Prepare now for ICD-10

Oct 1, 2013 is the compliance date for implementation of the International Classification of Diseases, 10th Revision, Clinical Modification/Procedure Coding System (ICD-10-CM/PCS) for all covered entities. ICD-10 replaces the 9th Revision currently being used nationally.

Entities covered by HIPAA must make the transition to ICD-10 for HIPAA-covered transactions. BCNEPA will convert to ICD-10 for all electronic transactions, paper claims, and communications.

ICD-10-CM/PCS consists of two parts:

- ICD-10-CM is for diagnosis coding of all physician and facility services. It replaces ICD-9-CM, Volumes 1 and 2.

ICD-10-CM was developed for use in all U.S. health care settings. Diagnosis coding under ICD-10-CM uses 3 to 7 digits instead of the 3 to 5 digits used with ICD-9-CM, but the format of the code sets is similar. The number of codes increases from approximately 13,000 to 68,000.

ICD-10-PCS was developed for use in inpatient hospital settings. ICD-10-PCS uses 7 alphanumeric digits instead of the 3 or 4 numeric digits used under ICD-9-CM procedure coding. Coding under ICD-10-PCS is much more specific and substantially different from the ICD-9-CM procedure coding. The number of codes increases from approximately 3000 to 72,000.

How to prepare!

The transition to ICD-10 may affect many aspects of your office operations. Be proactive by preparing for a smooth transition to ICD-10 so that you’re ready by the Oct. 1, 2013 compliance deadline. Here are some steps to help you begin your preparation:

- Identify your current systems and work processes that use ICD-9 codes. This could include clinical documentation, encounter forms or superbills, practice management system, electronic health record system, contracts, and public health and quality reporting protocols.

- Identify the ICD-9 codes that you use most often. The total number of codes for ICD-10 can be overwhelming. However, by identifying the codes you use most often, it may be easier to determine, prepare, and minimize the impacts to your operation.

- Contact your practice management system vendor about accommodations for Version 5010 and how to establish a comprehensive strategy to successfully make the transition leading up to the Oct. 1, 2013 deadline.

- Discuss implementation plans with your clearinghouses, billing services, and practice management software vendor to ensure a smooth transition.

- Assess staff training needs. There are many training opportunities and materials available through professional associations, online courses, Webinars, and onsite training. Although coding professionals recommend that training take place approximately six months prior to the Oct. 1, 2013 compliance date, there is much preparation required before that training.

- Budget time and costs related to ICD-10 implementation, including expenses for system changes, resource materials, and training.
• Talk to your clearinghouse and billing services about their plans for ICD-10 compliance and when they will be ready to test for the transition.

• Visit the Centers for Medicare and Medicaid Services (CMS) web site at www.cms.gov for more information about the ICD-10 transition.

BCNEPA will continue to provide regular updates via our Provider Bulletin on the status of our ICD-10 transition and implementation. Please check back for further updates on implementation timelines and general provider updates. Please work with your vendor/clearinghouse and share all pertinent ICD-10 information accordingly to ensure your claim submission software and processes are ready by Oct 1, 2013.