



ICD-10

Small Practice Readiness



Presentation to: Providers, Clinics, Trading Partners & Billing Firms

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Mission

We will provide Georgians with access to affordable, quality health care through effective planning, purchasing and oversight.

We are dedicated to A Healthy Georgia.

Topics for Discussion

- **ICD-10 Overview**
 - About ICD-10
 - ICD-9 vs. ICD-10
- **Readiness**
 - Assessment
 - Implementation
 - Staff Roles/Responsibilities
 - Training
 - Transition
- **Benefits & Rewards**
- **Helpful Resources**
- **Testing with DCH/Georgia Medicaid**
- **Q & A**





ICD-10 Overview

A Few Facts About ICD-10



- **World Health Organization** – developed ICD-10 in 1994, later adopted by HHS and CDC, provision of HIPAA regulations
- **Moving from 9 to 10** -- US is last industrialized nation to adopt ICD-10
- **ICD-9 is outdated** – limited capacity, capability, can't serve future needs
- **HIPAA-covered entities** -- Health care providers, payers, clearinghouses, billing services and others must transition to ICD-10
- **ICD-10 pros and cons** -- discussed widely, but is happening
- **ICD-10-CM and ICD-10-PCS code sets**
 - Replaces ICD-9-CM (Volumes 1, 2, and 3)
 - Total of 155,000 codes BUT only some used by providers
- **Mandatory compliance date October 1, 2014**
 - Replaces ICD-9-CM (Volumes 1, 2, and 3)
- **ICD-10 has no direct impact on Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS)**

About ICD-10

Making the
transition to

ICD-10 is

NOT

optional

Why is the transition necessary?

- ICD-9 code sets are outdated, limited and not expandable
- ICD-9 cannot accommodate current needs nor future advances in medical technology and knowledge
- ICD-10 code sets use current medical terminology and will allow for advances in medical technology and knowledge
- ICD-10 allows for greater detail in diagnoses and treatments



Reminders about ICD-10

- For services rendered on or after October 1, 2014
 - All claims must use ICD-10 codes
 - All claims using ICD-9 codes will NOT be accepted
- For services rendered before October 1, 2014
 - All claims must use ICD-9 codes
- **Systems must accommodate BOTH ICD-9 and ICD-10 codes**
 - Effective with the October 1, 2014 compliance date
- **Significant Code Increase**
 - *ICD-10-CM codes are increasing from 13,000 to 68,000*
 - *ICD-10-PCS codes are increasing from 3,000 to 87,000*
 - *ICD-10 has 155,000+ codes—more than nine times the 17,000 codes in ICD-9*



ICD-10 and Patient Care

- **Transitioning to ICD-10**
 - Is more than an administrative burden placed on your medical claims reimbursements
 - **Should not affect the way you provide patient care**
- **Specificity and Documentation are vital in ICD-10**
 - Look at the codes used most often in your practice
 - Most of the information needed for documentation is likely shared by the patient during your visit with them
 - Improving how you document your clinical services will help you become accustomed to the specific, detailed clinical documentation needed to assign ICD-10 codes
 - Work with your coding staff to determine if the documentation would be detailed and specific enough to select the best ICD-10 codes
 - Identify and obtain the training that you need
 - **Good documentation will help to reduce the need to follow-up on submitted claims – saving you time and money**





What are the key differences between ICD-9 and ICD-10?

Comparison of ICD-9 and ICD-10

ICD-9-CM diagnosis codes	ICD-10-CM diagnosis codes
3-7 numeric characters in length	3-7 alpha-numeric characters in length
Approximately 13,000 codes	Approximately 68,000 available codes
Based on outdated technology	Reflects current usage of medical terminology and devices
Lacks detail	Very specific
Lacks laterality	Allows laterality
Generic terms for body parts	Detailed descriptions for body parts
Lacks description of method and approach for procedures	Provides detailed descriptions of method and approach for procedures
Limits DRG assignment	Allows expansion of DRG definitions to recognize new technologies and devices
Lacks precision to adequately define procedures	Precisely defines procedures with detail regarding body part, approach, any device used, and qualifying information

ICD-9 vs. ICD-10 Code Examples

ICD-9-CM-Diagnosis Codes

- 725 Polymyalgia Rheumatica →
- 714.0 Rheumatoid Arthritis →

ICD-10-CM-Diagnosis Codes

- M35.3A Polymyalgia Rheumatica
- M05.40 Rheumatoid myopathy with RA unspecified site
M05.41 [1,2,9] Rheumatoid myopathy with RA, shoulder
M05.42 [1,2,9] Rheumatoid myopathy with RA, elbow
M05.43 [1,2,9] Rheumatoid myopathy with RA, wrist
M05.44 [1,2,9] Rheumatoid myopathy with RA, hand
M05.45 [1,2,9] Rheumatoid myopathy with RA, hip.....add'l codes as well



Comparison of ICD-9 and ICD-10

ICD-9-CM PCS codes	ICD-10-CM PCS codes
3-4 characters in length	7 alpha-numeric characters in length
Approximately 3,000 codes	Approximately 87,000 available codes
Based on outdated technology	Reflects current usage of medical terminology and devices
Limited space for adding new codes	Flexible for adding new codes
Lacks detail	Very specific
Lacks laterality	Has laterality
Generic terms for body parts	Detailed descriptions for body parts
Lacks description of methodology and approach for procedures	Provide detailed descriptions of methodology and approach for procedures
Lacks precision to adequately define procedures	Precisely defines procedures with detail regarding body part, approach, any device used, and qualifying information

ICD-9 vs. ICD-10 Code Examples

ICD-9-CM-PCS Codes

- 3–4 digits
- All digits are numeric; and
- Decimal is after second digit.

Examples

- 43.5 – Partial gastrectomy with anastomosis to esophagus; and
- 44.42 – Suture of duodenal ulcer site

ICD-10-PCS-Codes

- 7 digits
- Each digit is either alpha or numeric (alpha digits are not case sensitive and letters O and I are not used to avoid confusion with numbers 0 and 1); and
- No decimal

Examples

- 0FB03ZX – Excision of liver, percutaneous approach, diagnostic; and
- 0DQ10ZZ – Repair upper esophagus, open approach



Have you completed your
office assessment?

Your Office Assessment is Critical



Conducting a thorough assessment of your office is crucial.

Think about your business.
Look closely.

Is your office assessment complete?

Have You...

- Conducted an assessment of the areas that will be impacted?
 - Technology
 - Operations
 - Staff
 - Administrative
- Collected information on current use of ICD-9 and a list of staff members who need ICD-10 resources and training?
- Evaluated the effect of ICD-10 on other planned or on-going projects (e.g., Version 5010 transition, EHR adoption and Meaningful Use)?
- Upgraded your IT Systems?
 - EHR, Billing, Practice Management Systems and more impacted
 - Systems must accommodate ICD-9 and ICD-10 codes



Provider Assessment Checklist



Where are you in the assessment phase?

- Have you assigned an ICD-10 Project Lead in your practice? ICD-10 Team?
- Have you developed your ICD-9 list...and reviewed it to help you assess how and where you need to make changes to be ready for ICD-10?
- Have you assessed ICD-10's impact on your entire practice?
- Have you analyzed your office's usage of all relevant billing codes? Are you working with specific codes vs. all 155,000+?
- Is there an internal and external communications process in place? (Staff + Trading Partners)
- Have you factored in all hard and soft costs, plus timelines, needed for implementation?
- Is your staff, especially your in-house or external billers and coders, trained in ICD-10 and its specificity?
- When will the upgrades to your processes and systems be completed?
- When will you be ready for testing with your trading partners, DCH and other payers to ensure reimbursement success?



Have you created your
implementation plan?

What about your implementation plan?



Have you...

- **Established Project Management Structure/Governance?**
 - Assigned ICD-10 Project Lead and Team
 - Defined key roles, responsibilities
 - Developed the ICD-10 Project Plan (Business Processes, Systems, Budgets, Training, Testing, Timelines)
 - Updated internal policies impacted by ICD-10
- **Created a Communications Plan?**
 - Identified external partners, payers, messages and outreach tools
 - Identified internal messages and outreach tools for staff
- **Established a Risk Management Plan?**
 - Identified and categorized risks of potential impact to implementation and business
 - Developed timely mitigation strategies

What about your implementation plan?



Have you...

- **Developed and begun implementing the Communications Plan?**
 - Informed internal staff using ongoing communications and reminders
 - Executed and maintained external communications with trading partners, payers
 - Communicated accomplishments and setbacks related to ICD-10
- **Developed and begun implementing the Training Plan?**
 - Live classroom or one-on-one; online, on-demand
 - Toolkits and other electronic resources from CMS, medical trade associations and vendors
- **Met with Staff to further define ICD-10 impact and responsibilities?**
 - Defined ICD-10 impact on your day-to-day roles, responsibilities
 - Defined ICD-10 impact on current processing systems
- **Identified system migration, training and testing strategies?**
 - Implemented business and technology modifications
 - Prepared and begun your training
 - Mapped out your internal and external testing plans

Provider Implementation Checklist



Where are you in the implementation phase?

- Have you become ICD-10 savvy...do you know the structure, organization, and unique features of ICD-10-CM (all provider types) and ICD-10-PCS (inpatient hospital claims)?
- Does your implementation strategy include an assessment of the impact on your organization, a detailed timeline, budget, resources, task owners?
- Have you connected with both existing and new vendors (including clearinghouses) to ensure they are meeting the functional needs of your ICD-10 implementation? (Analyzing interfaces, dependencies, etc.)
- Do you understand how your system software and business processes will be impacted by ICD-10 (and 5010, if not already implemented)?
- Are your systems ready, or almost ready for testing?
- Have you used assessment tools to identify areas of strength/weakness in medical terminology and medical record documentation needed in your organization?
- Have you used a variety of code mapping/crosswalking tools to help you identify the correct ICD-10 codes?
- Have you mapped out what still needs to be completed prior to ICD-10 testing with Georgia Medicaid and other payers?



Sources: <http://www.cms.gov/Medicare/Coding/ICD10/downloads/ICD10SmallandMediumPractices508.pdf>

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Is your staff ready?

Is everyone clear on their responsibilities?

- **Reception/Front Desk Personnel**
 - Implement new health plan/payer or privacy policies, new processes, new forms for patients
- **Clinical Area/Nurses' Station Personnel**
 - Implement new health plan/payer policies, new forms, new superbills
 - Increase coding specificity knowledge and input from physicians for documentation
- **Lab, Imaging Center Personnel**
 - Process new superbills
 - Increase coding specificity to complete orders correctly
- **Coding/Billing Office Personnel**
 - Acquire training in ICD-10 coding
 - Increase knowledge of anatomy and medical terminology as required
- **Practice Manager's Office Personnel**
 - Review and update office policies and procedures tied to diagnosis or procedure codes
- **Physicians – Providers**
 - Recognize the importance of your role and that ICD-10 is best taken in small doses
 - Work with your Practice Manager





What about *your* training?

Training Checklist



- **Physician - Provider Training**

- Assess your documentation skills
- Develop training timeline
- Determine and acquire ideal ICD-10 learning tools for yourself

- **Coder Training**

- Physician practice coders should learn ICD-10 diagnosis coding only
- Hospital coders should learn both ICD-10-CM (diagnosis) and ICD-10 (inpatient procedure) coding

- **Staff Training**

- Consider cost and resources
- Define who needs training and why
- Identify which learning and training environments are available, best for your staff



Have you thought about your
actual transition to ICD-10?

Are you ready to transition?

- **Have you...**
 - Determined the anticipated effect of coding accuracy during the transition and how it will take for coding staff to achieve a level of proficiency in ICD-10 comparable to that with ICD-9
 - Identified other potential problems or challenges that could occur during the transition
 - Implemented strategies aimed at reducing the potential negative effects
 - Identified major areas of change between ICD-9 and ICD-10 that impact data comparison and reporting for both internally and externally reported data
 - Set up a system to monitor your reimbursements and what action to take if your cash flows are delayed
 - Determined whether ICD-10 support is included in installed software or whether a future update is necessary to support ICD-10 ...are any *costs involved with the support or updates*
 - Developed a defined denials management process to quickly identify ICD-10-related denials quickly and appeal them in a comprehensive, timely and fact-driven way
 - Considered hiring a clearinghouse, billing service, clinical documentation specialist or other outside resource to help you with your transition



ICD-10 Transition Tips

- **Important Reminders**

- While clearinghouses can help, they cannot provide the same level of support for the ICD-10 transition as they did for the Version 5010 upgrade. (5010 was IT-driven only; ICD-10 is both business process and IT-driven)
- ICD-10 codes describe a medical diagnosis or procedure and must be selected by the provider and not the clearinghouse, coder or biller.
- Expect audits to focus on clinical documentation to determine if it supports the specificity of ICD-10 codes.
- Keep in mind that covered entities are not to use the ICD-10 code in production (outside of a testing environment) prior to October 1, 2014.

- **CMS Recommends**

- Regular documentation audits after ICD-10 implementation to make sure your clinical documentation supports your ICD-10 coding.





Will you enjoy the benefits and
rewards of ICD-10?

Benefits of ICD-10



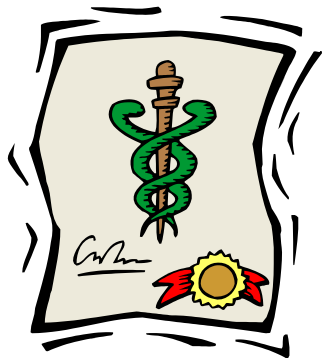
- ICD-10 will play a critical role in aligning the definitions of services and care rendered
- ICD-10 will help stop Fraud and Abuse
 - More effective detection and investigation of potential fraud or abuse and proof of intentional fraud.
 - Modify edits to support correct coding with greater sensitivity and specificity to help prevent fraud and abuse
- ICD-10 is easier and more flexible for future updates
- ICD-10 enhances coding accuracy and specificity to classify anatomic site, etiology, and severity
- ICD-10 provides better analyses for disease patterns and response to public health outbreaks

Sources: <http://www.cms.gov/Medicare/Coding/ICD10/downloads/ICD10Payers508.pdf>



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Rewards of Compliance with ICD-10



- Continued cash flows with claims processed and paid
- Financial statement stability, credit worthiness
- Increased efficiencies in administrative, billing and reimbursement processes
- Reduced coding errors due to increased specificity
- Improvement in patient care management
- Increased health care IT system ROI and value, increased productivity
- Increased capability to prevent and detect health care fraud and abuse

Sources: <http://www.cms.gov/Medicare/Coding/ICD10/downloads/ICD10Payers508.pdf>



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Resources

ICD-10 Training Resources



American Academy
of Pediatrics



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ICD-10 Resources

- Centers for Medicare & Medicaid Services (CMS)

CMS Overview

- <http://www.cms.gov/Research-Statistics-Data-and-Systems/Computer-Data-and-Systems/ESMD/index.html?redirect=/esmd>
- CMS ICD-10 Implementation Planning Guides/Checklist
<http://www.cms.gov/Medicare/Coding/ICD10/Downloads/ICD10PlanningChecklist.pdf>
- HHS, CMS ICD-10 Final Rule <http://edocket.access.gpo.gov/2009/pdf/E9-743.pdf>
- CMS, HHS Complete list of code sets for ICD-10-CM and ICD-10-PCS; Final Rule and Official ICD-10-CM Guidelines www.cms.hhs.gov/ICD10

- World Health Organization (WHO) ICD-10 Page

- <http://www.who.int/en/>



More ICD-10 Resources

- DCH Resources
 - DCH Website for ICD-10 Webinars/Downloads
<http://dch.georgia.gov/it-events>
 - DCH ICD-10 FAQs & Fact Sheet
<http://dch.georgia.gov/icd-10>
 - DCH Provider Resources
<http://dch.georgia.gov/providers>
- HP Enterprise Services Statewide Workshops
 - Check Georgia <http://mmis.georgia.gov> for future ICD-10 workshops

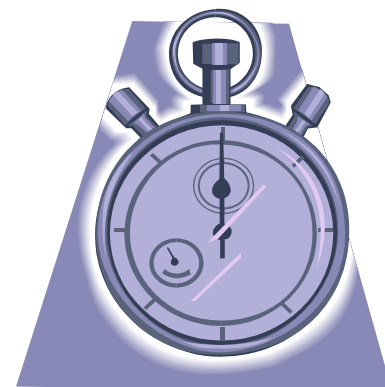


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ICD-10 Transition & Testing Georgia Medicaid -- DCH

DCH & ICD-10 Testing

- **DCH is on track for October 1, 2014 compliance**
 - Areas of Impact within DCH/Georgia Medicaid
 - Coverage and payment determinations, policies, plan structure
 - Statistical reporting, actuarial projections, fraud and abuse monitoring, quality measurements
 - Georgia Medicaid Management Information System (GAMMIS) remediation
 - Testing with Georgia Medicaid
 - Trading Partners and Billing Services
 - 4th Quarter 2013
 - Providers
 - 1st Quarter 2014
 - To become a test site, e-mail your interest to icd10project@dch.ga.gov





Register Now for Upcoming ICD-10 Webinars

- ~~July 23, 2013 - Small Clinic / Hospital Readiness~~ -- *Being Rescheduled*
- August 15, 2013 - ICD-10 Clinical Close-up
- September 10, 2013 - Medicaid Policy Update & ICD-10
- September 17, 2013 - Testing Readiness with DCH (for Trading Partners)
- September 25, 2013 - Testing Readiness with DCH (for Providers)
- October 15, 2013 - Pre-Testing Readiness & Trouble-Shooting
- October 29, 2013 - Open Discussion

To register for the above webinars: Visit <http://dch.georgia.gov/it-events>

Each webinar is scheduled for up to one hour, 10:30 – 11:30 a.m. ET.
Unless otherwise noted, all webinars are targeted to Providers and Trading Partners.
Please be advised that webinar dates and times are subject to change.

Net Takeaway from Today's Session

- Key facts about ICD-10
 - ICD-9 vs. ICD-10
- Readiness
 - Assessment Checklist
 - Implementation Checklist
 - Staff Roles/Responsibilities
 - Training
 - Transition
- Benefits & Rewards
- Helpful Resources
- Testing with DCH/Georgia Medicaid

Thank You!

- Join us as an ICD-10 **Beta Test Site**, e-mail us at:
 - icd10project@dch.ga.gov
- Join our mailing list at:
 - AskDCH@dch.ga.gov for ICD-10 events and updates
- We welcome your questions and comments at:
 - icd10project@dch.ga.gov

Questions & Comments

What about...?



Use the WebEx Q&A Feature

- Submit your questions now
- Questions submitted will be answered live or via e-mail within 2 - 4 business days of this event
- Or you may e-mail us at:
icd10project@dch.ga.gov
- This presentation will be posted within 2 business days at
<http://dch.georgia.gov/it-events>