ICD-10-CM: Prepare For ICD-10-CM Now And Avoid Future Headaches

New details improve code selection for non-hospital settings.

The transition from ICD-9-CM to ICD-10-CM is still down the road a bit, but it's coming. Home health coding has been through plenty of changes, but this transition will mean learning a whole new coding language. Take advantage of the delay and begin your preparations for this big change in diagnosis coding.

ICD-10 -- When?

The National Uniform Billing Committee (NUBC) recently voiced its support of the adoption of ICD-10 to replace ICD-9-CM. That's one step closer in the Centers for Medicare & Medicaid Services' plan to propose a regulation to adopt ICD-10 as a Health Insurance Portability and Accountability Act (HIPAA) code set.

While there's still more groundwork to lay, it's not too early to start implementation planning and preparation -- and to take advantage of the extra lead time, says Sue Bowman, RHIA, CCS, director of coding policy and compliance with American Health Information Management Association.

Know These ICD-10 Differences

Many changes in disease classification come along with the growth from ICD-9-CM's fewer than 14,000 codes to ICD-10-CM's more than 120,000. Bowman points out the following differences between the two systems:

• Specificity and detail are greatly expanded in ICD-10-CM.

• ICD-10-CM updates medical terminology and classification of disease to be consistent with medical practice.

• Added detail makes ICD-10-CM more applicable to non-hospital health care encounters -- a plus for coders in other specialty areas such as home health.

• ICD-10-CM adds the ability to describe laterality (affected side of the body), particularly in the neoplasm and injury chapters.

• Codes in ICD-10-CM are all alphanumeric and can be up to seven characters in length. The seventh character, referred to as an extension, is used in some chapters to capture episode of care, such as initial encounter, subsequent encounter, or sequelae, and other additional information.
Change Is Good -- But Scary

There has been so much change in health information management, and the move to ICD-10 is scary because it's so resource-intensive, says Sheri Bernard, CPC, CPC-H, CPC-P, with the American Academy of Professional Coders. While ICD-10-CM is a great coding system, the transition won't be simple. Bernard points out the following factors for your agency to keep in mind:

• Computer systems will need more memory. Your system will need to have the ability to maintain both ICD-9-CM and ICD-10-CM codes during the transition so that you can still work with old claims as you begin submitting new claims with ICD-10 codes.

• There's more room for mix-ups with the alpha-numeric characters in ICD-10-CM. For example, the letter l could look like the numeral 1.

• There will be productivity issues during the transition. Getting to know ICD-10-CM will require training and more knowledge.

• Poor physician documentation will still be a problem. ICD-10's greater specificity requires more details in the medical record. Without a shift in the way doctors document, the switch to ICD-10-CM will be difficult, Bernard predicts.

Here's How You Can Prepare

While you're waiting for the final word on the ICD-10-CM transition, take time to get ready. Here are some things you can do now, Bowman says:

• Educate yourself on the benefits and value of ICD-10-CM.

• Understand the regulatory process for adoption, anticipated implementation timeline and variables affecting the timeline, and the ICD-10 implementation process so you can begin discussions, answer questions and act as a resource for others.

• Learn the structure, organization, and unique features of ICD-10-CM and ICD-10-PCS and gain a moderate level of familiarity with the coding systems by attending educational sessions, audio conferences, convention presentations, local conference presentations, taking online training, reading articles and reviewing ICD-10 materials on the National Center for Health Statistics (NCHS) Web sites, such as the draft ICD-10-CM coding guidelines at http://www.cdc.gov/nchs/about/otheract/icd9/icd10cm.htm.

• Brush up on knowledge of medical terminology, anatomy and physiology, and disease processes.

• Start looking at medical record documentation to see if it needs to be improved to support the detail and specificity in ICD-10-CM. Although there are still unspecified codes in ICD-10-CM, the benefits of improved detail and specificity are lost if you frequently use unspecified codes instead of the more specific codes.

Bonus: If you work on improving documentation now, you can take advantage of the benefits right away. Good documentation has value beyond just code assignment, and if you take steps to make it better now, you'll be better prepared for ICD-10-CM implementation, Bowman says.
Note: These preparation tips come from AHIMA's ICD-10 implementation checklist. You can read the complete checklist, which is targeted at health care organizations, not just coders, here: http://www.ahima.org/icd10/ICD-10PreparationChecklist.mht.