

To: AmeriHealth Caritas DC Providers

Date: July 9, 2025

Subject: Risk Adjustment Strategies

Dear Provider:

Risk adjustment programs promote fairness, accuracy, and sustainability within the health care system, helping to ensure that Medicaid plans and providers receive the right level of funding to support the people they serve.

However, risk adjustment only works when we all do our part, and it begins with quality care. Here's how you, as AmeriHealth Caritas District of Columbia (DC) providers, can help:

- 1. Thorough Documentation. Document all diagnoses, including chronic conditions, comorbidities, and other risk factors, in the patient's medical record at the point of care. Capturing every diagnosis and health condition matters.
- **2.** Accurate Coding. Claims should accurately reflect the care provided and the diagnoses documented. Submit the correct codes with appropriate supporting documentation.
- **3. Annual Wellness Visits.** Annual wellness visits are a key opportunity for providers to gather comprehensive health information and update the patient's medical record, capturing all relevant conditions. Remind patients to schedule their annual wellness visits and be sure to ask patients about their medical history and any underlying conditions.
- 4. Prospective Review. Review patient data before appointments to help identify potential conditions.
- 5. Post-Appointment Review. Check coding accuracy after appointments to ensure claims correctly reflect the care provided and all diagnoses are documented.
- 6. Education and Training. Conduct regular training for all care team members on risk adjustment coding guidelines and best practices.

Risk adjustment helps ensure Medicaid's financial stability and protects access to equitable, high-quality care. If you have questions about this communication, please contact your Provider Account Executive or call Provider Services at 202-408-2237.

Sincerely, AmeriHealth Caritas DC