

ICD-10CM Myths

- My software vendor is responsible for the changes
- My employees are responsible for the changes
- It won't require many operational changes
- The physicians don't have to be involved
- We don't need to budget for ICD-10-CM
- We have plenty of time
- We are ready now

Official guidelines: www.cdc.gov/nchs/data/icd9/draft_i10guideln.pdf

So, who needs training?

In addition to your Coding staff:

- Information technology
- Billing and/or finance
- Compliance staff
- Information systems
- Clinicians (Clients)
- Management - AND MANY *MANY*MORE!

Step 1: Organize and Implementation Effort

Look at all areas that will impact the company and identify each one that will be affected:

- Billing System
- Other financial systems (Practice Mgmt Systems)
- Super bills utilized by clients?
- Plan for meetings with individual clients to discuss progress and potential barriers of implementation

Step 2: Establish Your Communication Plan

Internal plan:

- Communication methods for your staff
- Meetings
- Email
- Intranet?
- Other?

Step 3: Conduct Impact Analysis

What resources do you require for implementation?
What will be the potential costs be?

System inventory

- Your control
- Vendor control

Time to implement new systems?

- EMR (clients)
- New billing system?

Training needs?

- Internally
- Externally
- Review all client arrangements and needs
- Who is responsible for coding??

Step 4: Contact System Vendors

- Are they prepared for the move to ICD-10?
- Will they be ready for 5010 on 1/1/12?
- What costs will be involved with the transition?
- What are their implementation plans?
- Will we need new or enhanced software/hardware?

Step 5: Estimate Budget

MGMA estimates that the average cost of moving to ICD-10 for a three-physician practice will be **\$84,000**.

Of course this will depend on:

- Size
- Current technology
- Scope of service

Step 6: Implementation Planning

Introduce the ICD-10-CM concept:

- Select a champion to:
 - Lead cross-functional team
 - Monitor updates
 - Coordinate education
 - Troubleshoot implementation
 - Allocate budget
- Review current coding processes
- Revise paper documents
- Work with software vendors

Step 7: Develop Training Plan

Who specifically needs training?

- Physicians (client staff)
- Coders
- Billing staff
- Administrative Staff
- Clinical Staff
- How many hours should be allocated for each position type?
- What resources are available, needed, etc.?

Set timeframes for training:

- Will you need to utilize temps, outsourcing and/or overtime during the training period?
- What about ongoing support/training after implementation?

Step 8: Analyze Business Processes

How and where is ICD-9-CM utilized in your organization now?

- Assist your clients with a review of their medical policies and contracts
- Identify changes that will need to occur prior to Implementation

Step 9: Education and Training

- Ideally perform education in 2nd and 3rd quarters of 2013
- Need to be realistic in time allocation to ensure all employees, clients, etc. are trained

Step 10: Policy Change Development

As soon as available:

- Review new medical necessity policies
- Identify opportunities to improve internal processes
- Identify opportunities to improve client issues
- Documentation problems
- Data capture concerns
- Etc.

Step 11: Deployment of Code

Once you have ICD-10 in your system:

- Test for accuracy
- Ensure successful integration
- Customize interfaces, etc. as needed
- Test systems with clearinghouses, payors, etc.

Step 12: Implementation Compliance

- Ensure compliance with implementation date of October 1, 2013
- Monitor on an ongoing basis to ensure accuracy and compliance

DON'T WAIT: Download and read AHIMA's "ICD-10 Preparation Checklist"

www.ahima.org/ICD10

<http://www.ahima.org/downloads/pdfs/resources/checklist.pdf>