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**ICD 10 Implementation
HCCA**

June 8, 2012

Agenda

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- ICD 10 Overview
- Planning
- Communication
- Education
- Physician Training

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Understanding ICD 10

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- The key to accepting any change is understanding
  - Why is this being done?
  - Who is involved?
  - What needs to be done?
  - When is it taking place?
  - How will this impact me?

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Rethink ICD-10-CM/PCS

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- ICD-10 is not beyond comprehension. In many respects it is more rational than ICD-9-CM.
- ICD-10 determination should be software driven – Invest in the best software version.
- ICD-10 can be successfully learned by a number of methods. Teachers must have a clinical background and a coding background (HIM and coding professionals).
- ICD-10 is a more accurate system of following medical care but it is epidemiological not reimbursement oriented. Evaluate the investment in "micro" accuracy.
- ICD-10 will help assess the quality of patient care. Software can be used to assess quality and adverse events. Example of 3M ™ APR DRG system.
- HIM and coding professionals already have the skills
  - Input skills
  - Accuracy

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The ICD-10 System (source CMS)

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- ICD-10-CM/PCS (International Classification of Diseases, 10th Edition, Clinical Modification/ Procedure Coding System) consists of two parts:
  - ICD-10-CM for diagnosis coding
  - ICD-10-PCS for inpatient procedure coding
- **ICD-10-CM** is for use in all U.S. health care settings. Diagnosis coding under ICD-10-CM uses 3 to 7 digits instead of the 3 to 5 digits used with ICD-9-CM.
- **ICD-10-PCS** is for use in U.S. inpatient hospital settings only. ICD-10-PCS uses 7 alphanumeric digits instead of the 3 or 4 numeric digits used under ICD-9-CM procedure coding. Coding under ICD-10-PCS is much more specific and substantially different from ICD-9-CM procedure coding.

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Positives of ICD-10

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- *Better* Ability to accurately measure outcomes
  - Quality
  - Safety
  - Cost
  - Efficiency
  - Research
  - Utilization
- *More* straight-forward description of the illness in the diagnosis code
  - Combination codes
- *More* Rational codes for
  - Health system design
  - New software tools
- *More* Health Policy interaction
  - Insurance carrier
  - Local, State, Federal

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Positives of ICD-10

- *Better* Planning for the future for your facility and staff needs
- *Better* Protection from liability, fraud and abuse
- *Better* Public health monitoring
- *Better* Ability to grow with changing diagnoses and procedures
- More intuitive for non coders
- *Better* Able to track location and frequency of services in future versions

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In General - ICD-10-CM

ICD-9-CM	ICD-10-CM
3-5 characters	3-7 characters
14,315 diagnosis codes	69,101 diagnosis codes
Only V codes and E codes have letters	All codes start with a letter
Limited space for adding new codes	Flexible for adding codes
Cannot identify laterality	Can identify laterality

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In General - ICD-10-PCS

ICD-9-CM	ICD-10-PCS
3-4 characters	7 characters
3,838 procedure codes	71,957 procedure codes
Not very specific	Very specific
Limited space for adding new codes	Flexible for adding codes
Generic terms for body parts	Specific terms for body parts

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An Overview of the ICD-10-PCS

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- Medical and Surgical Section Character Specification
  - 1st Character = Section
  - 2nd Character = Body System
  - 3rd Character = Root Operation (basic procedure type)
  - 4th Character = Body Part (anatomic and/or descriptive)
  - 5th Character = Approach (anatomic approach used in the procedure)
  - 6th Character = Device
  - 7th Character = Qualifier

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Unique to ICD 10 CM

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- **1)** Laterality (left, right, bilateral)
  - Examples:
    - n C50.511 – Malignant neoplasm of lower-outer quadrant of right female breast
    - n H16.013 – Central corneal ulcer, bilateral
    - n L89.012 – Pressure ulcer of right elbow, stage II
- **2)** Combination codes for certain conditions and common associated symptoms and manifestations
  - Examples:
    - n K57.21 – Diverticulitis of large intestine with perforation and abscess with bleeding
    - n E11.341 – Type 2 diabetes mellitus with severe non-proliferative diabetic retinopathy with macular edema
    - n I25.110 – Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
      - Combination code eliminates sequencing errors

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Planning

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Act Now

- 91% of respondents of an HCPro, Inc survey stated they were aware of the move to ICD 10, but only 70% have taken any action.
- The delay is a second chance
- Do not wait any longer

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Implementation

- ICD 10 Implementation Committee
  - Executive Committee and Steering Committee
  - Representatives from all areas that use codes in any manner
    - HIM (may lead the effort)
    - Patient registration
    - Finance
    - Clinical Documentation Improvement
    - Medical Directors
    - Clinical areas
    - Quality
  - Communication is key and the committee may vary as time rolls on

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Implementation

- ICD 10 Steering Committee
  - Organizes the effort
  - Identify the core group to be involved with action items
  - Identify frequency of meetings and attendees
  - Identify consultant support if needed
  - Share project documents with key facility members
  - Determine/Share projected budget
    - Education needs
    - Software fees
    - Productivity impact
    - Vendors/overtime/additional staff

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Implementation

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- ICD 10 Steering Committee
  - Need an Executive Sponsor
  - Subcommittees
    - Education
      - Conducts a detailed assessment of educational needs
    - Communication
      - Gets the message out
    - Business areas
      - Small, focused teams
    - Business partner coordination
      - Inventory resources and status

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Implementation

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- ICD 10 Impact Assessment
  - Determine areas of greatest impact and steps needed
  - Determine current ICD 10 knowledge and preparedness
  - Software system preparedness
    - Encoders
    - Groupers
    - CMI analysis
    - Registration
    - Clinical department tool
  - Vendor communication is critical
    - Hold them accountable

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Implementation

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- ICD 10 Impact Assessment
  - Distribute questionnaires
    - Specific to the recipient
  - Responses can help shape training needs and timeline
    - May be surprised by the variety of employees using codes or dependent upon physician documentation
  - Responses can help identify vendor shortfalls or areas of strength
  - Coding and documentation reviews comparing current status to ICD 10

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Communication

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Communication

- Utilize committee and facility leadership
- Top down communication
- Manage expectations
  – Develop an understanding of ICD 10's value
  – Create a culture of understanding
- Use a formal communication plan to spread the message, keep implementation moving and track progress

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Communication Plan

- A written document detailing the following:
  – Objectives-what needs to be accomplished
  – Goals-end result
  – Recipients of the communication
  – Methods of communication
  – Timeline
  – Measure results
- The Plan should determine the organization's needs, identify stakeholders and determine timing and content

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Communication Plan

- Identify current communication strategies
  - Recipients
  - Modes of communication
  - Tracking and measuring
  - Tools
  - Prioritize efforts to reach as many people as possible while being as efficient as possible
- Incorporate ICD 10 communication into existing methods as much as possible

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Communication Plan

- Timeline
  - Define goals and objectives
  - Be realistic
  - Prioritize the message
  - Assign team member responsible and hold accountable
    - Take into consideration each audience, tools and depth of knowledge needed
  - Remember, we want ICD 10 to be part of the facility's culture
    - Repeated, consistent message
    - Demonstrate value and importance of the project
    - Focus on benefits as opposed to obstacles
  - Share results and progress

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Education

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Education Plan

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- Develop an Education Plan that identifies:
  - Education needs
  - Audience
  - Content
  - Budget
  - Timing
  - Existing tools
- Use the survey results to focus on what needs to be shared eliminating any existing skills
  - Due to the delay, there may have been training initiated
  - No need to duplicate

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Education

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- The greatest impact of ICD 10 will be felt by the coders and physicians
  - Many resources for coder education
  - AHIMA, HCPro, inc., sate and local organizations, boot camps, audio conferences
  - Timing is critical-start too early and they can't apply it
  - Productivity will be impacted
    - Prepare vendors
    - Lack of resources-*Coding Clinic* will be outdated
- Physician training can be done in pieces over time
  - Focus on documentation requirements specific to their needs, as well as an overall understanding of ICD 10
  - We have found that many physicians appreciate ICD 10's merits over ICD 9

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Coder Training

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- Estimated 80 hours of training is needed
- Impact on productivity
  - Return to productivity standards in 3 months
- Use outside resources
- Train the trainer approach
- Track and measure

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Physician Training

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Greatest Threat to Implementation Success

- Physician Non-Responsiveness
  - Stalls transition
- Lack of Behavioral Change
  - Keeps query rates high
  - Elevates level of frustration
- Inappropriate Physician Responses
  - "Just tell me what to write."
  - "Does it increase $"
  - "Will this hurt my ratings?"

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Greatest Threat to Implementation Success

- Responses Not Timely
  - Increases DNFB
  - Increases workload for coders and Clinical Documentation Improvement Specialists
  - No longer familiar with patient
- Documentation Not Supported Clinically
  - Lack of understanding of the education
  - Just trying to help
- "What's in it for me?"
  - "The facility gets all this money and I just get more work."

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Steps for Greater Physician Engagement

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- Basic Understanding of ICD 10 and the Value
- Find Their Interests/Concerns
  - Pro-fee billing
  - Ratings
  - Greater resources
  - Is not labor intensive
  - SOI/ROM
- Clinical Documentation Specialists Are There to Help
- Coder Empathy

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Steps for Greater Physician Engagement

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- Executive Leadership
  - Top down support
- Physician Champion
  - Roles and responsibilities
  - Provides leadership and guidance
  - Interacts with non-engaged physicians
- Physician Liaison
  - Resource for coders and CDSes
  - Reviews difficult charts

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Steps for Greater Physician Engagement

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- Track and Share Results
  - Financial (be careful)
  - Query rates
  - Response rates
  - Response times
  - Key metrics that initiated the program
- Maintain a Level of Interest
  - Newsletters
  - Budget impact based on results
  - Coding changes

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Physician Education

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- 10-80-10 Rule
  - 10% of physicians will be supportive
  - 80% of physicians will follow along
  - 10% of physicians may be barriers
- Maximize the supportive physicians
- Focus on converting the non-believers

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Coder Empathy

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- Place "blame" on the Coding Guidelines
  - Coding rules are very strict and it is unfair to expect you to know them all
  - The training will help you avoid the mess
- The Coders Are Skilled Professionals
  - Credentials
  - Highly trained
  - Very difficult job
- The Coders Hands Are Tied
  - Dependent on physician detailed documentation

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Criteria for Good Documentation

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- Legible
- Timely
- Clear
- Consistent
- Complete
- Precise
- Reliable

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Physician Training BRG BERKELEY RESEARCH GROUP

- Prioritize Training
  - Hospitalists
  - PAs, NPs and other health care extenders
  - Intensivists and Pulmonologists
  - Cardiologists and Cardiovascular Surgeons
  - Internists and Generalists involved with Inpatient
  - General Surgery, Neurosurgery, Orthopedics
  - Other Specialties

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The Hospitalists BRG BERKELEY RESEARCH GROUP

- Key group managing a high percentage of patients
- Can be a valuable resource to share the message
- Need to know the rules
  - More descriptive terms
  - Acceptable abbreviations
  - Medical slang and avoidance of certain terms
  - Symbol use
- Broad training
- Training them to be the teachers
- Influence hospital policies directly

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The Cardiologist and Cardiovascular Surgeon BRG BERKELEY RESEARCH GROUP

- Concentrate on education for description
  - Type and Acuity of CHF
  - Type and Acuity of Arrhythmias
  - MI – location, extent and secondary conditions
  - Valve disorders- type
  - Infections

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Approach to Surgeons

- ICD-10-PCS compared to past systems
- The need for ordering from the menu and or templates
- Use of assistants and office staff
- The ICD 10 PCS system has specific uses in the Inpatient environment

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Important Secondary Conditions for Surgery

- Medical conditions
  - Best documented by internal medicine consult or hospitalist
  - Best documented if compliant template form
  - Emergency surgery - ER notes are good source of diagnoses
  - Anesthesia also important source of documentation

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Residents

- Your future attending physicians - train them well
- Plan sessions with coding personnel, help them understand the system
- Make the education enjoyable

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Physician Training

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- Make It Last
  - Share Results
  - Key Metrics
  - Ongoing Education
  - Keep the Program Fresh
  - Leverage Believers
  - Convert Non-Believers

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Thank You!

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