

## Identify How ICD-10 Will Affect Your Practice

With the transition to ICD-10 getting closer each day, the Centers for Medicare and Medicaid Services (CMS) is asking healthcare workers to begin reviewing their current code use practices. A statement released (11/7/13) gives providers a list of places to begin.

*Here is the full message from Nicole Freeman at EHR Intelligence:*

In order to be fully prepared for the October 1, 2014, ICD-10 transition, you need to know exactly how ICD-10 will affect your practice. Although many people associate coding with submitting claims, in reality, ICD codes are used in a variety of processes within clinical practices, from registration and referrals to billing and payment.

The following is a list of important questions to help you think through where you use ICD codes and how ICD-10 will affect your practice. By making a plan to address these areas now, you can make sure your practice is ready for the ICD-10 transition.

- **Where do you use ICD-9 codes?** Keep a log of everywhere you see and use an ICD-9 code. If the code is on paper, you will need new forms (e.g., patient encounter form, superbill). If the code is entered or displayed in your computer, check with your EHR and/or practice management system vendor to see when your system will be ready for ICD-10 codes.
- **Will you be able to submit claims?** If you use an electronic system for any or all payers, you need to know if it will be able to accommodate the ICD-10 version of diagnoses and hospital inpatient procedures codes. If your billing system has not been upgraded for the current version of HIPAA claims standards—Version 5010—you will not be able to submit claims. Check with your practice management system or software vendor to make sure your claims are in the HIPAA Version 5010 format and that your system or software can include the ICD-10 version of diagnoses and hospital inpatient procedures codes.
- **Will you be able to complete medical records?** If you use any type of electronic health record (EHR) system in your office, you need to know if it will capture ICD-10 codes. Look at how you enter ICD-9 codes (e.g., do you type them in or select from a drop down menu) and talk to your EHR vendor about your system's capabilities for ICD-10. If your EHR system does not capture ICD-10 codes and you use another terminology (SNOMED), you will still need ICD-10 codes to submit claims.
- **How will you code your claims under ICD-10?** If you currently code by look up in ICD-9 books, purchase the ICD-10 code books in early 2014. Take a look at the codes most commonly used in your office and begin developing a list of comparable ICD-10 codes. Alternatively, check your software for an ICD-10 look up functionality.

- **Are there ways to make coding more efficient?** For example, develop a list of your most commonly used ICD-9 codes and become familiar with the ICD-10 codes you will use in the future; and invest in a software program that helps small practices with coding.

#### **Want more information about ICD-10?**

Visit the CMS ICD-10 website, [cms.gov/icd10](http://cms.gov/icd10) for the latest news and resources to help you prepare for the October 1, 2014, deadline. More resources are also available at [HillinSite.com](http://HillinSite.com).