



## Urology Coding Alert

### ICD-10: Move Beyond Implementation, But Don't Stop Training

**Continue to stress coder/provider cooperation for success.**

While you can breathe a sigh of relief that the looming ICD-10 implementation date has come and gone, and the healthcare reimbursement system didn't come to a standstill, you shouldn't stop growing your ICD-10 know-how. You'll need to continue your training and improve your ICD-10 coding accuracy and comfort.

"Nobody really knows what we're in for because we've never used it [ICD-10]," explains **Maggie M. Mac, CPC, CEMC, CHC, CMM, ICCE**, AHIMA-approved ICD-10 CM/PCS trainer and president of Maggie Mac-Medical Practice Consulting in Clearwater, Fla. Due to ICD-10's newness, coders and providers will have to learn the intricacies of ICD-10 while simultaneously using the new diagnosis coding system.

**Good news:** Read on for some quick tips from a pair of expert ICD-10 trainers to ensure you're ready to continue your ICD-10 growth.

#### Providers Need To Heed Coders' Documentation Advice

In order to be as compliant as possible with ICD-10, coders must constantly communicate with all providers who treat patients — including all physicians, clinical nurses, physician assistants, etc. — to hone their documentation skills.

Ideally, "each of your coders and clinicians will understand all the aspects that go into a claim from the moment a patient walks in the door to the time you receive payment from the payer," says **Alicia Scott, CPC, CPC-I, CRC**, a trainer with Certification Coaching Organization, LLC, in Oceanville, N.J. Obtaining this knowledge will not happen overnight, however. There has to be an information pipeline between coders and providers to get the ICD-10 codes straight.

Coders must be the office professionals that possess "completely comprehensive ICD-10 knowledge" because they are the ones on the front lines of the coding theater, according to Mac.

**Example:** Your physician diagnoses a urinary tract infection. To code properly for ICD-10, physicians can't just write "UTI." There has to be a higher level of specificity; and only coders can know the specifics that payers will expect on the claim. Plus, as the industry immerses itself in ICD-10, we'll be learning and perfecting the dialogue between coder and clinician to know what codes should be used for the conditions being treated.

"The providers need to listen to the coders, who will know more [about ICD-10] than anyone else," says Mac.

#### Keep Learning and Practicing

In order to stay sharp, Mac advises coders keep studying ICD-10 and stay in contact with other coders.

"Coders need to get together to do [ICD-10 coding] right. If you don't know something, ask people that you know have the most ICD-10 knowledge," explains Mac.

Scott agrees, saying that you should use any resource you can find to up your ICD-10 knowledge. Some of the best ways to stay ICD-10 current include:

- Joining online ICD-10 chat forums.
- Holding in-office ICD-10 training seminars.
- Attending off-site ICD-10 conferences.
- Talking with other provider offices, in your specialty and in others, about their ICD-10 experiences.
- Keeping up with ICD-10 guidance from Medicare and private payers.

**Best bet:** "Learn as you go," says Mac. "... I don't think anyone is going to be perfect." Additionally, no one will yet be an expert at submission. This goes for both the provider side as well as the payers.

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