

ICD-10: Preparing Your Orthopedic Practice Now

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10:15-11:30 Session

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What do you call the largest
healthcare compliance driven
convergence and coordination of
People, Information, Technology,
and Education in 20+ years?

ICD-10

Have you stopped to consider how your practice is going to meet the challenge?

And even if your practice is successful,
what about all those
partners/vendors/hospitals... will they be
ready?

And what will this do to payer
reimbursements and claim submissions?

There seem to be a lot more questions than answers today; however with some strategy and early focus your practice will make the transition and be ready, but...

You must start NOW!

Let's Get Started...

- What You Need to Know About ICD-10
 - Compliance Deadlines
 - Relationship to HIPAA 5010
 - Code Changes
- Understanding the Effects on Your Practice
 - Front/Back Office Processes
 - Personnel
 - Documentation
 - Workflow

- Technology and ICD-10
 - 5010 as the Gateway
 - EMR and PMS Transitions
 - Code Mapping Applications

- Preparing Your Practice – Starting Now!
 - Identify the Areas of Impact
 - Getting Started on a Project Plan
 - Collecting Information from Vendors/Partners
 - Plan for Education
 - Outline Transition of People, Documents, Systems
 - Identifying the Costs and Budget Impacts
 - Validate the Results

What You Need to Know About ICD-10

Compliance Deadlines

The HIPAA 5010 & ICD-10 industry changes for physician services and EDI transactions by compliance date.

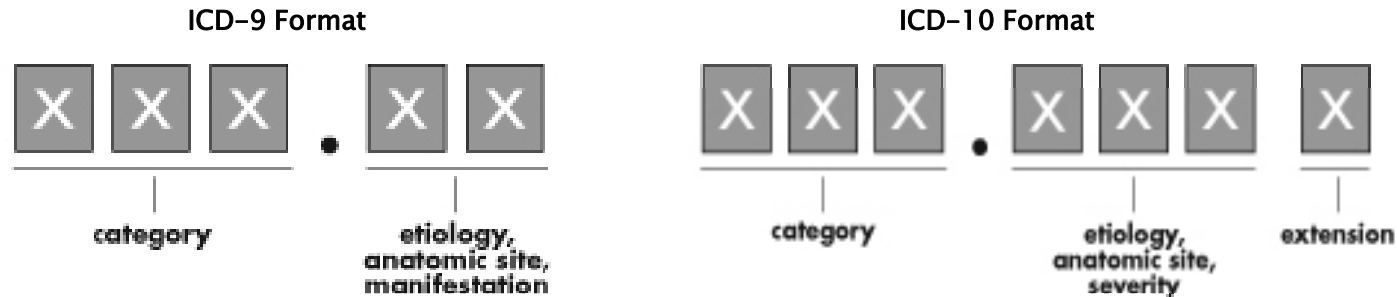
Rule	Published Date	Compliance Date
4010/ANSI X12		<i>August 17, 2000</i>
4010A1 (amendment)*	<i>May, 2002</i>	<i>October, 2003</i>
5010	<i>January 16, 2009</i>	<i>January 1, 2012</i>
ICD-10	<i>August 15, 2008</i>	<i>October 1, 2013</i>

ICD-10: What You Need to Know

- ICD-10 is a diagnostic coding system implemented by the World Health Organization (WHO) in 1993 to replace ICD-9. ICD-10 is in almost every country in the world, except the United States.
- ICD-10 will be the most radical change to the healthcare industry in 20 yrs.
- Practices, billing services and vendors will have to maintain both the ICD-9 & ICD-10 code sets for some time in the future beyond the 10/2013 deadline.

ICD-9	ICD-10 CM	ICD-10 PCS (IP)
13,600 codes	69,000 codes	71,000 codes
Numeric E&V	Alpha/Numeric – Always starts w/ Letter No V Codes	Alpha/Numeric – Always starts w/ Letter
5 digits long Ex: 789.00	7 digits long Ex: M84.47- Ankle fracture	7 digits

What ICD-10 Looks Like



ICD-10-CM codes have the potential to reveal more about quality of care, so that data can be used in a more meaningful way to better understand complications, better design clinically robust algorithms, and better track the outcomes of care.

ICD-10-CM incorporates greater specificity and clinical detail to provide information for clinical decision making and outcomes research.

This means greater need for physician/practitioner involvement with coding.

Understand the Effects on Your Practice

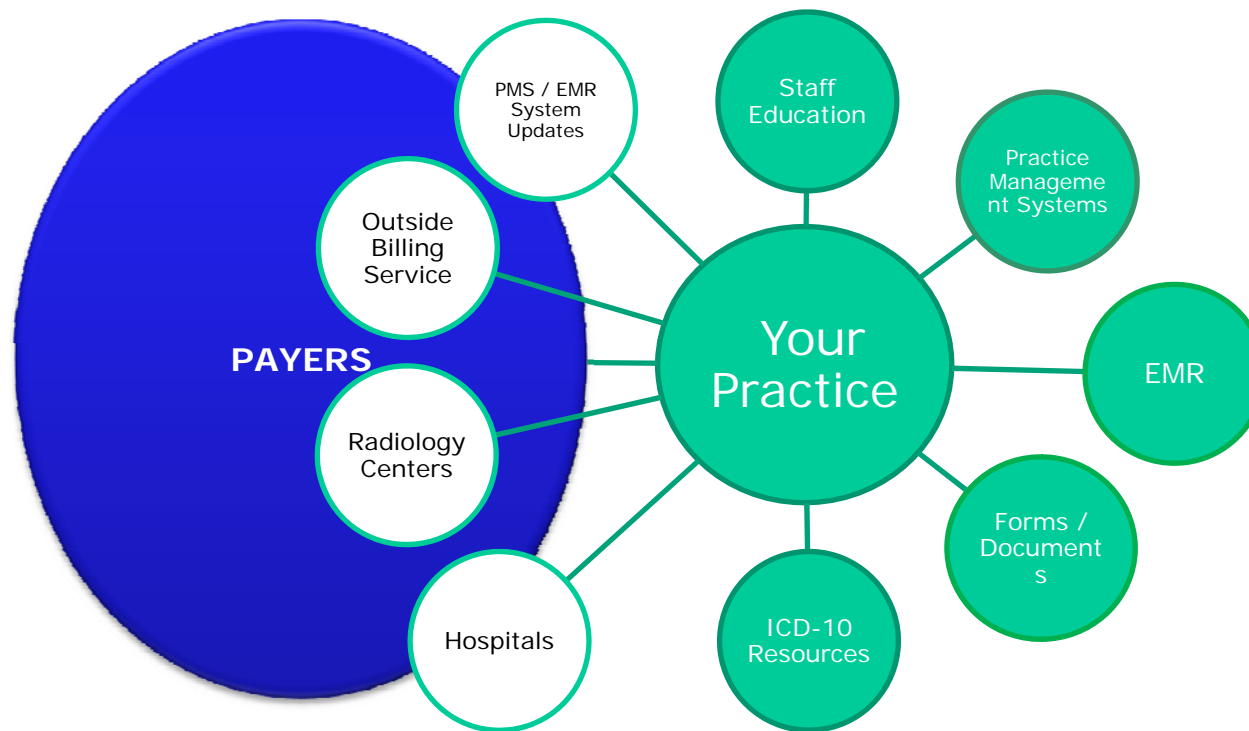
Across Roles:

- Physicians / Nurses
 - Greater detail requires more work at the provider/EMR level
 - ICD-10 coding education
 - ICD-10 reference materials
 - Payer code combination changes with ICD-10
- Billing Office /Coding Specialists
 - Greater detail requires more research/understanding
 - ICD-10 coding education & reference materials
 - Payer code combination changes with ICD-10
- Front Desk / Management
 - Greater detail required on Encounter / Superbill
 - ICD-10 code understanding, reference materials
 - Changes to all printed materials

Across Functions:

- Charting Changes
 - EMR vs. Paper updates to accommodate ICD-10
- Workflow Changes
 - How will level of specificity be captured and by whom
- Systems Change
 - Yours & Theirs (hospital, billing service, EMR)
- Documentation
 - Yours & Theirs (hospital, billing service, partners)
- Vendor and Payer Contracts
 - Changes will need to be identified and understood early

ICD-10 Impacts Everything



WHITE = Entities You Cannot Control
BLUE = White + Financial Implications
GREEN = Areas You Can Control - Your People, Tools, Materials

Technology and ICD-10

Survey Your Technology Vendors Now...

It's imperative that you understand their plans, so you can make your transitions plans.

Example:

What are they doing for ICD-10?

When are they doing it?

Will you have access to both ICD-9 & -10 in your PMS & EMR?

Will GEMs be used to convert current code databases?

Prepare for the Transition

Prepare to:

- Identify all internal systems that utilize ICD-10
- Understand the changes that are being made to each
 - Database changes to one application/system CAN effect all other interfaced systems
- Determine the impacts on staff & process & other systems
- Create a transition timeline by system
- Identify any new technologies you require over next 2 years.
 - EMR*
 - Code Mapping
 - Project Management Tools

***If you are not currently using and EMR, ICD-10 is the time to seriously consider this addition to your practice.**

Technology vendors are going to most likely utilize or offer you some variation of GEMs. The GEMs act as a translation dictionary to bridge the language gap between ICD-9-CM and ICD-10-CM/PCS.

This General Equivalency Mappings (GEMs) database was created by CMS and CDC to help users understand, analyze, and manage the translation of one code set to the other. They also help users create their own applied mappings as needed.

GET FAMILIAR with this database, it has both the potential to help tremendously with this transition to ICD-10 and cause confusion. ICD-10 is not as simple as one-to-one mapping in many cases and level of detail required will create the need to evaluate many codes that come from the mapping.

GEMs Conversion Sample

ICD-9-CM		ICD-10-CM	
820.8	Fracture of unspecified part of neck of femur, closed	links to ----> (forward)	S72.009A Fracture of unspecified part of neck of right femur, initial encounter for closed fracture
ICD-9-CM		ICD-10-CM	
820.8	Fracture of unspecified part of neck of femur, closed	links from <---- (backward)	S72.001A or S72.002A or S72.009A Fracture of unspecified part of neck of right femur, initial encounter for closed fracture Fracture of unspecified part of neck of left femur, initial encounter for closed fracture Fracture of unspecified part of neck of femur, initial encounter for closed fracture

Preparing Your Practice for ICD-10 – Starting Now!

You are about to face a lot of changes...

Software/Application Updates

New Technologies

Training /Education

Workflow / Processes

Documentation / Forms

Staffing Challenges

29 months until compliance and although its tempting to put this out past the 5010 deadline – **DO NOT WAIT!**

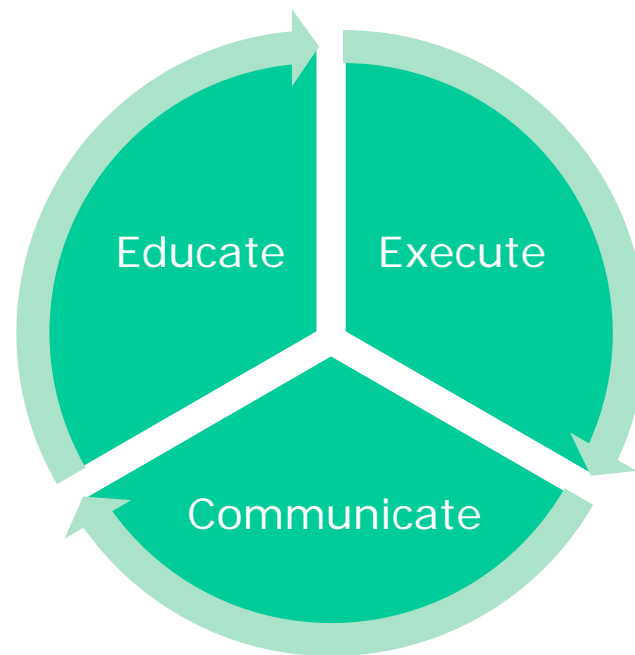
A Simple Way to Plan...

The Simple Way to Build a Path to ICD-10

2011 – Communicate (Start Now)

2012 – Communicate & Educate

2013 – Educate & Execute



2011- Communicate & Plan

Objective:

- Identify “What” has to change in your practice
- Identify “Who” has to understand those changes
- Find out “When” these things are changing
- Create a task list to address the “What & Who”
- Make a plan based on “When”

Step 1:

- ICD-10 Inventory
 - Document all applications utilizing ICD-9 coding
 - Document all internal forms that contain ICD-9 codes
 - Document all staff who need ICD-10 education
 - Prioritize the staff by level of education
 - Determine what ICD-10 reference methods the practice has or will have for ICD-10

Step 2:

- Outreach
 - Communicate with all application vendors identified in the inventory
 - Survey their plans for ICD-10 transition
 - Communicate with Hospitals and Partners on their plans
 - Communicate with contracted Payers on their plans
 - Identify an ICD-10 education method for the staff
 - Identify if additional application training will be required
 - Communicate with your staff about the requirements and expectations regarding education.
 - Who pays for the training?
 - When it must take place?
 - Communicate with all external forms sources to identify their plans to transition to ICD-10
 - Determine what ICD-10 reference methods the practice has or will have for ICD-10

Step 3:

- Initial Plan
 - Identify an individual or team that will become the ICD-10 Transition Expert for your practice. This individual will be trained first, assist with establishing the practice needs and working through change management issues.
 - Educate this team on ICD-10 ASAP, as they will facilitate the education of others in the practice later on.
 - Document all timelines and changes as reported by those entities contacted.
 - Establish the desired timeframe of transition for your practice.
 - Review costs and budget impacts associated to:
 - Technology
 - Education
 - Resources

2012- Educate

Objective:

Educate and empower the staff to feel confident about ICD-10

- Based on:
 - Role
 - Timeframe of transition

Step 1:

- Establish The ICD-10 Education Vendor/s
 - Identify what education vendors will provide what your practice needs.
 - Review content available
 - Ensure access longevity to materials (you need the team to be able to refresh their education as necessary)
 - Review formats available (online vs. classroom)

Step 2:

- Identify Application / Software Training Needs
- Implement NEW technology systems as early as possible

Step 3:

- Timeline ALL Training /Education Required by Staff Member**
 - Document a training schedule, communicate that schedule

***Do not forget staff not directly linked to coding, this is an opportunity to transition everyone in your practice*

Step 4:

- Begin transitioning reference materials and forms as required

Step 5:

- Stay connected with ICD-10 resources and transition plans across the industry.

- General Information / Education / Resource Materials
 - CMS - www.cms.org
 - HHS – www.hhs.org
 - AHIMA – www.ahima.org
 - ICD-10 Made Easy – www.icd10madeeasy.com (training)
 - Workgroup for EDI – www.wedi.org
 - WHO www.who.int
 - <http://icd-10today.com/training.html> (training)
 - Check all your local colleges & universities – they will have ICD-10 programs
- Mapping of ICD-9 to ICD-10
 - Practice Management System & EMR Vendors
 - AAPC
 - Navicure
 - Ingenix

**MPV does not endorse these companies or their services, this is merely a reference to available resources in the industry.*

2013- Execute

Objective:

All systems, processes and personnel are properly prepared and available to handle the ICD-10 transition

Step 1:

- Validate systems are ICD-10 compliant
- Validate education & training are complete for all staff
 - Establish a 30-90 refresher prior to transition date based on role.
- Validate the payer contracts are ICD-10 ready and reimbursement changes are understood.
- Validate that payers are ICD-10 compliant/ready

Step 2:

- Monitor the effects of the changes, stay connected to ensure impacts are minimal

REMEMBER:

Start Now!

Simple small steps early on and
throughout the process will make
the difference



ICD-10: Preparing Your Practice

Q & A

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End