

ICD-10: Poise or Panic?

After a series of delays and postponements, ICD-10 will be implemented on October 1, 2015. Even the most prepared medical practices are still training, testing and modifying forms.

Shelly Bangert, Director, Revenue Cycle Management at Hawthorn, says preparation is the key to success. “We’ve been working directly with our clients to make sure they’re prepared, but we do hear about organizations that are starting to panic a bit. In fact, just this summer CMS posted an ICD-10 Quick Start Guide that offers tips for planning and preparation.”

“One useful tip,” Bangert says, “is to identify your top 25 ICD-9 codes in terms of frequency. Then you can train your staff to learn the corresponding ICD-10 codes they will be using most frequently.”

The Quick Start Guide is readily available as a printable pdf on the CMS website: <http://www.cms.gov/Medicare/Coding/ICD10/Downloads/ICD10QuickStartGuide20150622.pdf>. The guide is organized in five steps: 1) Make a Plan, 2) Train Your Staff, 3) Update Your Processes, 4) Talk to Your Vendors and Health

Plans, and 5) Test Your Systems and Processes.

Beth Potratz, Coding Manager at Hawthorn and a member of the ICD-10 Team, suggests that step 3 can be critical. “It’s important to remember,” Potratz says, “that codes are used for multiple processes—for electronic billing, paper claims, super-bills and CMS 1500 forms, for example. That means all forms have to be updated prior to October first.”

Potratz believes documentation will be the biggest challenge with ICD-10. “Physicians are simply required to supply more detail with ICD-10 codes,” Potratz says. “They need to be more specific. There are codes for laterality, for example, which is left side or right side. There are coding details that capture information about initial encounters or subsequent encounters. The new codes will also capture much more detail about types of fractures. Claims that lack these codes will simply be denied, so it’s important to learn the documentation details.”

Potratz offered one more comment about referring physicians. “If the claim is from a referring or ordering physician then they have to document everything properly, because that detail can affect everyone’s reimbursements.”

In July the Centers for Medicare & Medicaid Services (CMS) issued a guidance statement saying that for **twelve months** following October 1, 2015 they will not deny claims based solely on the specificity of the ICD-10 diagnosis code, as long as physicians use a valid code from the correct family. According to Ms. Bangert, physicians must still be prepared. "This recent guidance statement doesn't really change the fact that valid ICD-10 codes are required for all claims starting on October first."

Bangert went on to say that practices should consider benchmarking denial rates in advance. "We expect denial rates will increase generally, but that doesn't mean denials will necessarily go up for all practices. There's really only one way to measure results for a given practice, and that's to compare denials before and after implementation. That's why it's a good idea to benchmark your denial rates in advance for all your payers."

Hawthorn's ICD-10 team member Shellee Thurman feels that most payers will be ready but stated, "Of the big players, Cigna is the only insurance to date that has announced they will only be testing internally and no external testing will be done." Dan Caldera, another Hawthorn ICD-10 member is very confident that clients' IT departments are ready to go as well.

Hawthorn's managers suggest downloading the CMS Quick Start Guide and working through the planning steps. Preparation can be the difference between an ICD-10 implementation that is poised instead of panicked.

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Team Development Workshop

On June 9 Hawthorn sponsored a half day of leadership and communication training for ten staff members and managers at headquarters. The training was delivered by Stylus Communication, and was a refresher course for a full day workshop delivered in 2014.

Sherry Hahn, Radiology Team Lead, participated, and she reported positive results. "It was great to get a refresher," Hahn said. "I had just been promoted to team lead when we had the workshop last year. I had a little bit different perspective this year, because I've seen firsthand how the skills can improve communication with our daily contacts." The curriculum focuses on managers' roles as leaders, learners, coaches and communicators, and the concepts apply to conflict resolution, problem solving, employee evaluations and continuous improvement.

Employee Spot Lights

Reach for the Stars:

April, May, June 2015 Winners:

Teresa H., Cay D., Dana M., Linda H., & Jody H.

Q2 2015 Winner: Cay Dalton



Addressing Complexity with Certainty