receive NO points in the CDPS scoring
- Your claims must be submitted according to Uniform Billing Guidelines

**Beware of super bills populated with non-specific diagnosis codes**

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