ICD-10 Readiness

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Where Does ICD-10 Fit In?

- Common reliance on complete and accurate data and clinical documentation
  - Meaningful Use
  - Quality reporting
  - Value-based purchasing
  - Hospital-acquired conditions
  - Payment reform
  - Fraud prevention and detection
  - Research

- ICD-10 will improve quality of data necessary to achieve other healthcare initiatives
Documentation Impact on Quality Data

• Coding and sequencing
• Quality measures
• Reimbursement
• Severity-level profiles
• Risk adjustment profiles
• Present on admission reporting
• Hospital-acquired conditions
Clinical Documentation Challenges

• Ensuring sufficient documentation to support code assignment while allowing providers to document in clinical, not coding, terms

• Need good clinical documentation – not a greater volume of documentation
Documentation Focus Areas for ICD-10-CM

- Disease type
- Disease acuity
- Disease stage
- Site specificity
- Laterality
- Missing combination code detail
- Changes in timeframes associated with familiar codes
Specificity Examples

- S72.044G Nondisplaced fracture of base of neck of right femur, subsequent encounter for closed fracture with delayed healing
- I69.351 Sequelae of cerebral infarction, hemiplegia and hemiparesis following cerebral infarction affecting right dominant side
- T43.621S Poisoning by amphetamines, accidental (unintentional), sequela
- M80.011A Age-related osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture
Seventh Character Determination

- Initial vs. subsequent encounter vs. sequel
  - Injuries
  - Poisoning, adverse effects, and underdosing
  - Most external cause codes (except for place of occurrence, activity or status)
Obstetrics

• Trimester

• Number of Weeks of Gestation

• Multiple gestation complication-7th character for which fetus was affected

• Pre-Existing Conditions vs. Due to Pregnancy

• Diabetes – Diet controlled, insulin controlled or unspecified control
Adverse Effects, Poisoning, Underdosing and Toxic Effects

• Combination codes that include the substances related to adverse effects, poisonings, toxic effects and underdosing, as well as the external cause
  – Will require knowing intent: accidental, intentional self-harm, assault, undetermined
Underdosing

• Taking less of a medication than is prescribed by the provider or manufacturer

• Noncompliance or complication of care codes are used with underdosing code to indicate intent, if known
ICD-10-PCS
All 7 characters of an ICD-10-PCS code are required to code. Are all of them documented today?
ICD-9-CM Suture of Artery: One code 39.31

ICD-10-PCS Repair of Artery: 195 codes

Approach
0-Open
3-Percutaneous
4-Percutaneous Endoscopic

Body
Abdominal Aorta
Common Carotid Artery
Radial Artery

65 Different Arteries
ICD-10-PCS Documentation Considerations

- Root Operation
  - Provider documentation must describe the surgery in detail in order for the coder to select the appropriate root operation
- Approach
- No defaults for unspecified approach
- Specific body part
  - Laterality (e.g. right ovary, left ovary, or bilateral ovaries; no default for unspecified ovary; same for fallopian tubes)
  - Greater granularity (vessels, muscles, nerves)
ICD-10-PCS Documentation Considerations Cont..

- ICD-10-CM/PCS codes are considerably more detailed than ICD-9-CM

- Examples:
  - Laterality
  - Encounter Type (initial, subsequent, sequel)
  - Anatomical Detail
  - Type of Injury
  - Severity
  - Approach
Clinical Documentation Improvement Strategies

• Identify and implement changes in documentation capture processes (such as use of EHR documentation templates and prompts) that would facilitate improvements in clinical documentation practices
  • Eases ICD-10 transition and provider acceptance
• Key to quality care is to focus on capturing quality information at the point of care
  • Improving clinical documentation now has immediate benefits
• Educate Staff
Important EHR templates to consider

• Laterality
• Devices
• Encounter type (initial, subsequent, sequela, routine healing, delayed healing)
• Anatomic details
• Severity
• Disease relationships
ICD-10 Readiness / How Ready Are You?

CMS: No Further Delays in ICD-10-CM/PCS Implementation
ICD-10 Implementation

• Phase One
  • Perform impact Assessment
• Phase Two
  • Prepare for Implementation
• Phase Three
  • Prepare for GO LIVE (you should be here)
• Phase Four
  • Post-Implementation Status
Phase One

Perform Impact Assessment

- Establish an ICD-10 Committee
- Develop strategies & goals
- Determine organizational readiness
- Contact your Vendors
- Review the budget
Phase Two

Prepare for Implementation

• Upgrade Plans
• Data analysis-Impact
• Contact Payers
• Educate Staff (ICD-10 training)
Phase Three

Prepare for Go Live

• System upgrades should be completed
• Test all impacted systems
• Educate all users
• Develop a communication plan with Vendors & Payers
Phase Four

Post Implementation

• Monitor Claims
• Monitor your systems
• Audit coding accuracy
• Address problems (IMMEDIATELY)
• Evaluate Data for accuracy (reports)
• Evaluate financial Impact
• Expect the Unexpected
• Finally—Celebrate
Where Are You At?

- We have not begun
- We have upgraded some software
- We have finished upgrading software, have not tested
- We started testing phase
- Testing is complete
- We are READY
Don’t Panic
Resources

AHIMA

www.ahima.org

• Clinical Documentation Guidance for ICD-10-CM/PCS
• Using CDI Programs to Improve Acute Care Clinical Documentation in Preparation for ICD-10-CM/PCS
• ICD-10-CM/PCS Implementation Toolkit
• Electronic Documentation Templates Support ICD-10-CM/PCS Implementation
Documentation Resources

- ICD-10-CM/PCS Documentation Tips [www.ahima.org/icd10]

Clinical Documentation Improvement

Pneumonia

- Document causative organism (if known)
- Document mechanism:
  - Aspiration
  - Ventilator-associated
  - Radiation-induced
  - Other (specify)
- Document any associated illness:
  - Respiratory failure
  - Sepsis
  - Underlying lung disease
  - Other (specify)
- Document history of tobacco use—present or past
Resources: CMS

http://cms.gov/Medicare/Coding/ICD10/index.html

Road to 10: CMS Online Tool for Small Practices
Jumpstart your ICD-10 transition with Road to 10, http://www.roadto10.org/, an online resource built with input from providers in small practices. “Road to 10” includes specialty references and helps providers build ICD-10 action plans tailored for their practice needs.

CMS ICD-10 Quick Start Guide
Quick Start Guide outlines 5 steps health care professionals should take to prepare for ICD-10 by the October 1, 2015, compliance date. Additional resources are also available on the Provider Resources http://www.cms.gov/Medicare/Coding/ICD10/ProviderResources.html
ICD-10 benefit changes for Texas Medicaid and the CSHCN Services Program

http://www.tmhp.com/Pages/CodeUpdates/ICD10_benefit%20updates.aspx

Providers are encouraged to monitor this website for benefit changes related to ICD-10 as they become available. The Benefits website contains information by service type.
ICD-10 transition will affect every aspect of your practice. Learning a new code set and upgrading your software is only the beginning.

ICD-10 Training by Position: Coder/Auditor, Practice Manager/Admin, Physician

Achieving ICD-10-CM/PCS Compliance in 2015: Staying the Course for Better Healthcare

ICD-10 Implementation Tool kit
ICD-10 Preparation Checklist CMS Road To 10 Resources MLN Connects
ICD-10 Coding Basics Video
ICD-10 Playbook Top
ICD-10-CM/PCS Questions