

Chronic Condition Health Home Program  
Patient Tier Assignment Tool (PTAT)  
Version 1.2

**Purpose of the Tool:**

There are two components of this assessment. The first component identifies patients that are eligible for a health home based on the defined entrance criteria. The second component assesses the overall complexity of eligible patients by grouping them into “complexity tiers” based on the number and severity of chronic condition categories that apply to them. By relying on practices to assess complexity, we are not limited to diagnosis codes on claims alone. Understanding of your own practice population will not only ensure more accurate payment through the use of complexity to approximate the time and work of care coordination, but can help to shape your programs and care coordination agendas.

Once familiarity is gained with this tool, it is estimated that eligibility can be established and the tiering tool completed in about one minute on most familiar patients. Each patient must be assessed yearly.

*Please review the instructions below for the tier assignment tool and review the patient’s problem list and the supporting information in the patient’s medical record.*

**Directions for the Patient Assessment Care Coordination Tier Assignment Tool (PTAT):**

You may use conditions contained in the patient’s problem list or diagnoses in the treatment plan or obtained during a patient history, past medical history, care plan or in a guideline or protocols such as anticipatory guidance.

1. Identify those conditions that are likely to be “chronic”. **Chronic conditions** are those that:
  - Have lasted at least six months;
  - Can reasonably be expected to continue for at least six months; or
  - Are likely to recur.

**Entrance Criteria:**

Check the appropriate boxes in the Entrance Criteria section of the tool and total the “Chronic Condition” and the “At Risk of Chronic Condition” columns. Confirm the patient meets the entrance criteria below:

1. Add up the total number of chronic conditions and at risk conditions.
2. If there are at least two chronic conditions the patient is eligible for a health home.
3. If there is one chronic condition and at least one at risk chronic condition, the patient is eligible for a health home.

If the patient qualifies for the health home, complete the tier assignment tool.

**Tier Assignment:**

1. Check the “Condition is Chronic” column for each condition group. Please note that there may be several diagnoses listed in one condition group. Conditions are counted by condition group and not by individual diagnoses. The box is checked for the entire group if there is one condition that meets the definition of chronic. Please include the conditions used to establish entrance criteria for the tier assessment.
2. Check the “severe” column if applicable for the chronic condition. **Severe conditions** are defined as major and potentially unstable conditions that without optimal care are likely to worsen and lead to more serious problems that may result in severe illness, impairment or death. Check the box in the “condition is severe” column if the patient meets these criteria.
3. For those patients that have both boxes checked (a condition group is both chronic and severe), check the “Condition Requires a Care Team” column, if applicable, for the chronic condition.

Some points to consider when to determine if a care team is required:

- While every patient will require some type of care team, ‘care team’ here is defined as a group of health care professionals who plan and deliver patient care in a coordinated way through a health care home in collaboration with a patient. The care team includes at least a personal clinician and the care coordinator and may include other health professionals based on the patients’ needs.
- Some patients will have severe chronic conditions that are stable, such as a patient who has hypothyroidism or hypertension, is taking his or her medications, following his or her clinical plan and may

or may not be seeing a specialist. The patient is stable and does not need additional care coordination. In this case the box would not be checked.

- There may be patients who are only receiving referrals to a specialist and may not require additional coordination by the health care team and may not meet these criteria.

4. Total the score for each patient and list in the column provided for sum count and tier. This is simple conversion of SUM COUNT using the table shown below with one point for each condition group:

<u>SUM COUNT</u>	<u>TIER</u>
0	0
1 -3	1
4-6	2
7-9	3
10 or more	4

For example, a patient with five condition categories meeting all three of the attributes (chronic, severe and requiring a care team) would have a SUM COUNT of 5 and be placed in TIER 2.

Please note, the patient's score will only total 1 (one) for each condition group if all three criteria are met: the patient's condition is chronic, severe, and requires a care team. As noted above, each condition group may have more than one chronic disease diagnosis in the group.

### Condition Groups

Appendix A contains the Expanded Diagnosis Clusters (EDCs) that make up the condition groups for the tiering tool. The placement of an individual's condition should be intuitively apparent to experienced providers. When in doubt, the provider may use best clinical judgment to determine the appropriate grouping, with guidance from the EDCs. Any individual condition may only be placed in one condition group, even if it has effects across multiple systems.

### Coding for Claims Submission:

Once the Patient Tier Assignment Tool (PTAT) has been completed, the health home can request member enrollment to the Department through the Iowa Medicaid Portal Access (IMPA) application. Once the member is enrolled, the provider may start submitting monthly Patient Management Payments for the patient.

The billing process is based on existing claims systems. The health home will use the procedure codes and modified recommended by the Department as follows:

HCPCS Codes		
S0280	Health Home program care coordination service	
Modifiers		
Tier	Patient Complexity Level	
1	Low	U1
2	Basic	TF
3	Intermediate	U2
4	Complex	TG

#### Notes:

- Submit the Health Home PMPM claims for only one unit each month.
- Submit the Health Home PMPM claim using **any single date** of service for the month being claimed (e.g., 1/16/2012 – 1/16/2012). Do not claim the whole month date span. A PMPM claim will only be paid once per member, per month.
- Submit the Health Home PMPM claim using the NPI, Taxonomy and Zip code supplied on the Provider application for the Health Home entity on form 470-0254. Do NOT use the NPI, Taxonomy and Zip code used on claims for regular FFS or encounter claims.
- Include the ICD-9 codes on the Health Home PMPM claim that qualify the member for the appropriate tier.

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Patient ID \_\_\_\_\_

Date of Assessment: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

Health Home ID \_\_\_\_\_

Date Submitted through IMPA: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Month Day Year

**Entrance Criteria:**

Qualifying Condition:	Chronic Condition	At Risk of Chronic Condition
Mental Health Condition	<input type="checkbox"/>	<input type="checkbox"/>
Substance Use Disorder	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>
Heart Disease	<input type="checkbox"/>	<input type="checkbox"/>
Overweight (BMI over 25 or 85 percentile)	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>
Total		
Eligible (Yes/No) <input type="checkbox"/> Yes <input type="checkbox"/> No		

*\*Derive patient tier assignments using the table shown below:*

SUMCOUNT	TIER
1-3	1
4-6	2
7-9	3
10 or more	4

Condition Category:	Condition is Chronic	Condition is Severe	Condition Requires a Care Team	Score (Maximum score for each row is 1)	
Allergy, Asthma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Cardiovascular	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Dental	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Ear, Nose, Throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Endocrine	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Eye	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Female Reproductive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Gastrointestinal/Heptic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Genetic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Genito-urinary	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Hematologic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Infections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Malignancies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Mental Health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Psychosocial	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Musculoskeletal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Neurologic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Nutrition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Renal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Respiratory	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Rheumatologic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 0	<input type="checkbox"/> 1
<b>SUM COUNT*</b>					

**Expanded Diagnosis Clusters (EDCs), Adapted from The Johns Hopkins ACG System Reference Manual, Version 8.2 Page 1 of 3**

<p><b>Allergy</b>  ALL01 Allergic reactions  ALL03 Allergic rhinitis  ALL04 Asthma, w/o status asthmaticus  ALL05 Asthma, with status asthmaticus  ALL06 Disorders of the immune system</p>	<p><b>Cardiovascular</b>  CAR01 Cardiovascular signs and symptoms  CAR03 Ischemic heart disease (excluding acute myocardial infarction)  CAR04 Congenital heart disease  CAR05 Congestive heart failure  CAR06 Cardiac valve disorders  CAR07 Cardiomyopathy  CAR08 Heart murmur  CAR09 Cardiac arrhythmia  CAR10 Generalized atherosclerosis  CAR11 Disorders of lipid metabolism  CAR12 Acute myocardial infarction  CAR13 Cardiac arrest, shock  CAR14 Hypertension, w/o major complications  CAR15 Hypertension, with major complications  CAR16 Cardiovascular disorders, other</p>	<p><b>Dental</b>  DEN01 Disorders of mouth  DEN02 Disorders of teeth  DEN03 Gingivitis  DEN04 Stomatitis</p>	<p><b>Ear, Nose, Throat</b>  EAR01 Otitis media  EAR02 Tinnitus  EAR03 Temporomandibular joint disease  EAR04 Foreign body in ears, nose, or throat  EAR05 Deviated nasal septum  EAR06 Otitis externa  EAR07 Wax in ear  EAR08 Deafness, hearing loss  EAR09 Chronic pharyngitis and tonsillitis  EAR10 Epistaxis  EAR11 Acute upper respiratory tract infection  EAR12 ENT disorders, other</p>
<p><b>Endocrine</b>  END02 Osteoporosis  END03 Short stature  END04 Thyroid disease  END05 Other endocrine disorders  END06 Type 2 diabetes, w/o complication  END07 Type 2 diabetes, w/ complication  END08 Type 1 diabetes, w/o complication  END09 Type 1 diabetes, w/ complication</p>	<p><b>Eye</b>  EYE01 Ophthalmic signs and symptoms  EYE02 Blindness  EYE03 Retinal disorders (excluding diabetic retinopathy)  EYE04 Disorders of the eyelid and lacrimal duct  EYE05 Refractive errors  EYE06 Cataract, aphakia  EYE07 Conjunctivitis, keratitis  EYE08 Glaucoma  EYE09 Infections of eyelid  EYE10 Foreign body in eye  EYE11 Strabismus, amblyopia  EYE12 Traumatic injuries of eye  EYE13 Diabetic retinopathy  EYE14 Eye, other disorders</p>	<p><b>Female Reproductive</b>  FRE01 Pregnancy and delivery uncomplicated  FRE02 Female genital symptoms  FRE03 Endometriosis  FRE04 Pregnancy and delivery with complications  FRE05 Female infertility  FRE06 Abnormal pap smear  FRE07 Ovarian cyst  FRE08 Vaginitis, vulvitis, cervicitis  FRE09 Menstrual disorders  FRE10 Contraception  FRE11 Menopausal symptoms  FRE12 Utero-vaginal prolapse  FRE13 Female gynecologic conditions other.  NOTE: Because of the "chronic" definition of six months or more, a complicated pregnancy that meets the criteria of severe, chronic, and requires a care team could be counted - at least for the duration of the pregnancy.</p>	<p><b>Gastrointestinal/Hepatic</b>  GAS01 Gastrointestinal signs and symptoms  GAS02 Inflammatory bowel disease  GAS03 Constipation  GAS04 Acute hepatitis  GAS05 Chronic liver disease  GAS06 Peptic ulcer disease  GAS07 Gastroenteritis  GAS08 Gastroesophageal reflux  GAS09 Irritable bowel syndrome  GAS10 Diverticular disease of colon  GAS11 Acute pancreatitis  GAS12 Chronic pancreatitis  GAS13 Lactose intolerance  GAS14 Gastrointestinal/Hepatic disorders, other</p>

<p><b>Health Care Homes Payment Methodology Expanded Diagnosis Clusters (EDCs), Adapted from The Johns Hopkins ACG System Reference Manual, Version 8.2</b>  <b>Page 2 of 3 Genetic</b>  GTC01 Chromosomal anomalies  GTC02 Inherited metabolic disorders  NOTE: <i>Congenital Disorders are found in the genetic condition group. It's one of the smaller "condition buckets", containing those defined as "chromosomal anomalies" and "inherited metabolic disorders". So in a patient with Down's Syndrome example, related heart conditions or esophageal conditions such as congenital abnormalities of the heart or congenital abnormalities of esophagus would be counted in a separate condition category related to the body system these conditions affect, such as cardiology or gastrointestinal.</i></p>	<p><b>Genito-urinary</b>  GUR01 Vesicoureteral reflux  GUR02 Undescended testes  GUR03 Hypospadias, other penile anomalies  GUR04 Prostatic hypertrophy  GUR05 Stricture of urethra  GUR06 Urinary symptoms  GUR07 Other male genital disease  GUR08 Urinary tract infections  GUR09 Renal calculi  GUR10 Prostatitis  GUR11 Incontinence  GUR12 Genito-urinary disorders, other</p>	<p><b>Hematologic</b>  HEM01 Hemolytic anemia  HEM02 Iron deficiency, other deficiency anemias  HEM03 Thrombophlebitis  HEM04 Neonatal jaundice  HEM05 Aplastic anemia  HEM06 Deep vein thrombosis  HEM07 Hemophilia, coagulation disorder  HEM08 Hematologic disorders, other</p>	<p><b>Infections</b>  INF01 Tuberculosis infection  INF02 Fungal infections  INF03 Infectious mononucleosis  INF04 HIV, AIDS  INF05 Sexually transmitted diseases  INF06 Viral syndromes  INF07 Lyme disease  INF08 Septicemia  INF09 Infections, other</p>
<p><b>Malignancies</b>  MAL01 Malignant neoplasms of the skin  MAL02 Low impact malignant neoplasms  MAL03 High impact malignant neoplasms  MAL04 Malignant neoplasms, breast  MAL05 Malignant neoplasms, cervix, uterus  MAL06 Malignant neoplasms, ovary  MAL07 Malignant neoplasms, esophagus  MAL08 Malignant neoplasms, kidney  MAL09 Malignant neoplasms, liver and biliary tract  MAL10 Malignant neoplasms, lung  MAL11 Malignant neoplasms, lymphomas  MAL12 Malignant neoplasms, colorectal  MAL13 Malignant neoplasms, pancreas  MAL14 Malignant neoplasms, prostate  MAL15 Malignant neoplasms, stomach  MAL16 Acute leukemia  MAL18 Malignant neoplasms, bladder</p>	<p><b>Mental Health</b>  PSY01 Anxiety, neuroses  PSY04 Behavior problems  PSY05 Attention deficit disorder  PSY07 Schizophrenia and affective psychosis  PSY08 Personality disorders  PSY09 Depression  PSY10 Psychologic signs and symptoms</p>	<p><b>Musculoskeletal</b>  MUS01 Musculoskeletal signs and symptoms  MUS02 Acute sprains and strains  MUS03 Degenerative joint disease  MUS04 Fractures (excluding digits)  MUS05 Torticollis  MUS06 Kyphoscoliosis  MUS07 Congenital hip dislocation  MUS08 Fractures and dislocations/digits only  MUS09 Joint disorders, trauma related  MUS10 Fracture of neck of femur (hip)  MUS11 Congenital anomalies of limbs, hands, and feet  MUS12 Acquired foot deformities  MUS13 Cervical pain syndromes  MUS14 Low back pain  MUS15 Bursitis, synovitis, tenosynovitis  MUS16 Amputation status  MUS17 Musculoskeletal disorders, other</p>	<p><b>Neurologic</b>  NUR01 Neurologic signs and symptoms  NUR02 Headaches  NUR03 Peripheral neuropathy, neuritis  NUR04 Vertiginous syndromes  NUR05 Cerebrovascular disease  NUR06 Parkinson's disease  NUR07 Seizure disorder  NUR08 Multiple sclerosis  NUR09 Muscular dystrophy  NUR10 Sleep problems  NUR11 Dementia and delirium  NUR12 Quadriplegia and paraplegia  NUR15 Head injury  NUR16 Spinal cord injury/disorders  NUR17 Paralytic syndromes, other  NUR18 Cerebral palsy  NUR19 Developmental disorder  NUR20 Central nervous system infections  NUR21 Neurologic disorders, other</p>

<p><b>Nutrition</b>  NUT01 Failure to thrive  NUT02 Nutritional deficiencies  NUT03 Obesity  NUT04 Nutritional disorders, other</p>	<p><b>Psychosocial</b>  PSY02 Substance use  PSY03 Tobacco use  PSY06 Family and social problems  PSY11 Psychosocial disorders, other</p>	<p><b>Renal</b>  REN01 Chronic renal failure  REN02 Fluid/electrolyte disturbances  REN03 Acute renal failure  REN04 Nephritis, nephrosis  REN05 Renal disorders, other</p>	<p><b>Respiratory</b>  RES01 Respiratory signs and symptoms  RES02 Acute lower respiratory tract infection  RES03 Cystic fibrosis  RES04 Emphysema, chronic bronchitis, COPD  RES05 Cough  RES06 Sleep apnea  RES07 Sinusitis  RES08 Pulmonary embolism  RES09 Tracheostomy  RES10 Respiratory failure  RES11 Respiratory disorders, other</p>
<p><b>Rheumatologic</b>  RHU01 Autoimmune and connective tissue diseases  RHU02 Gout  RHU03 Arthropathy  RHU04 Raynaud's syndrome</p>	<p><b>Skin</b>  SKN01 Contusions and abrasions  SKN02 Dermatitis and eczema  SKN03 Keloid  SKN04 Acne  SKN05 Disorders of sebaceous glands  SKN06 Sebaceous cyst  SKN07 Viral warts and molluscum contagiosum  SKN08 Other inflammatory conditions of skin  SKN09 Exanthems</p>	<p><b>Skin, continued</b>  SKN10 Skin keratoses  SKN11 Dermatophytoses  SKN12 Psoriasis  SKN13 Disease of hair and hair follicles  SKN14 Pigmented nevus  SKN15 Scabies and pediculosis  SKN16 Diseases of nail  SKN17 Other skin disorders  SKN18 Benign neoplasm of skin and subcutaneous tissues  SKN19 Impetigo  SKN20 Dermatologic signs and symptoms</p>	<p><b>Toxic Effects and Adverse Events</b>  TOX01 Toxic effects of non medicinal agents  TOX02 Adverse effects of medicinal agents  TOX03 Adverse events from medical/surgical procedures  TOX04 Complications of mechanical devices</p>