



RESOURCE AND PATIENT MANAGEMENT SYSTEM

**International Classification of
Diseases, Tenth Revision – Clinical
Modification (ICD-10-CM)
"Have No Fear, ICD-10 is Here"**

Announcement and Agenda

July 10-11, 2013

Office of Information Technology (OIT)

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1.0 General Information

1.1 Purpose of Training

All entities covered by the Health Insurance Portability and Accountability Act (HIPAA) must implement ICD-10 for medical coding by the Centers for Medicare and Medicaid Services (CMS) compliance date. This mandate affects all Indian Health Service (IHS), Tribal, and Urban (I/T/U) sites. ICD-10 inpatient and outpatient total more than 155,000 codes compared to ICD-9's 17,000 and only about 20% of ICD-9 codes crosswalk to ICD-10 codes. The transition to ICD-10 will affect almost every employee and contractor in IHS and will require extensive coordination throughout Indian Country and beyond (payer, vendors, etc.).

Conversion to ICD-10 will meet HIPAA mandates and position trained I/T/U staff to take a lead role in implementing ICD-10 in their respective programs. Business processes, such as, accurate code assignment, documentation improvement and its impact on the revenue cycle must be factored into the ICD-10 migration.

The slides used in the sessions and the answers from the question and answer sessions are based on the AHIMA 2012 version of materials.

The purpose of this course is to provide participating professionals with an understanding of:

- The necessary skills and knowledge on the processes, procedures, policies, and system updates for ICD-10 implementation
- The differences between ICD-9 and ICD-10
- The rationale for ICD-10 adoption
- Existing tools, risks and industry updates
- The importance of clinical terms and meanings
- How ICD-10 affects business processes
- The clinical documentation requirements as a result of ICD-10 adoption

<p>Note: This course does not take the place of certification courses given by entities such as the American Health Information Management Association (AHIMA) or American Academy of Professional Coders (AAPC).</p>
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1.2 Prerequisites

- Code Set Versioning must be completed at your facility and within your Area.
- Version 5010 must be completed at your facility.
- Sites and participants are responsible for bringing their own 2011, 2012, or 2013 Draft ICD-10-CM code book and/or access to on-line ICD-10 codes.

1.3 Guidelines for Receiving Continuing Education Credit

At the conclusion of class, a link to Survey Monkey will be distributed to all classroom participants. Once the Survey Monkey is completed, a certificate for AHIMA CEUs will be available for printing.

2.0 Learning Objectives

See Section 3.0 for bulleted objectives for each section.

3.0 Detailed Agenda

Day One – Mountain Time

Start	Topic
8:30	Set-up, Check In
9:00 <i>1 CEU</i>	<p>Welcome and Review Course Material At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Review & Discuss Training Materials • Understand the History, Development, Organization and Structure of ICD-10 • Differences between 2012 and 2013 guidelines
10:00 <i>2 CEU</i>	<p>Overview of the Organization and Classification of Diseases and Disorders and Guidelines, Chapters 1-7</p> <ul style="list-style-type: none"> • Certain Infectious and Parasitic Diseases • Neoplasms • Diseases of the Blood and Blood-forming organs and certain disorders involving the Immune Mechanism • Endocrine, Nutritional and Metabolic diseases • Mental and Behavioral Disorders • Diseases of the Nervous System • Diseases of the Eye and Adnexa <p>BREAK (15 minutes) At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Use the ICD-10-CM Index and Tabular Lists • Use the Neoplasm Table, and Drug & Chemical Tables, and Index to External Causes • Apply ICD-10-CM Coding Conventions and Guidelines • Code using ICD-10 codes for certain diseases • Respond to Review Questions
12:00	Lunch – one hour
1:00 <i>1 CEU</i>	<p>Overview of the Organization and Classification of Diseases and Disorders and Guidelines, Chapters 8-10</p> <ul style="list-style-type: none"> • Diseases of the Ear and Mastoid Process • Diseases of the Circulatory System • Diseases of the Respiratory System <p>At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Use the ICD-10-CM Index and Tabular Lists • Use the Neoplasm Table, Drug & Chemical Table, and Index to External Causes • Apply ICD-10-CM Coding Conventions and Guidelines • Code using ICD-10 codes for certain diseases • Respond to Review Questions
2:00 <i>1.5 CEU</i>	Coding Exercises, Review, Questions and Discussion
3:30	Adjourn

Day Two – Mountain Time

Start	Topic
8:45	Check-in
9:00 <i>1 CEU</i>	<p>Continue Overview of the Organization and Classification of Diseases and Disorders and Guidelines, Chapters 11-14</p> <ul style="list-style-type: none"> • Diseases of the Digestive System • Diseases of the Skin and Subcutaneous Tissue • Diseases of the Musculoskeletal System & Connective Tissue • Diseases of the Genitourinary System <p>At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Use the ICD-10-CM Index and Tabular Lists • Use the Neoplasm Table, Drug & Chemical Table, and Index to External Causes • Apply ICD-10-CM Coding Conventions and Guidelines • Code using ICD-10 codes for certain diseases • Respond to Review Questions
10:00 <i>2 CEU</i>	<p>Overview of the Organization and Classification of Diseases and Disorders and Guidelines, Chapters 15-21</p> <ul style="list-style-type: none"> • Pregnancy, childbirth and the puerperium • Certain conditions originating in the Perinatal Period • Congenital malformations, deformations, and chromosomal abnormalities • Symptoms, signs and abnormal clinical and laboratory findings, NEC • Injury, poisoning and certain other consequences of external causes • External causes of morbidity • Factors influencing health status and contact with health services <p>BREAK (15 Minutes)</p> <p>At the end of this session participants should be able to:</p> <ul style="list-style-type: none"> • Use the ICD-10-CM Index and Tabular Lists • Use the Drug & Chemical Table and Index to External Causes • Apply Coding Guidelines • Code using ICD-10 codes for certain diseases • Respond to Review Questions
12:00	Lunch – one hour
1:00 <i>2.5 CEU</i>	<p>Coding Exercises, Review, Questions and Discussion</p> <ul style="list-style-type: none"> • Wrap Up
3:30	Adjourn

4.0 Biographical Sketches of ICD-10 Faculty

The Indian Health Service (IHS) Office of Information Technology (OIT), ICD-10 Program team members and sub-groups worked diligently to prepare this training as an aspect of preparing for the ICD-10 transition. We hope that you find this overview of ICD-10 instructional and that it motivates you to continue training on ICD-10.

The ICD-10 National Team conveys its sincere thanks to all the members and guests of the ICD-10 Training sub-group. Without these dedicated workgroup members the “Have No Fear, ICD-10 is Here” course would not be possible.

DaJuanna Bissonette, RHIT, CPC, AHIMA Approved ICD-10-CM/PCS Trainer Phoenix Area HIM Consultant

DaJuanna has been credentialed as a Registered Health Information Technician (RHIT) since 1995 and a Certified Professional Coder (CPC) since 2001. She has recently attended the AHIMA Train the Trainer for ICD-10-CM & PCS in August 2012 and became an AHIMA Approved Trainer. DaJuanna has been with IHS for 17 years and has worked in hospitals within the Aberdeen Area and at the Phoenix Area Office. Her work experience includes Inpatient Coding, Day Surgery Coding, Observation Coding, Outpatient Coding, Coding Supervisor, HIM Administrator, Program Analyst and currently serves as the HIM Consultant for the Phoenix Area. DaJuanna is an enrolled member of the Oglala Sioux Tribe, which is located on the Pine Ridge Indian Reservation in Pine Ridge, SD.

Linda Butler, CCS-P, AHIMA-Approved ICD-10-CM/PCS Trainer Claremore Indian Hospital, Coder and Coding Trainer

Linda started her coding career in 1998 as an outpatient coder. She has been a credentialed Certified Coding Specialist—Physician based since 2001. She recently attended the AHIMA Train-the-Trainer for ICD-10-CM/PCS in June 2012 and is now an AHIMA-Approved trainer. Linda has been with Claremore Indian Hospital for 15 years. Her coding experience encompasses inpatient, observation and day surgery coding as well as outpatient. Linda is a member of the Cherokee Tribe of Oklahoma.

Janice “Jan” Chase, RHIT

OIT - Tucson, HIM Practice Management and ICD-10 Federal Lead

Jan is an IT Specialist for the Resource Patient Management System (RPMS), Health Information Management (HIM), Practice Management applications, and the ICD-10 Federal Lead for the IHS Office of Information Technology (OIT). Prior to her position with OIT in December 2009, Jan worked for the Tucson Indian Health Service in various Headquarters, Area, and Service Unit positions for 17 years. Her IHS career includes Contract Health Service, Management Development, HIM Supervision, Performance Improvement, Privacy, and Compliance. Jan also was the past Tucson Area Health Record Consultant and National HIM Program Co-Lead and served on various IHS workgroups. She is a member of the American Health Information Management Association (AHIMA) and Health Information Management Association of Arizona (HIMA of AZ). Jan is a member of the Gros-Ventre Tribe of Montana with paternal ties to the Mandan Tribe of North Dakota.

**Deanna Dennis, CPC, CPC-H, CPC-I, AHIMA-Approved ICD-10-CM/PCS Trainer
Billings Area Business Office Manager and ICD-10 Area Coordinator**

Ms. Dennis is credentialed as a CPC since 1999 and a PMCC Instructor through the American Academy of Professional Coders (AAPC) since 2006. Deanna has successfully completed the AHIMA-approved online course for ICD-10 training through American Institute of Healthcare Compliance certification in “Mastering ICD-10-CM Train the Trainer” exam. Deanna has a total of 36 years of experience in IHS with work experiences including pharmacy technician, medical records, lab/radiology, Contract Health Services, certified Dental Assistant Expanded Functions/Prevention, and inpatient and outpatient transcriptionist. For the past 20 years, Deanna has worked in the Business Office as a billing technician, Manager, Area Coding/Billing Specialist and currently as Billings Area Business Office Manager/Coordinator. Deanna is a member of various IHS Technical Advisory Groups in RPMS software applications. Deanna is an enrolled member of the Crow Tribe of Montana.

**Pamela Gone CPC, AHIMA-Approved ICD-10-CM/PCS Trainer
Fort Belknap Health Center-Billings Area
HIM Manger and ICD-10 Service Unit Coordinator**

Ms. Gone has worked for the IHS for 13 years, starting in the business office and for the past 9 years in medical records at Fort Belknap. She also worked for the Bristol Bay Area Health Corporation in Dillingham, Alaska as a Coding Manager and Clinical Applications Coordinator. She is a Certified Coder through the American Academy of Professional Coders and attended the AHIMA training for ICD-10 trainers. Pamela also serves as one of the service unit Meaningful Use Coordinators. Pamela is an enrolled member of the Gros-Ventre (White Clay) Tribe of Montana.

**Patricia Gowan, MPA, RHIA, CPC, AHIMA-Approved ICD-10-CM/PCS Trainer
United South and Eastern Tribes (USET) HIM & MU Consultant**

Ms. Gowan is currently the Health Information Management (HIM) Meaningful Use Consultant for the United South & Eastern Tribes Regional Extension Center (USET REC), Nashville, TN. She worked for the Indian Health Service for 23 years and retired in August 2010. Her past experiences include national Lead HIM Consultant, Phoenix Area HIM Consultant, HIM Director, Whiteriver Service Unit, and Assistant HIM Director, Phoenix Indian Medical Center. She received her graduate degree at Northern Arizona University, Flagstaff, AZ and undergraduate degree at Carroll College, Helena, MT. She is a member of the American Health Information Management Association (AHIMA), Arizona Health Information Management Association (AzHIMA), and the American Academy of Professional Coders (AAPC). Pat is a member of the Yavapai-Apache Nation with paternal ties to the Hopi Tribe.

**Rebecca Herrera, CCS, CCS-P, CPC, AHIMA-Approved ICD-10-CM/PCS Trainer
Contractor with CAS Severn**

Ms. Herrera has over 12 years of experience in medical records and the healthcare industry. Rebecca has worked as a coding auditor, abstract coder, HCC analyst, and medical records clerk in the private sector. Rebecca started in August 2009 with IHS, as a contractor, in a Business Systems Analyst role. She supports Practice Management on the following projects: ICD-10 CM/PCS training, Code Set Versioning, Patient Merge, PIMS, ADT, ROI, BMW, and Clinical Scheduling GUI implementation and training. In addition to being certified as a Certified Coding Specialist, Certified Coding Specialist –Physician Based, and Certified Professional Coder, Rebecca is also an AHIMA-approved ICD-10 CM/PCS Trainer.

5.0 Contact Information

Janice "Jan" Chase, RHIT

OIT - Tucson, HIM Practice Management and ICD-10 Federal Lead

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