



Supporting conditions with M.E.A.T.

M.E.A.T. is an acronym that can help define terms that support a diagnosis in a medical record. It is recommended that each diagnosis is documented in the assessment and care plan within the medical record. Using this method can show the clinical relevance of a condition and medical necessity for treatment.

Additional supporting documentation may include:

- Review of problem list with indication of status (chronic, active, resolved, etc.) for each condition and date reviewed
- Conditions being treated (diganosis, status and treatment plan)
- Conditions for which medication is being prescribed or refilled
- Positive or negative findings from diagnostic tests or physical exam
- Chronic conditions, status conditions (organ transplant, ostomy, amputation, limb prosthesis, etc.) or historical conditions and how they impact care or influence treatment decisions



Monitor (or)

- Signs and symptoms
- Disease progression and/or status

Evaluate (or)

- Response to treatment(s)
- Test results

Assess/Address (or)

- Counsel and/or discussion
- Records review
- Refer to specialist

Treat

- Stop or start medications
- Diagnostic and/or therapeutic plan
- Patient education and/or follow-up schedule

The following references were used in the creation of this document at time of publication:

- Optum360. *ICD-10-CM: Professional for Physicians 2024*. Salt Lake City, UT: Optum360; 2023.
- American Medical Association. *Current Procedural Terminology Professional 2024*. Chicago, IL: AMA; 2022.

How can we help you?

Our goal is to help health care professionals facilitate and support accurate, complete and specific documentation and coding, with an emphasis on early detection and ongoing assessment of chronic conditions. Through targeted outreach and education, we help our clients and their providers:

- Deliver a more comprehensive evaluation for their patients
- Identify patients who may be at risk for chronic conditions
- Improve patient care to enhance longevity and quality of life
- Comply with the Centers for Medicare & Medicaid Services (CMS) risk adjustment requirements

Contact your Optum representative to find out how we can help you improve outcomes for your patients.



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For the Affordable Care Act (ACA): The Department of Health & Human Services Hierarchical Condition Category (HHS-HCC) model applies to the health exchange risk adjustment program under the Affordable Care Act. This model differs significantly from the CMS-HCC model, which applies to the Medicare Advantage risk adjustment program. For more information, please visit: cms.gov/marketplace/health-plans-issuers/premium-stabilization-programs.

For Medicaid Managed Care: Risk adjustment standards, if any are applicable, are established by each state Medicaid agency and such standards often vary from state to state. For more information, please visit: medicaid.gov/medicaid/managed-care/index.html.

This tool is to be used for easy reference; however, the current ICD-10-CM code classification and the Official Guidelines for Coding and Reporting are the authoritative references for accurate and complete coding. The information presented herein is for general informational purposes only. Neither Optum nor its affiliates warrant or represent that the information contained herein is complete, accurate or free from defects. Specific documentation is reflective of the "thought process" of the provider when treating patients. All conditions affecting the care, treatment or management of the patient should be documented with their status and treatment plan and coded to the highest level of specificity. Enhanced precision and accuracy in the codes selected is the ultimate goal. Lastly, on March 31, 2023, the Centers for Medicare & Medicaid Services (CMS) announced that 2023 dates of service for the 2024 payment year model are based on the Centers for Medicare & Medicaid Services Announcement. [Announcement of Calendar Year \(CY\) 2024 Medicare Advantage \(MA\) Capitation Rates and Part C and Part D Payment Policies \(cms.gov\)](https://www.cms.gov/announcements/2023/03/31/2023-03-31-announcement-calendar-year-cy-2024-medicare-advantage-ma-capitation-rates-and-part-c-and-part-d-payment-policies).

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