

The Hidden Link Between Coding Accuracy and Financial Stability

Accurate Coding Is More Than Compliance—It's a Business Strategy!

Every diagnosis code affects more than claim submission. Accurate, informed coding supports reimbursement, quality reporting, compliance, and the financial health of your agency.

As ICD-10-CM updates, CMS guidance, and payer expectations continue to evolve, agencies that prioritize coding accuracy are better positioned to reduce risk and improve long-term performance.



Why It Matters

Accurate diagnosis coding helps your agency:

- ✓ Protect reimbursement by capturing the full clinical picture
- ✓ Reduce claim denials and audit risk
- ✓ Strengthen quality reporting and performance measures
- ✓ Support informed business decisions with reliable data
- ✓ Improve collaboration between clinicians and coders

When documentation and coding align, agencies can confidently demonstrate the complexity of the care they provide while supporting compliance and financial sustainability.



Four Ways Informed Coding Strengthens Your Agency



Align Coding & Documentation

Coder / clinician collaboration ensures documentation supports diagnosis selection and medical necessity.



Capture True Patient Complexity

Complete diagnosis coding ensures full, earned reimbursement and promotes revenue integrity.



Prevent Denials, ADRs & Audits

Following current coding, OASIS, PDGM and payer instruction promotes compliance and avoids scrutiny.



Support Better Business Decisions

Accurate and complete codes ensure data integrity for quality reporting, case-mix benchmarking, and analytics.

The message is clear: Informed coding is the backbone of sustainable growth in home health care. It's how agencies get paid fully and accurately, stay compliant, and tell the true story of the care they provide.

Equip Your Team with the Tool Informed Coders Use

The Home Health Coding Center gives your team fast access to trusted coding guidance, OASIS resources, and expert insights to improve accuracy, strengthen compliance, and protect reimbursement. Request a personalized demo today at decisionhealth.com/getstartedhhcc.com or call 800-650-6787 ext. 2715.

Is Your Agency Prepared?

Ask yourself:

1. Are we capturing all patient diagnoses?
2. Does our documentation support coding specificity?
3. Are our coders and clinicians working together effectively?
4. Do our coding and clinical resources provide fast, reliable answers?
5. Are our teams equipped with the most up-to-date guidance?

If you answered “no” or “I’m not sure” to any of these questions, it’s time to reevaluate your processes.