

Agenda ICD 10 Overview Planning Communication Education Physician Training

Understanding ICD 10	BRG BERKELEY RESEARCH
 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? 	

Rethink ICD-10-CM/PCS



- 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 $^{\rm TM}$ APR DRG system.
- HIM and coding professionals already have the skills
 - Input skillsAccuracy

The ICD-10 System (source CMS)



- ICD-10-CM/PCS (International Classification of Diseases, 10th Edition, ${\bf Clinical\ Modification/\ Procedure\ Coding\ System)\ consists\ of\ two\ parts:}$
 - 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.

Positives of ICD-10



- 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

Positives of ICD-10

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- 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

7

ICD-9-CM

ICD-10-CM

3-5 characters

14,315 diagnosis codes
Only V codes and E codes have letters
Limited space for adding new codes
Cannot identify laterality

Can identify laterality

Can identify laterality

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

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

Unique to ICD 10 CM



- 1) Laterality (left, right, bilateral)
- O 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
- O Examples:
 - x 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 125.110 Atherosclerotic heart disease of native coronary artery with unstable angina pectoris
 Combination code eliminates sequencing errors

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Planning

Act Now

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- 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

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- 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

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

Implementation 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 Inventory resources and status

Implementation • 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

Implementation • 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 Plan

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- 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

■ 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

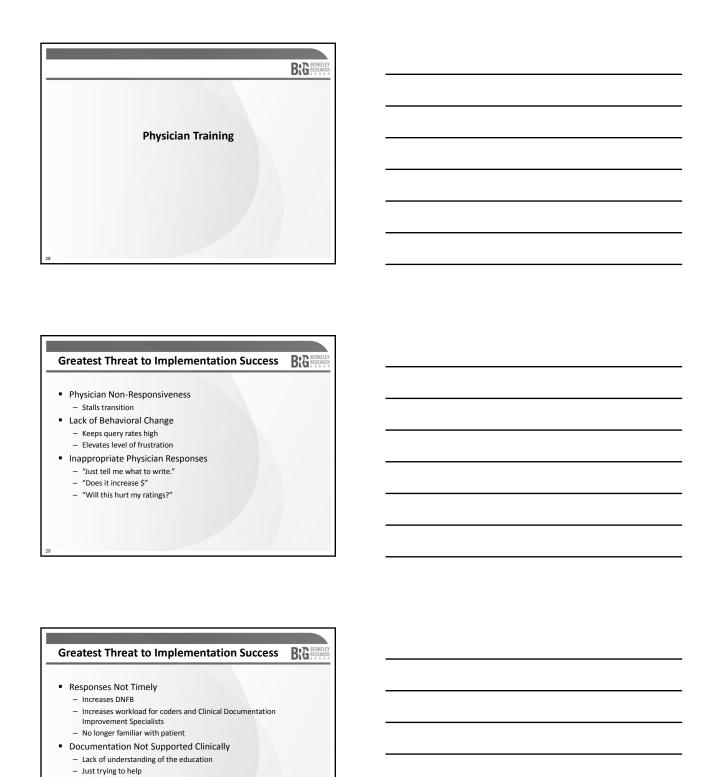
Demonstrate value and importance of the project

Focus on benefits as opposed to obstacles

Share results and progress

Education Education

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■ "What's in it for me?"

– "The facility gets all this money and I just get more work."

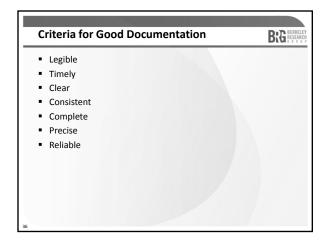
Basic Understanding of ICD 10 and the Value Find Their Interests/Concerns Pro-fee billing Ratings Greater resources Is not labor intensive Sol/ROM Clinical Documentation Specialists Are There to Help Coder Empathy

Steps for Greater Physician Engagement 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

Steps for Greater Physician Engagement 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

Physician Education 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

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



Physician Training 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 The Hospitalists Key group managing a high percentage of patients

The Cardiologist and Cardiovascular Surgeon

Can be a valuable resource to share the message

Medical slang and avoidance of certain terms

Need to know the rules
 More descriptive terms
 Acceptable abbreviations

Symbol useBroad training

Training them to be the teachersInfluence hospital policies directly

Type and Acuity of CHF
Type and Acuity of Arrhythmias
MI – location, extent and secondary conditions
Valve disorders- type
Infections

19

Approach to Surgeons

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- 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

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

Residents



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

Physician Training	BrG RES
■ Make It Last	
Share ResultsKey Metrics	
 Ongoing Education 	
 Keep the Program Fresh Leverage Believers 	
Convert Non-Believers	

Thank You!	BRG BERKELEY
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44	