

Office of MaineCare Services: ICD-10 Preparation Outreach to Provider Associations

January 2014



Contents

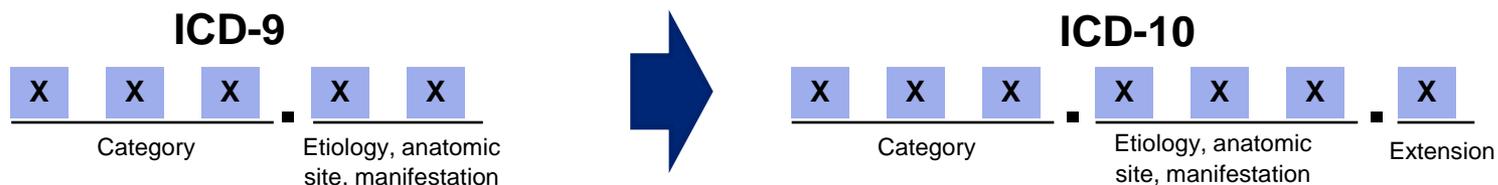
Topic	Page
What is ICD-10?	2
Why Switch to ICD-10?	3
Provider Readiness Survey Results	4
Impacts of ICD-10	9
Example of Coding Change	10
How Providers Can Prepare	11
More Information	12

What is ICD-10?

On **October 1, 2014**, the United States will move from the ICD-9 system to the ICD-10 system. This change will have a significant impact on provider and MaineCare processes.

Key Differences and Changes

- ICD-10 is a much more complex scheme of classifying diseases reflecting recent advances in disease detection and treatment.
- ICD-10 involves fundamental coding changes, from 3-5 digit numeric codes in ICD-9 to 3-7 digit alphanumeric codes in ICD-10.



- ICD-9 codes are used by many providers and payers in business processes and technology systems. Changes may be required to support ICD-10.
 - Providers need to make changes to their processes and technology in order to continue uninterrupted transactions with payers, including MaineCare.
 - MaineCare is currently making changes to its processes and systems to be ready for ICD-10.

Why Switch to ICD-10?

The World Health Organization (WHO) adopted ICD-10 in 1990 and most industrialized countries have since wholly adopted it, except the U.S.

Issues With ICD-9

- Space and structural limitations - ICD-9 has no room for new codes
- Can lead to billing inaccuracy by assigning multiple procedures to a single code
- Lack of detail needed to support emerging needs such as Electronic Health Records (EHRs) and provider Pay for Performance (P4P)
- Does not support mortality reporting and biosurveillance used by the rest of the world
- Poses a barrier to comprehensive global tracking of health data

ICD-10 Transition

Benefits of ICD-10

- Better reflects current medical practices
- Supports patient care coordination across clinical settings
- Allows providers to track time spent on procedures
- Provides more specific data from clinical documentation
- Improves public health reporting and tracking
- Can improve research quality

Provider Survey Results – Overview

The MaineCare ICD-10 Provider Readiness Survey is distributed to all MaineCare providers on a regular basis to help the Office of MaineCare Services (OMS) monitor provider readiness for the federal ICD-10 compliance date of October 1, 2014.

Provider Survey Objectives

- Gauge provider readiness and progress toward the ICD-10 transition
- Target potential providers for trading partner testing
- Identify providers who may have difficulty meeting the compliance date
- Identify trends in provider preparedness for ICD-10
- Determine the most effective methods for communicating with providers about ICD-10

Survey Topics

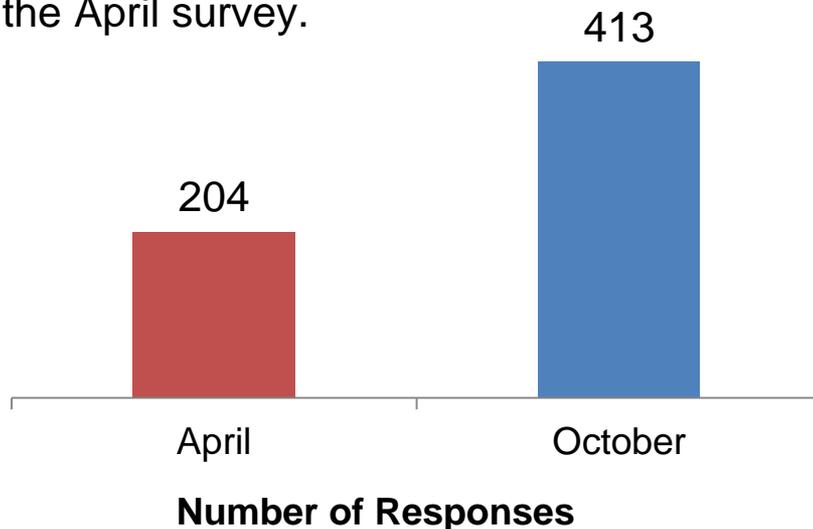
- Provider type
- Plan for addressing ICD-10 transition
- Vendor partner preparation
- Current preparedness phase
- Areas of concern
- Testing readiness
- Risk mitigation plan
- Communication preferences
- Organization contacts
- Assistance or support needs

Provider Survey Results – Summary

Overall results showed that providers progressed along the ICD-10 readiness continuum since the first survey was conducted in April 2013. However, some providers have not begun the process of designing and implementing the changes needed for ICD-10.

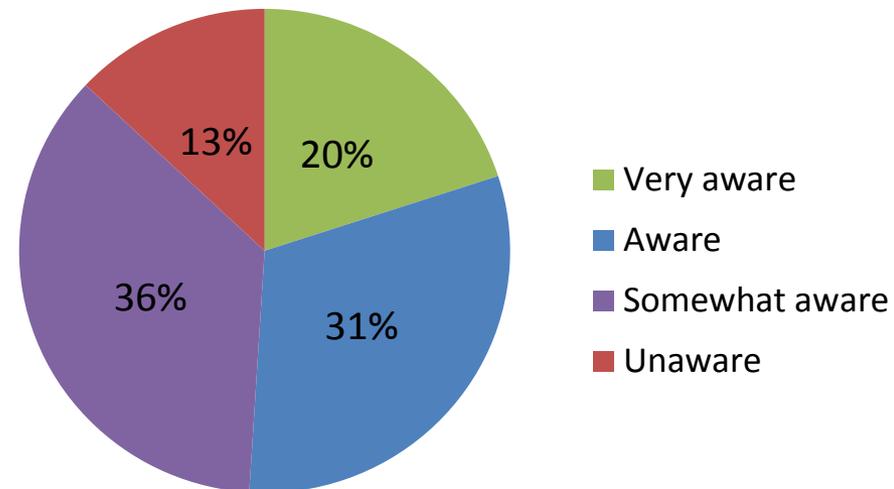
Survey Response

413 responses were received, which is an increase from 204 responses received from the April survey.



Provider Understanding

Most respondents are at least somewhat aware of how ICD-10 will impact them.



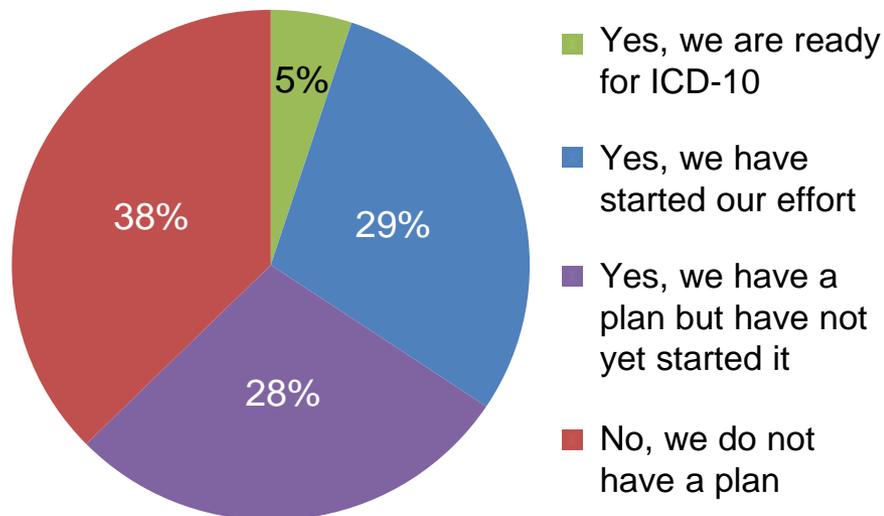
How would you rate your organization's understanding of the impact of the ICD-10 transformation?

Provider Survey Results – Summary (cont’d)

Overall results showed that providers progressed along the ICD-10 readiness continuum since the first survey was conducted in April 2013. However, some providers have not yet begun the process of designing and implementing the changes needed for ICD-10.

Provider Planning

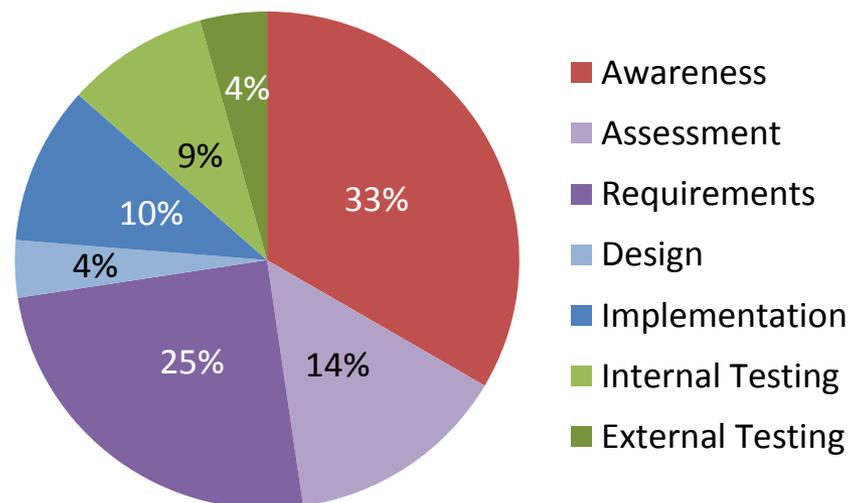
More than half of respondents either have a plan or have started ICD-10 efforts.



Do you have a plan to address the transition to ICD-10?

Provider Readiness

Some respondents are in the beginning phase of gaining awareness of ICD-10; others are actively working to make the required business process and technology changes.

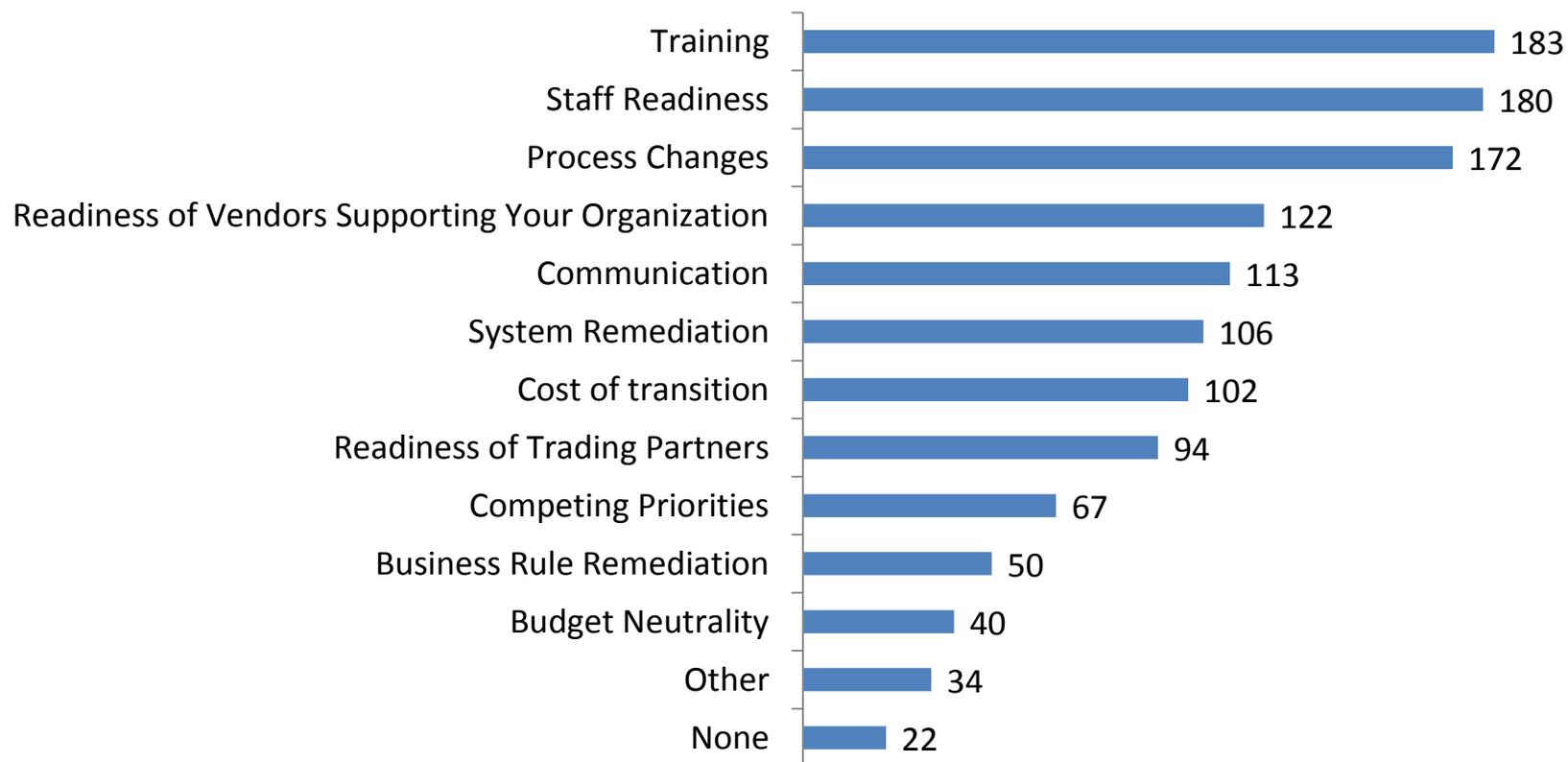


Which phase best describes the current preparedness of your organization for ICD-10?

Provider Survey Results – Summary (cont'd)

Respondents are most concerned about training and readiness of their staff, followed by business process changes. Some providers indicated they are unsure about the support they may need from MaineCare; others cited training and testing as areas of need.

Provider Concerns



Provider Survey Results- Addressing Survey Findings

MaineCare has developed an action plan to outreach providers and to respond to provider requests for specific information.



Targeted Outreach. MaineCare has initiated outreach to provider groups with low survey response rates to distribute provider-specific information about ICD-10 awareness, readiness, and needs for assistance.



Increasing Provider Awareness. Outreach has been initiated to enlist provider associations in disseminating information about ICD-10 planning and execution, training, and testing.



Provider Readiness. The team will use listserv messages and Remittance Advice (RA) messages to provide ICD-10 planning and implementation information specific to provider types.



Provider Concerns and Needs. MaineCare plans to increase external ICD-10 communication to address the major concerns raised by survey respondents.

Impacts of ICD-10

Many survey respondents indicated that they would benefit from understanding how ICD-10 will impact them. The following information summarizes how ICD-10 may impact most providers.

Replacement of ICD-9 Codes

- The ICD-10 code set is a full replacement of the ICD-9 code set.
- In most cases there is an approximate one-to-one match but not always. One ICD-9 code may correspond to many ICD-10 codes.
- Centers for Medicaid and Medicare Services (CMS) has provided a tool, called General Equivalence Mappings (GEMs) that can assist providers with determining which ICD-10 codes to use.

Billing and Submitting claims

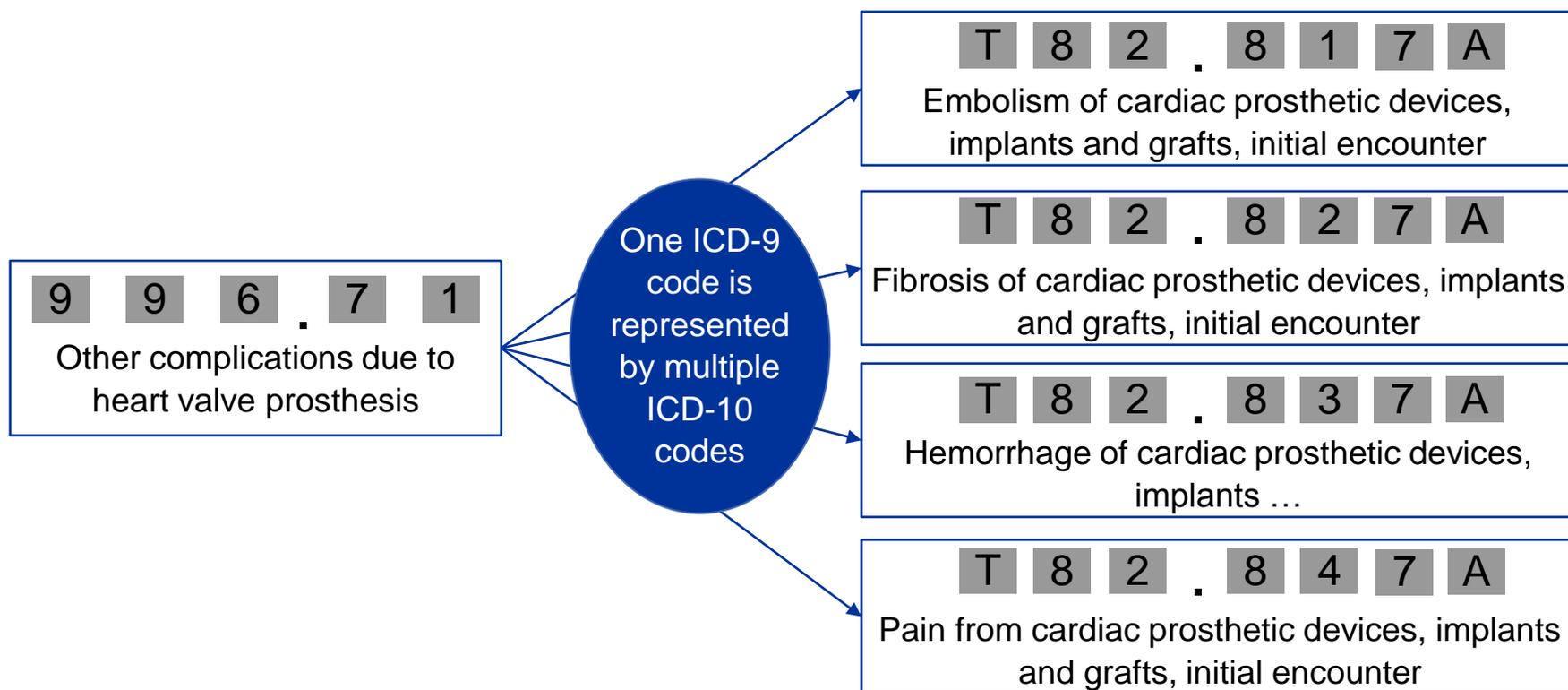
- All discharges and services provided on or after October 1, 2014 must use ICD-10 codes. If ICD-9 codes are submitted for dates of service on or after October 1, 2014, claims will deny.
- Payment amount may be impacted depending on which ICD-10 codes are used for billing.

Operational Changes

- Whereas ICD-9 codes consist of 3-5 digits, ICD-10 codes consist of 3-7 alpha-numeric characters.
- Business processes, systems (e.g., practice management and clinical software, billing systems), and paper and electronic forms may need to be modified to accommodate the new, longer codes.

Example of a Coding Change

The example below shows an ICD-9 code and the new, corresponding ICD-10 codes. ICD-10 codes are much more granular than ICD-9; as a result, the code set is greatly expanded, from ~14,000 diagnoses codes in ICD-9 to ~68,000 codes in ICD-10.



How Providers Can Prepare for the Transition

Providers can prepare for this transition by taking key actions.

Awareness and Assessment

- Obtain ICD-10 code books for code look-up
- Determine which code changes will most affect your practice
- Assess whether any business processes or systems will need to be updated for the ICD-10 code structure
- Assess whether any paper and electronic forms need to be updated
- Assess whether your staff will need training

Requirements and Design

- Identify what changes need to be made to business processes, systems, and paper and electronic forms
- Consider opportunities to make coding more efficient
- Identify who will need what type of training (e.g., coding certification, clinical documentation, etc.)
- Define a timeline to implement changes
- Discuss readiness with vendors, particularly software vendors

Implementation and Testing

- Update business processes, policies, systems, and forms
- Schedule and conduct training for clinicians, office managers, billers, coders, and other key staff
- Confirm vendor readiness
- Test with payers and other business partners

More Information

For more information, please refer to the following resources:

Centers for Medicare and Medicaid Services

ICD-10 Provider Resources Webpage	http://cms.gov/Medicare/Coding/ICD10/ProviderResources.html
General Equivalence Mappings	http://www.cms.gov/Medicare/Coding/ICD10/2013-ICD-10-CM-and-GEMs.html

Office of MaineCare Services

ICD-10 Webpage	http://www.maine.gov/dhhs/oms/icd-10/
ICD-10 Email Box	MaineCareICD10@MolinaHealthCare.com