American Hospital Association

Collective Strategy for ICD-10-CM & ICD-10-PCS Implementation
Why ICD-10-CM Needs to be an Integral Part of any Future HIT Strategy

- ICD-10 provides enormous opportunities for improving documentation processes for health records
- Importance of a better coding classification system:
  - Integral to HIT Strategy - especially the EHR
  - Provides refinement to financial/reimbursement models
  - Improving clinical specificity results in improvements to patient safety functions
  - Improves understanding of disease and costs and allows providers and others to improve on their delivery
  - International Disease Surveillance – no longer a national effort
  - Successful deployment in other countries – with minimal disruptions
- Qualitative and quantitative research from Canada and Australia point to real-world experience and positive results – especially for monitoring performance and quality of care
Planning versus Waiting

- Waiting only prolongs the inevitable – when the decision is made to adopt ICD-10, it will only create a climate of simply focusing on getting implementation done
- Collective planning for the adoption of ICD-10 enables everyone to take advantage of opportunities provided with conversion
  - Establishing a date certain - with sufficient lead-time
  - Benefits of collective planning:
    - Helps all health care organizations better manage their funding models
    - Allows health care organizations to integrate conversion with their strategic goals around HIT
      - Easier to focus on achieving benefits that can be derived (as mentioned in earlier slide)
ICD-10 Unlocks the Benefits of EHR

• Information technology coupled with the adoption of ICD-10 becomes a critical tool to improve the quality, effectiveness, and delivery of health care services

• ICD-10 provides for more precise clinical coding
  – Better precision in the classification system requires front-end documentation of medical information in order for the coder to arrive at the appropriate assignment of the clinical code

• Current ICD-9 classification system is ambiguous and often requires creation of elaborate IT designs in order to provide other supporting documentation to justify the code used – often occurs at the back-end (resulting in costly back-end processes)
ICD-10 as an Enabler

- Improves clinical practice – through improved understanding of the disease and resources used for treatment - it enables the creation of systems that can reduce medical errors and duplication of work
- Better precision in clinical coding
  - Makes it easier to develop EHR components that can interconnect meaningful information with clinicians and others
  - Encourages the development of better information for the consumer (ability to better refine, outcomes, cost, and other resources measured against disease and illness)
  - Improves health delivery – timely & accurate information that can be easily aggregated
Importance of a Collective Strategy

• Collective approach for managing ICD-10 conversion – involving: providers, health plans, and vendors
  – Take advantage of lead time – create proactive approach
  – Find common objectives and goals
• Identify and address implementation issues
  – Educational programs
  – Awareness Efforts
  – Software tools – encouraging nationally accepted crosswalks and mapping software to sustain “business as usual” during transition
• Relies more on sharing of effort and resources
Why ICD-9 is a Problem

• Increasingly unable to address classification of new diseases, illnesses, or procedures
  – Many classification categories/sections within ICD-9 are already full - making it difficult to logically assign appropriate code
  – Inability to appropriately handle rapid growth and use of new medical technologies

• Lacks precision due to constraints in available numbers and format design (For example: Code 99.29 Injection or infusion of other therapeutic or prophylactic substance – widely used to report a wide variety of procedures - such as:
  – Injection of epinephrine to cauterize a rectal ulcer
  – Infusion of a narcotic into a pump for pain relief
  – Insertion of an implant in the eye for slow release of antiviral drug
  – Injection into the uterine artery to treat fibroid
Why ICD-9 is a Problem (cont’d)

• Creates difficulty for coders to accurately determine the appropriate code to apply
• Ambiguity creates problems for health plans who often suspend the claim until additional documentation is forthcoming
  – Costly & inefficient handling (claim is handled multiple times; creates anxiety and additional hassles for patients)
  – Inability to aggregate like procedures and services
• THE ICD-9 PROBLEM DOES NOT GO AWAY – WILL ONLY GET WORSE OVER TIME
Collective Approach: A Strategic Framework

• Again, take advantage of this time – seek a collective strategy (to transition to ICD-10) prior to proposed rule
• Focus the attention on how best to successfully manage the transition
  – Use the next few months to establish dialogue with stakeholders to assess the magnitude of the transition effort and obstacles to overcome
  – Define the objectives for the framework necessary to support transition to ICD-10 and overcome obstacles (e.g., least disruptive; cost effective use of resources)
  – Identify common transition work processes that would benefit from collective approach (training materials, software support, etc.,)
  – Determine acceptable timeline for orchestrating transition
Initial Action Plan

• Form collective stake holder's group
• Identify three or four processes that each group would benefit from ICD-10 transition
  – Providers
  – Health Plans
  – Vendors
• Determine where stakeholders have:
  – Common transition support items – ranking these in terms of importance
  – Obstacles that stand in the way of achieving these goals
    • Establish workgroups to find solutions to obstacles
• Determine acceptable timeline for implementation and transition