



Primeau  
Consulting  
Group

ICD-10 Transformation

More than a Check Mark in the Box

**May 2013**

# Reasons for Implementing

Better Data to Support Efforts to Improve Performance

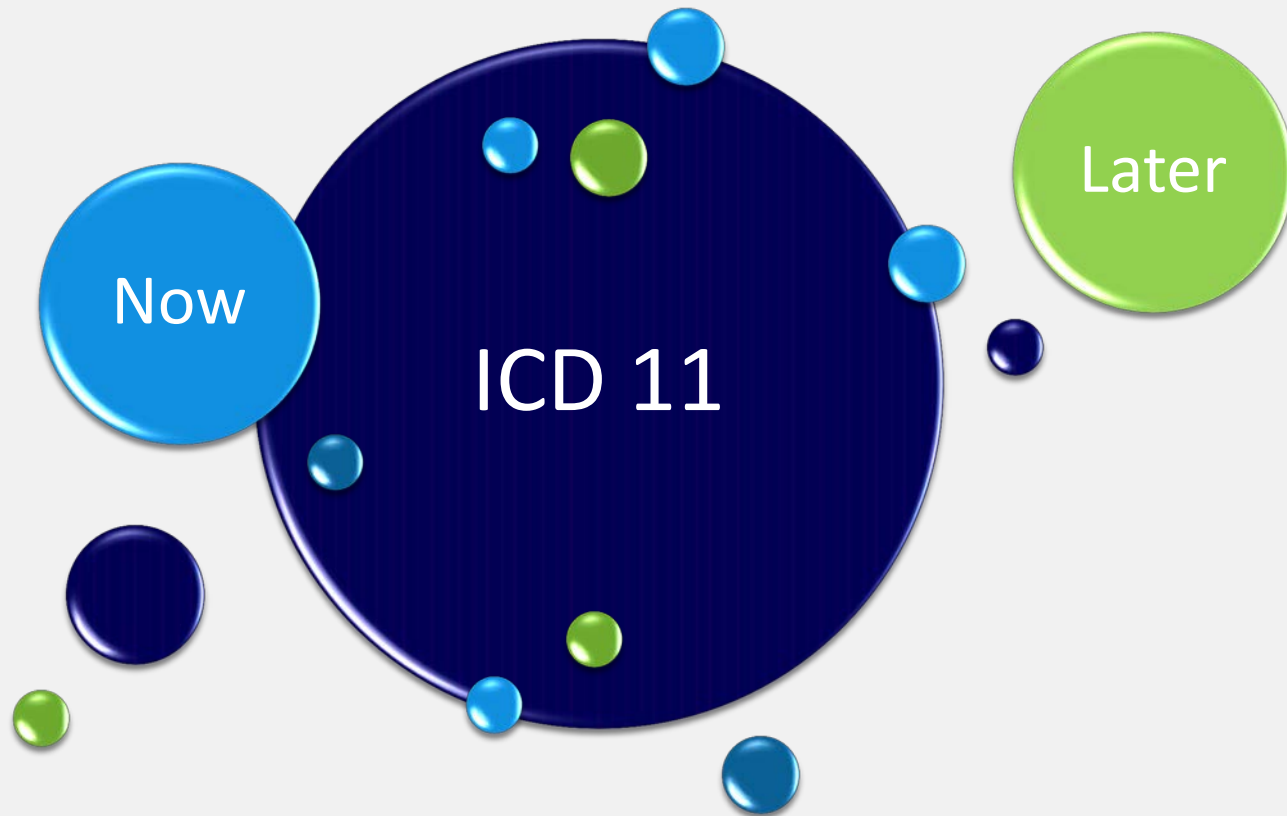
Improved Patient Care

Improved Accuracy of Reimbursement

More Responsive to Use of Emerging Technologies

Standardized Reporting of Public Health Data

# ICD-11?

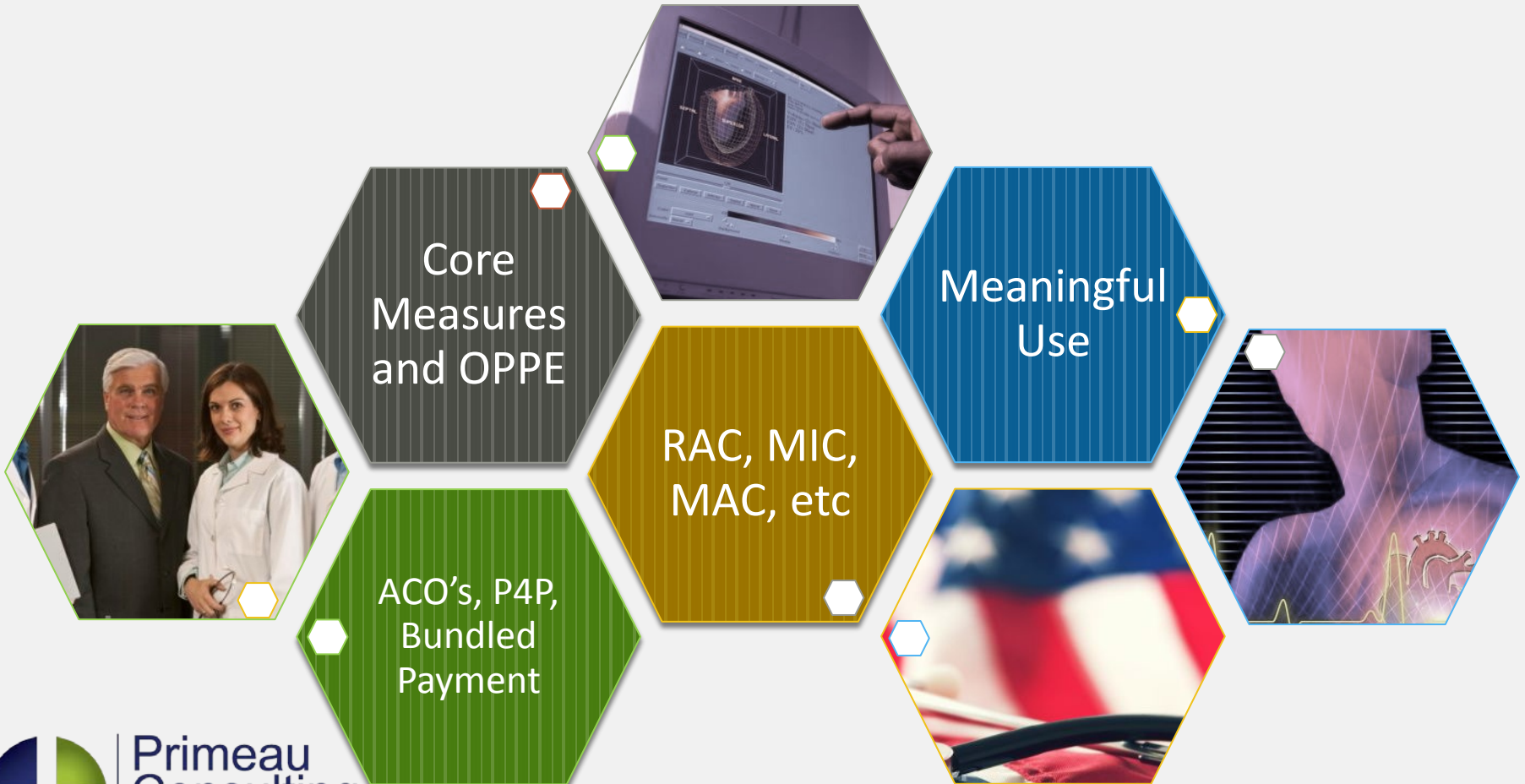


# Meeting the Minimum Intent

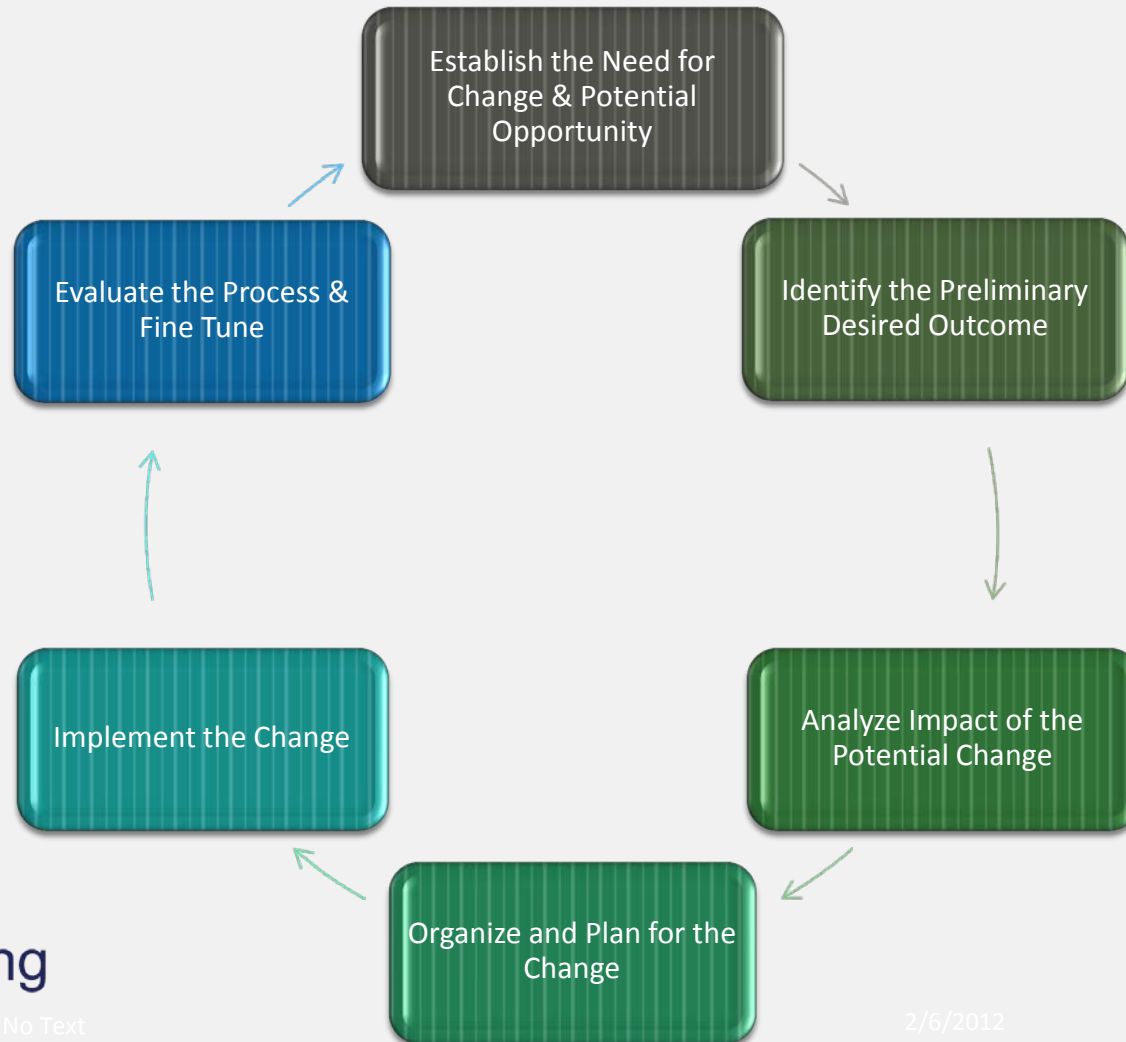
“For dates of service on and after October 1, 2013, entities covered under HIPAA are required to use the ICD-10 code sets in standard transactions adopted under HIPAA. The HIPAA standard health care claim transactions are among those for which ICD-10 codes must be used for dates of service on and after the compliance date. “

CMS Manual System Transmittal 950, August 19, 2011

# Is It Enough ?



# Change Management





## Overview of ICD-10

# ICD-10-CM



United States is required to report mortality and morbidity data to the World Health Organization under an agreement similar to an international treaty.



Developed by the National Center for Health Statistics (division of CDC) to complement accepted clinical practice.



Number of diagnosis codes increased from 14,025 (ICD-9-CM) to 68,069 (ICD-10-CM).



# ICD-10-PCS



Chosen *OVER* CPT with a goal to improve comprehensive communication.



Developed under contract by CMS to complement current and future technology changes.



Number of procedure codes increased from 3,824 (ICD-9-PCS) to 72,589 (ICD-10-PCS).



## ICD-10-CM Format and Examples

# Comparisons between ICD-9-CM to ICD-10-CM

## ICD-9-CM

3-5 digits

First alpha or numeric

2-5 are numeric

14,025 diagnosis

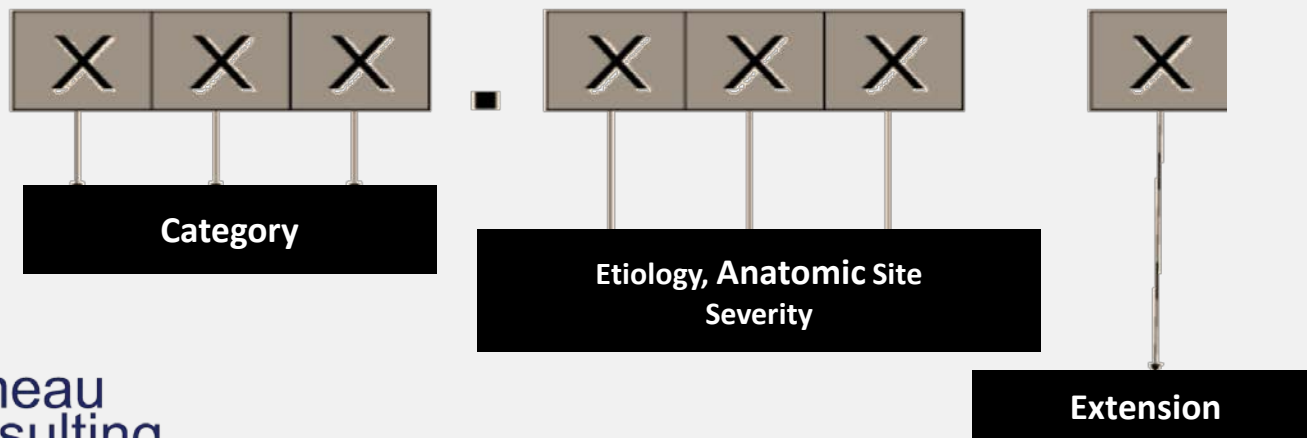
## ICD-10-CM

7 digits

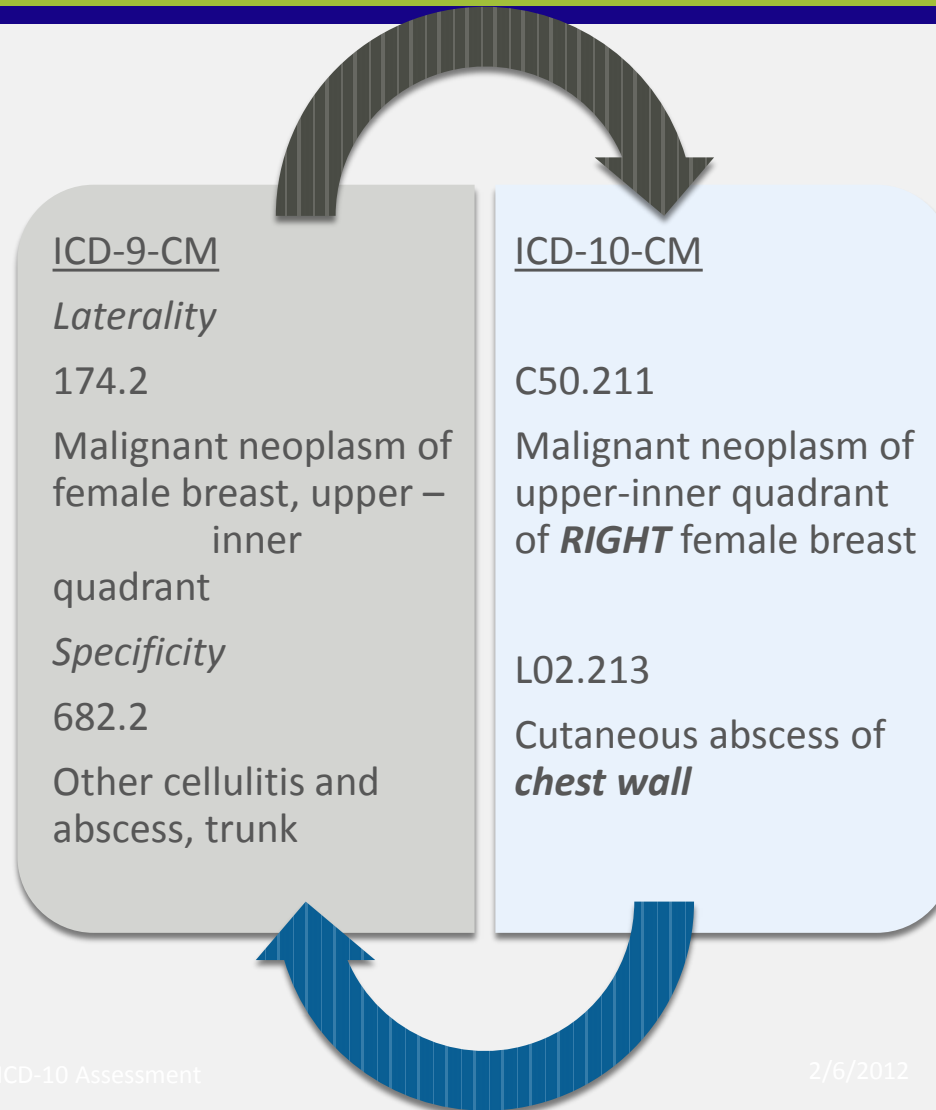
First always alpha (not case sensitive)

2-3 numeric, 4-7 either

68,065 diagnosis



# Comparisons between ICD-9-CM to ICD-10-CM





## ICD-10-PCS Format and Examples

# Comparisons between ICD-9-PCS to ICD-10-PCS

## ICD-9-CM v3

3-4 digits

All numeric

3,824 procedures

Allows for new procedures as unique codes

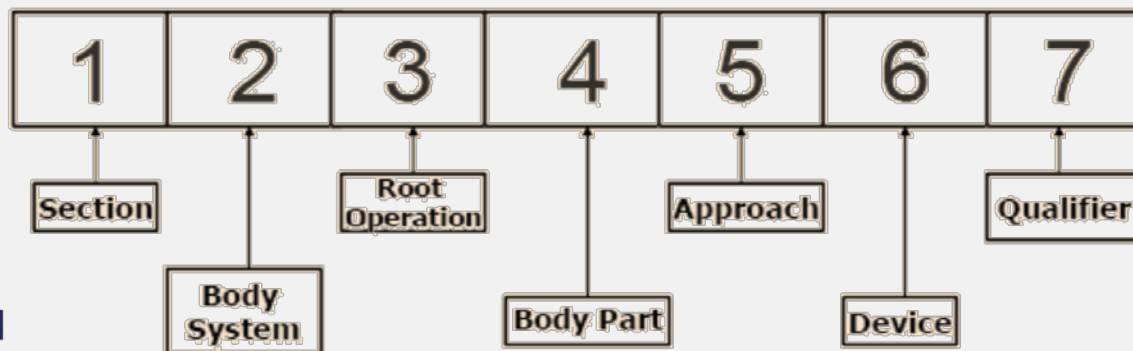
- Each term is assigned a specific meaning
- Structure includes tabular list & index for common procedure names

## ICD-10-PCS

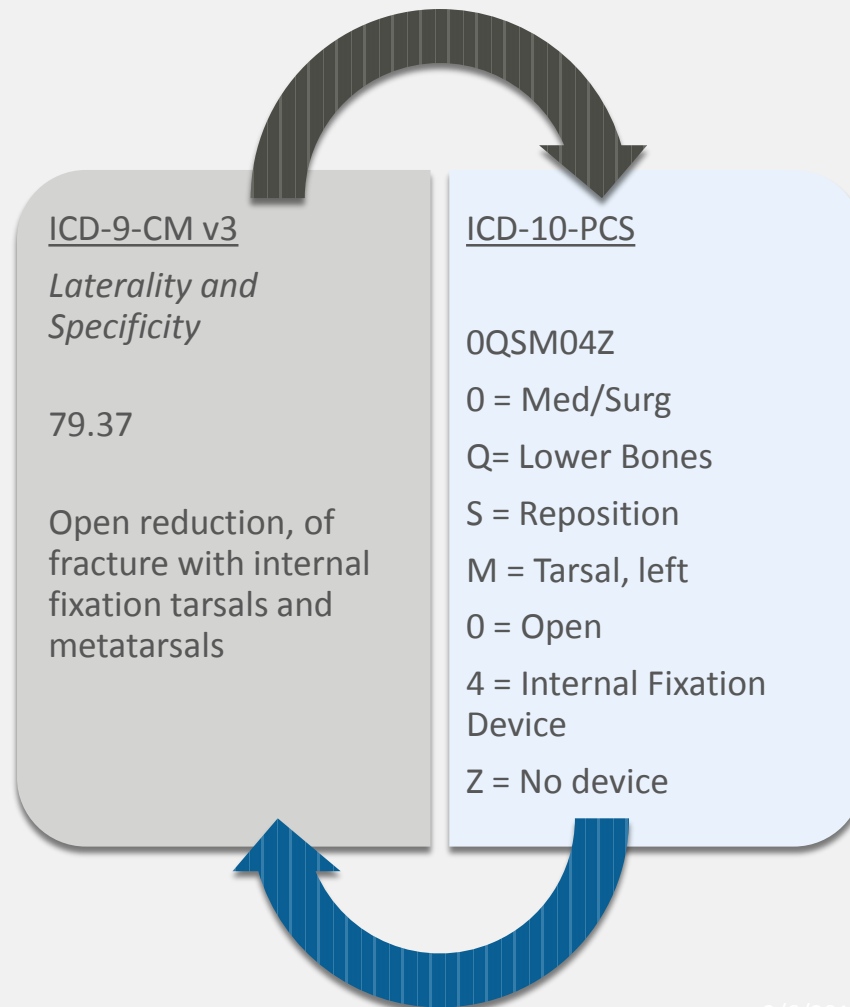
7 digits (not case sensitive)

Each either (no I's or O's)

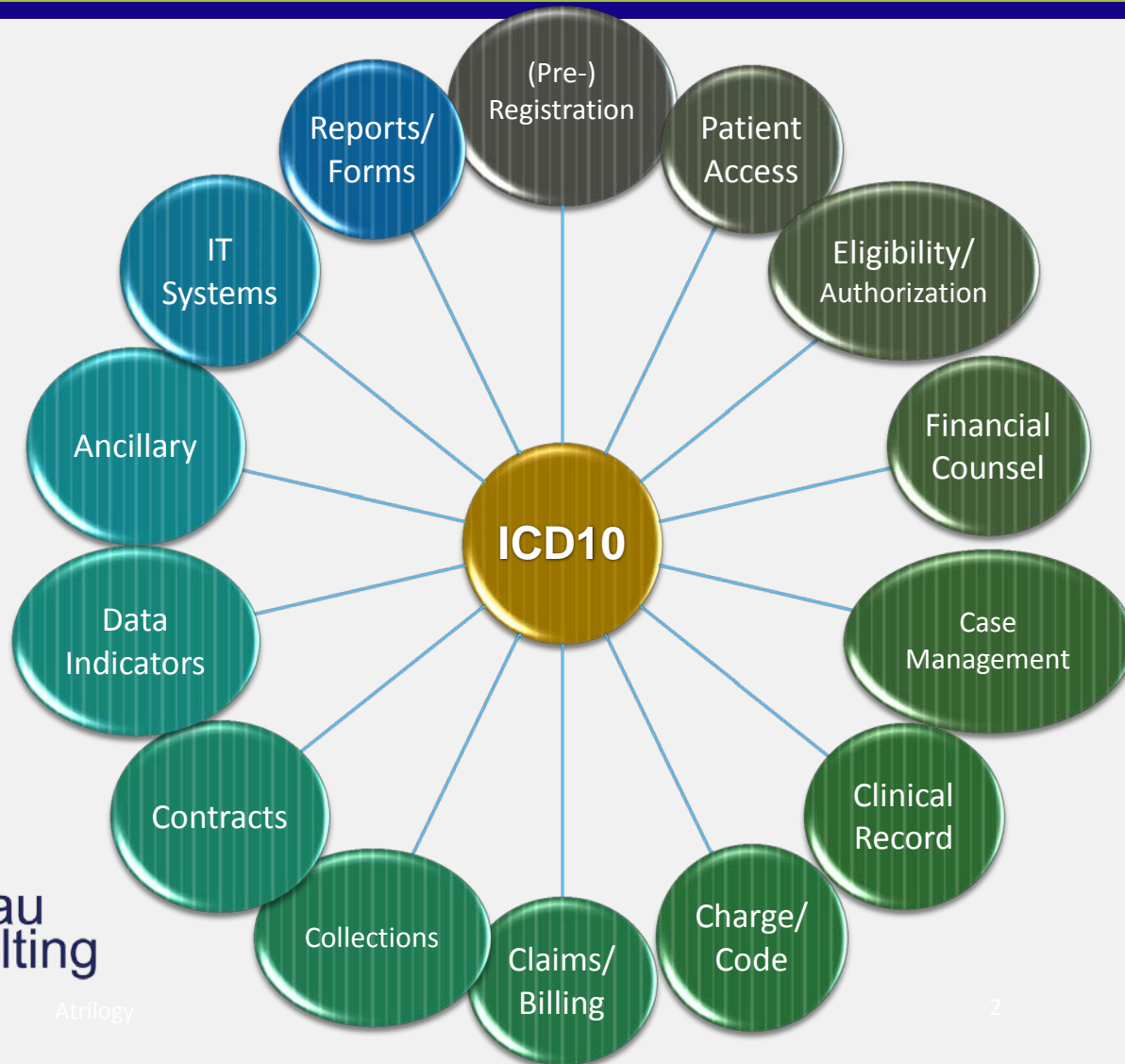
72,589 procedures



# Comparisons between ICD-9-PCS to ICD-10-PCS

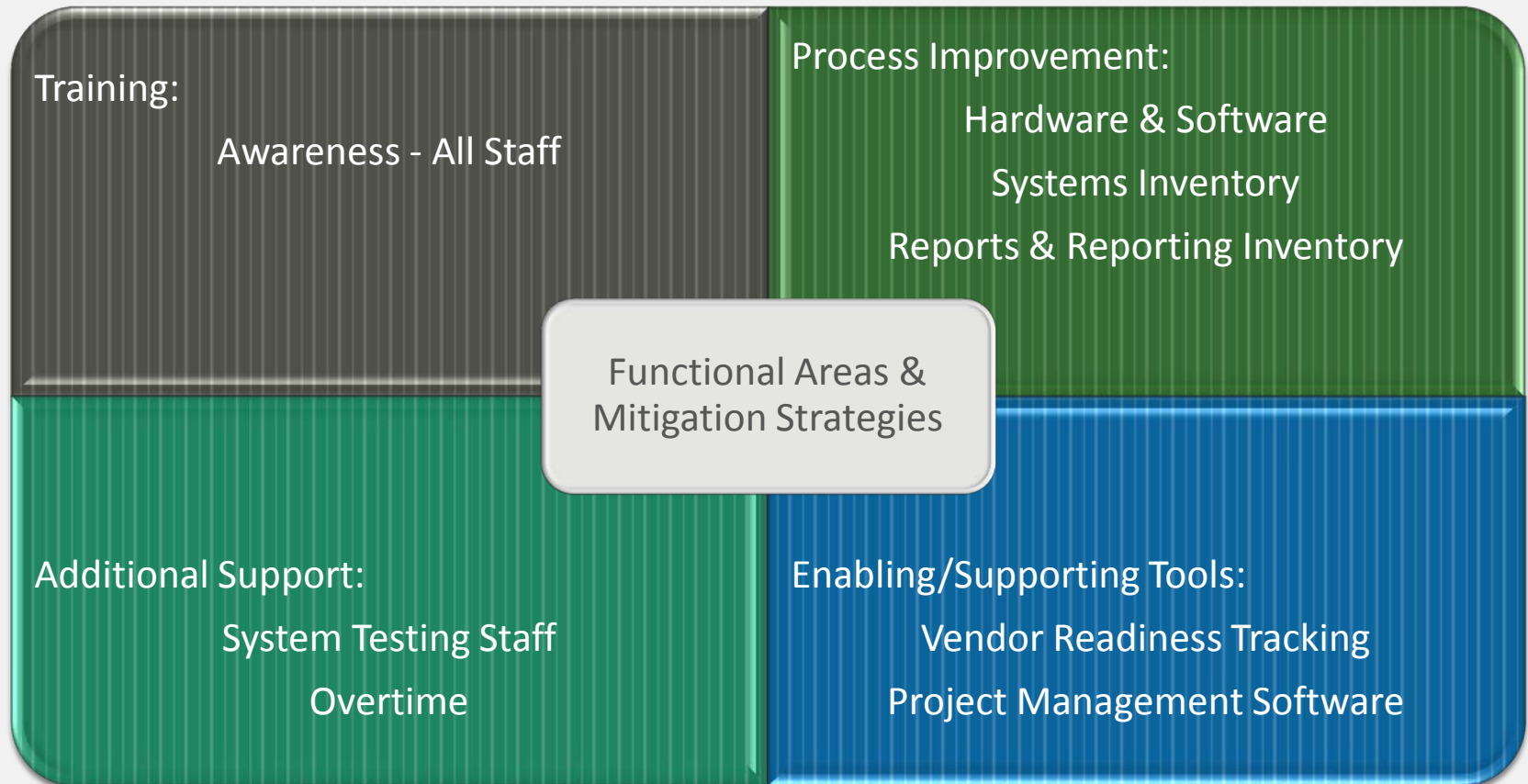


# ICD-10 TouchPoints





# Information Systems



# Health Information Management

## Training:

Awareness - All Staff  
Extensive - Coding/Contract Staff

## Process Improvement:

Coding Productivity  
Coding Accuracy  
P&P's

Functional Areas &  
Mitigation Strategies

## Additional Support:

Contract Coding Services  
Overtime

## Enabling/Supporting Tools:

Updated Encoders  
Computer Assisted Coding

# Clinical Documentation Improvement

Training:

Moderate - Extensive

Process Improvement:

Provider Documentation  
Query Forms and Process

Functional Areas &  
Mitigation Strategies

Additional Support:

Contract Coding Services  
Overtime

Enabling/Supporting Tools:

Updated Encoders  
Computer Assisted Coding

# Physicians

## Training:

Awareness – All Staff  
Extensive – by Medical Specialty

## Process Improvement:

Provider Documentation  
Superbills  
Medical Records

Functional Areas &  
Mitigation Strategies

## Additional Support:

Physician Office Staff  
Physician Champions

## Enabling/Supporting Tools:

Transcription Templates  
Computer Assisted Coding  
Query Forms

# Patient Access/Scheduling

## Training:

Awareness – All Staff

## Process Improvement:

Scheduling Process  
Medical Necessity Determinations

Functional Areas &  
Mitigation Strategies

## Additional Support:

Trained Coding Staff

## Enabling/Supporting Tools:

Eligibility Software

# Patient Financial Services/Finance

## Training:

Awareness – All Staff

## Process Improvement:

Payer Contract Negotiation  
Medical Necessity Determinations

Functional Areas &  
Mitigation Strategies

## Additional Support:

External Collections Staff  
Overtime

## Enabling/Supporting Tools:

Point of Service Cash      Collections  
Software                      Charge Master

# Contract Management

## Training:

Awareness – All Staff

## Process Improvement:

Contracts and Rate Schedules  
Contract Negotiation and GEMS

Functional Areas &  
Mitigation Strategies

## Additional Support:

Trained Coding Staff

## Enabling/Supporting Tools:

Contract Modeling and Predictive  
Analysis Software

# Decision Support

## Training:

Awareness – All Staff

## Process Improvement:

Report Request Process

Functional Areas &  
Mitigation Strategies

## Additional Support:

Trained Coding Staff

## Enabling/Supporting Tools:

Data Repository with Decision  
Support Software



# Clinics & Ancillary Departments

## Training:

Awareness – All Staff

## Process Improvement:

Diagnostic Test Referral Process

Functional Areas & Mitigation Strategies

## Additional Support:

Trained Coding Staff

Physician

Physician Office Staff

## Enabling/Supporting Tools:

Preprinted or Automated Requisitions

# Quality Improvement/Performance Management

## Training:

Moderate – Reporting Staff  
Awareness – All Staff

## Process Improvement:

Benchmarking using Patient and  
Treatment Classification

Functional Areas &  
Mitigation Strategies

## Additional Support:

Trained Coding Staff

## Enabling/Supporting Tools:

Clinical Pathway/Best Practices  
Data Analytics Software

# Utilization/Case Management

## Training:

Moderate – Case Management Staff  
Awareness – All Staff

## Process Improvement:

Severity/Admissions Screening  
Concurrent and Retrospective  
Review Process

Functional Areas &  
Mitigation Strategies

## Additional Support:

Trained Coding Staff

## Enabling/Supporting Tools:

InterQual Criteria Products      RAC /  
Other Denial Management Software

# Tumor/Trauma Registry

Training:

Moderate

Process Improvement:

Case Finding and Matching

Death Certificate Coding

Follow-up and Special Studies

Functional Areas &  
Mitigation Strategies

Additional Support:

Trained Cancer Abstracting Staff

Enabling/Supporting Tools:

CancerNet Products and Interfaces

CaseFinding Lists

# Clinics & other departments

## Training:

Moderate/Extensive – Superbill  
Users and Billers  
Awareness – All Staff

## Process Improvement:

Revised Superbills  
Medical Necessity Determinations

Functional Areas &  
Mitigation Strategies

## Additional Support:

Trained Coding Staff

## Enabling/Supporting Tools:

Practice Management Software  
Charge Master  
Point of Service Cash Collections Tools

# ICD-10 Readiness – Approach



*Phase 1* – The ‘*Assessment*’ phase includes the Impact Analysis related to the ICD-10 conversion and Organizational Strategy for Implementation.

*Phase 2* – The ‘*Execute*’ phase covers the implementation activities for transformation.

*Phase 3* – The ‘*Sustain and Improve*’ phase covers the ongoing activities necessary to stabilize the organization’s processes and further benefit from the transformation.

# Next Steps

## Action

## Timeframe

Conduct Impact Analysis and Results Analysis

Next 6 Weeks

Develop an Implementation Strategy and Plan

The Following 4 Weeks

Execute Awareness Campaign

TBD

Execute Transformation

TBD

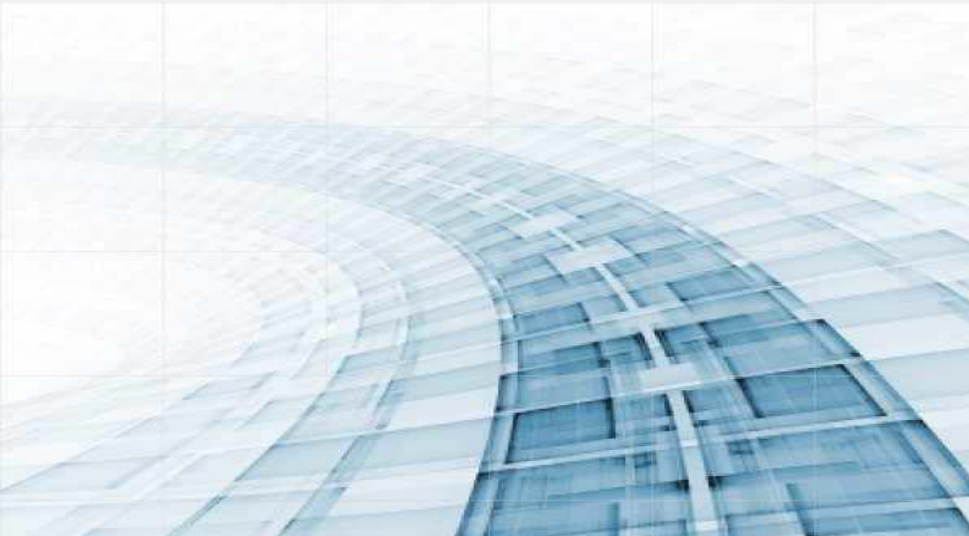
Perform Continued Improvement &  
Monitor Readiness and Risk

TBD

Conduct Post-Implementation Analysis &  
Implement Necessary Process Improvement

TBD

# Questions and Contact Information



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