



Attention
Procrastinators!

**There's still time
for a successful
ICD-10 transition!**

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Your Presenters

- M. Alexandra Johnson, FACHE
 - 20 years' experience in managed care and practice management, specializing in capitation/risk
 - Ran wholly-owned centers for Humana and later, a large MSO
 - Adjunct professor at Florida Atlantic University
 - Former President of South Florida Healthcare Executive Forum (2006 & 2011); current ACHE Regent for Florida - Eastern

Your Presenters

- Wilma N. Torres, CPC
 - Over 30 years' experience in Internal Medicine & Cardiology
 - Physician coding, billing & business management within the Harvard system
 - Full-time consultant since 2000
 - Former President of Weston Florida Local Chapter of American Academy of Professional Coders (2010 & 2007)

Objectives

- Evaluate ICD-10-CM's major impacts
- Discuss transition steps
- Explore new timeline for implementation

Ground Rules

- “Dumb” questions don't exist
- Ask WHEN the question arises
- Stop us if we're going too fast

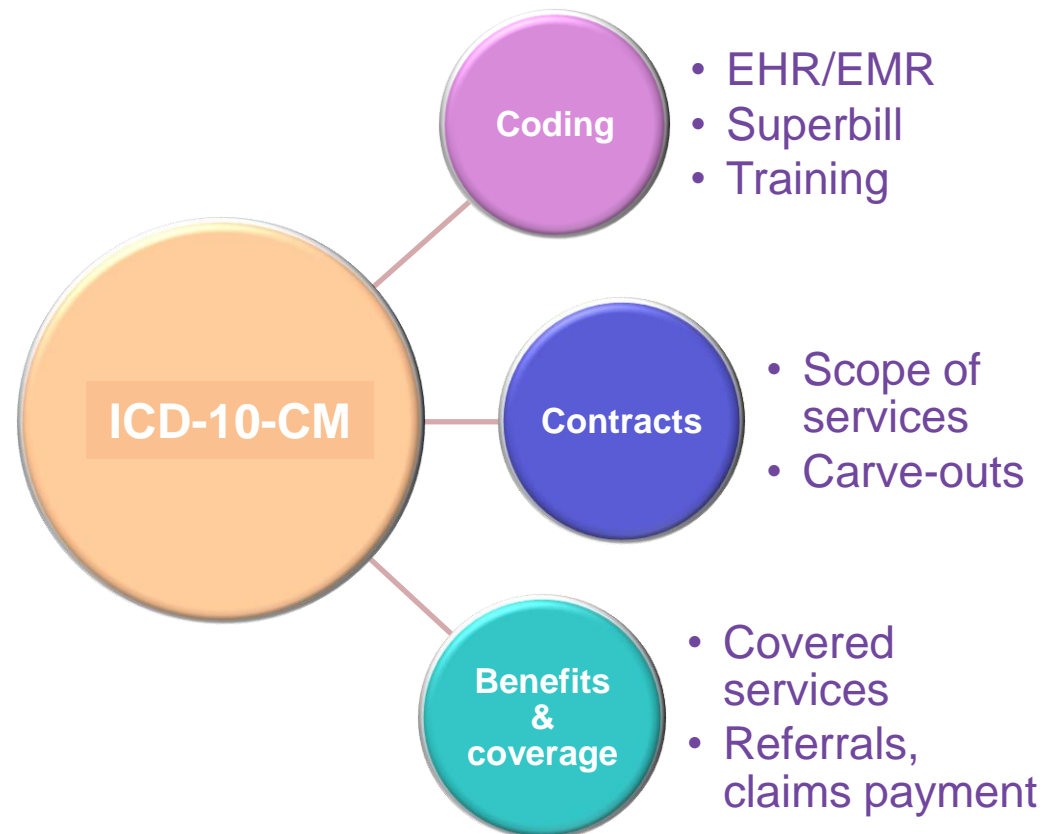


Why ICD-10 and Why Now?

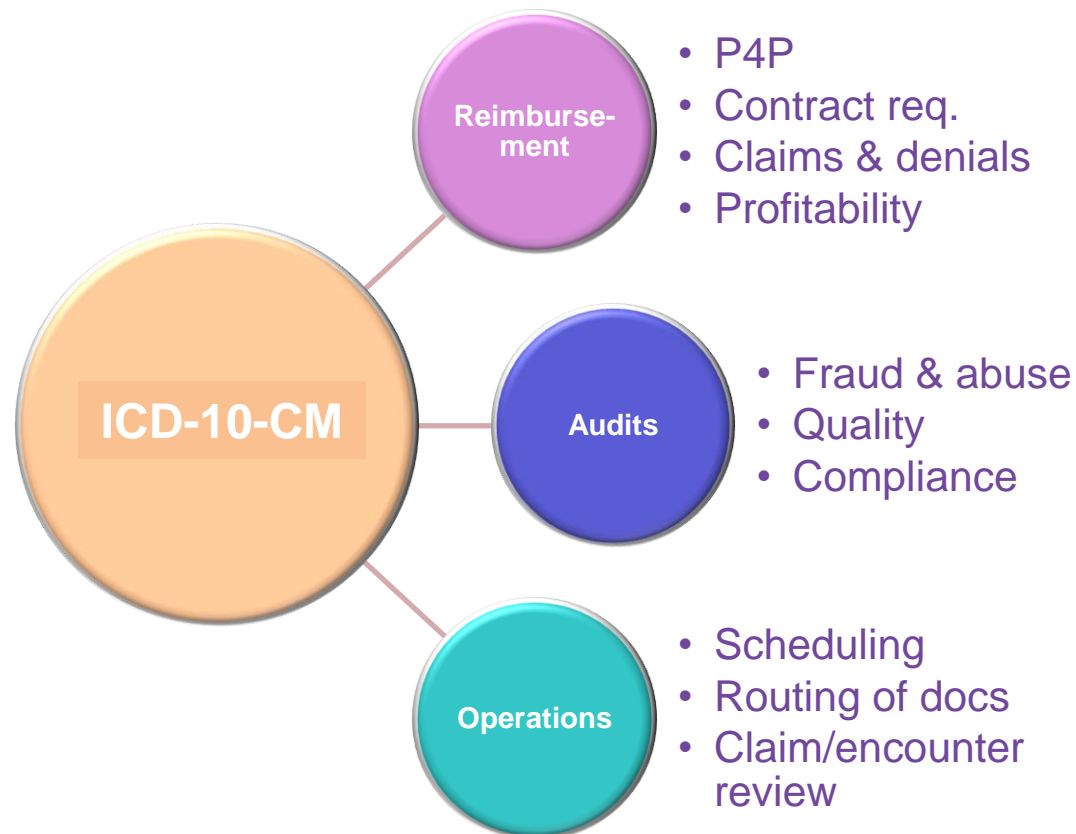
- ICD-9 is limited & outdated
 - Inconsistent & lacks specificity, detail
 - Results in limited health information
- ICD-10 is robust
 - Staggering specificity
 - Will improve claims adjudication
 - Codes “tell a story”
- USA is last



Impact of ICD-10



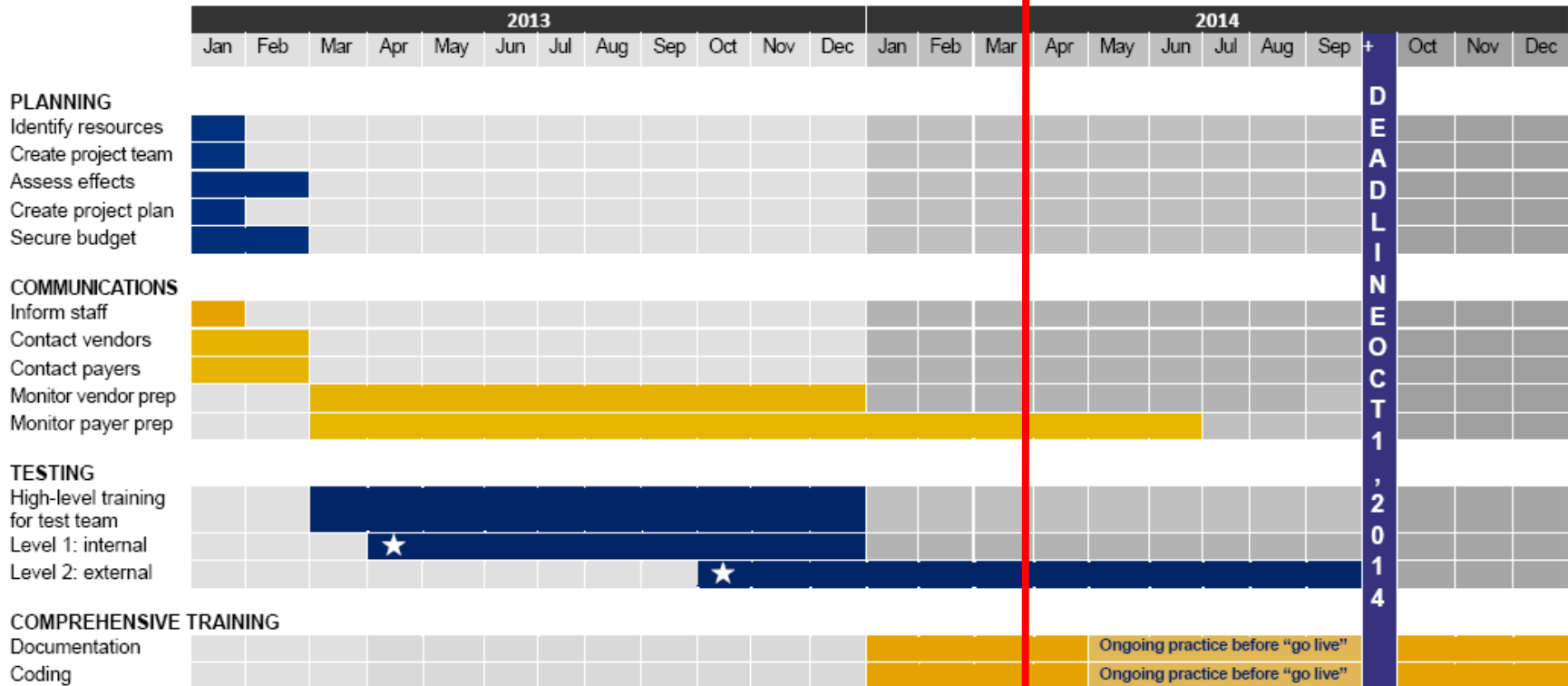
Impact of ICD-10 *(continued)*



CMS' ICD-10 Timeline

ICD-10 Timeline for Small-Medium Practices at a Glance

You are here



MGMA Reports...

- Less than 10% practices made signif progress
- 80%+ report PM software upgrade needed
- 82% report EHR upgrade needed
- Appr. half believe upgrade costs incl in contract
- Estimated upgrade costs
 - \$11,500 per FTE physician for PMS
 - \$12,885 per FTE physician for EHR

MGMA Reports... *(continued)*

- Testing is very behind
 - Only 8.2% have begun testing with EHR vendor
 - ~ 10% have begun testing with PMS vendor
 - 60% have not tested with major plans
 - 50% have not begun testing with clearinghouse

ICD-10 Implementation WILL NOT be delayed again

Readiness Components

Vendors

Trading
Partners

Coding &
Operations

Training

Revised Timeline

| | Next week | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
|--------------------------------|-----------|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Vendors | | | | | | | | | | |
| Identify | LIST | | | | | | | | | |
| Contact | | | | | | | | | | |
| Assess readiness | | | | | | | | | | |
| Trading partners | | | | | | | | | | |
| Identify (prioritize) | LIST | | | | | | | | | |
| Contact | | | | | | | | | | |
| Assess readiness | | | | | | | | | | |
| External testing | | | | | | | | | | |
| Coding & Operations | | | | | | | | | | |
| Identify top codes | LIST | | | | | | | | | |
| Research guidelines | | | | | | | | | | |
| Assess documentation | | | | | | | | | | |
| Identify processes | LIST | | | | | | | | | |
| Training | | | | | | | | | | |
| Identify staff groups | LIST | | | | | | | | | |
| Prioritize groups | | | | | | | | | | |
| Assess knowledge | | | | | | | | | | |
| Educate | | | | | | | | | | |
| Monitor | | | | | | | | | | |
| Remediate | | | | | | | | | | |

Let's define terms...



Vendors

| | Next week | Apr | May | Jun | Jul | Aug | Sep | Oct |
|------------------|-----------|-----|-----|-----|-----|-----|-----|-----|
| Vendors | | | | | | | | |
| Identify | LIST | | | | | | | |
| Contact | | | | | | | | |
| Assess readiness | | | | | | | | |

- Identify
 - PMS, EMR, e-prescribe, lab, coding software, etc.
- Contact
 - Assess current systems, updates needed
 - Ask questions about software installation & testing
- Assess readiness
 - Continuous until complete

Become
M54.2

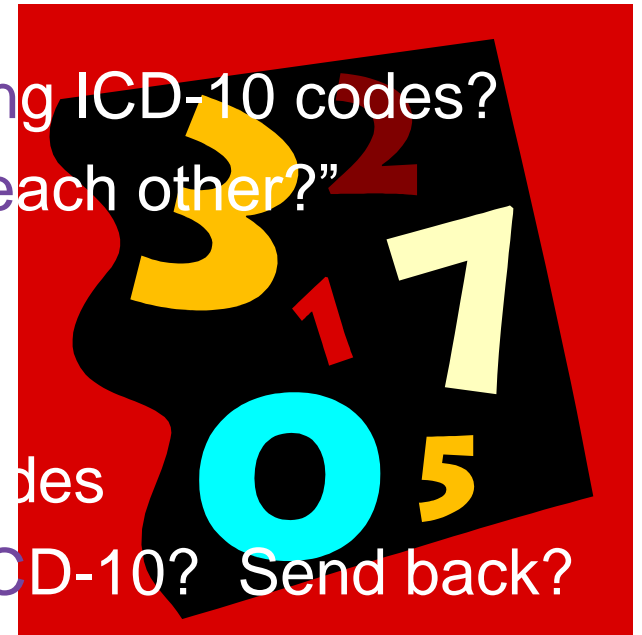
Trading Partners

| | Next week | Apr | May | Jun | Jul | Aug | Sep | Oct |
|-------------------------|-----------|-----|-----|-----|-----|-----|-----|-----|
| Trading partners | | | | | | | | |
| Identify (prioritize) | LIST | | | | | | | |
| Contact | | | | | | | | |
| Assess readiness | | | | | | | | |
| External testing | | | | | | | | |

- Identify
 - Billing co, CH, payors/health plans
- Prioritize by volume/value
- Contact payors
 - Ask about benefit & reimbursement changes
 - GEMs and impact of unspecified codes
 - How will changes be published?

A Word About Testing

- Internal testing
 - Are all systems capable of using ICD-10 codes?
 - Do disparate systems “talk to each other?”
 - Pay attention to data integrity
- External testing
 - “Native” coding vs. mapped codes
 - Can outside sources receive ICD-10? Send back?



Coding

| | Next week | Apr | May | Jun | Jul | Aug | Sep | Oct |
|--------------------------------|-----------|-----|-----|-----|-----|-----|-----|-----|
| Coding & Operations | | | | | | | | |
| Identify top codes | LIST | | | | | | | |
| Research guidelines | | | | | | | | |
| Assess documentation | | | | | | | | |
| Identify processes | LIST | | | | | | | |

- Identify
 - Top 50 ICD-9 codes by frequency
- Research guidelines
 - ICD-10 book, CMS LCD & NCD
- Assess readiness
 - Review documentation against guidelines
- Identify & review operational processes

Training

| | Next week | Apr | May | Jun | Jul | Aug | Sep | Oct |
|-----------------------|-----------|-----|-----|-----|-----|-----|-----|-----|
| Training | | | | | | | | |
| Identify staff groups | LIST | | | | | | | |
| Prioritize groups | | | | | | | | |
| Assess knowledge | | | | | | | | |
| Educate | | | | | | | | |
| Monitor | | | | | | | | |
| Remediate | | | | | | | | |

- Identify
 - Positions & type of training needed
- Prioritize & assess knowledge
 - Use documentation assessment
- Educate
 - Conduct training by position & specialty
- Monitor & Remediate
 - Continuous until well after implementation date

Documentation

- Very specific documentation of:
 - Co-morbidities
 - Etiology/causation
 - Complications
 - Detailed anatomical location
 - Sequelae
 - Degree of functional impairment
 - Biologic & chemical agents
 - Phase/stage
 - Lymph node involvement
 - Lateralization
 - Localization
 - Procedure-related
 - Implant-related
 - Age-related
 - Joint involvement

Every note

- Should tell a complete story of patient's visit & clinician's assessment
- Stands alone
 - No need to consult problem or med list, test results, etc

Contingencies

1. Secure lines of credit & loans
 - Payment disruptions of three to six months
 - “Inversely proportional to preparation”
2. **Plan B** for Billing
 - Secure billing company just in case
 - Make sure they do coding



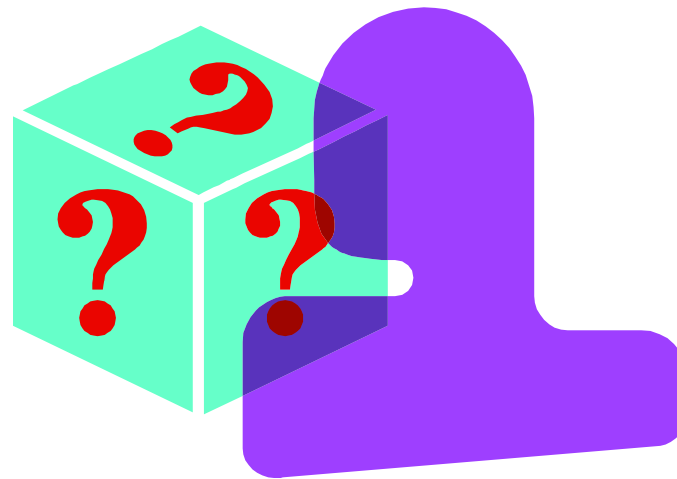
Preparing for ICD-10

Who?

- Do-it-yourself
- External assistance

How?

- On-site
- Off-site
- Outsource



Questions?

Parting Thoughts



RAFFLE
ICD-10-CM Beyond
the Basics Webinar
(one hour)

- Join our email list
 - Newsletters about ICD-10, MRA & practice mgmt (www.askCCG.com)
 - Follow us on Twitter: **@askccg**

THANK YOU!

