ICD-10 Implementation Hurdles

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Agenda

- **Course Objectives**
  - Performing a gap analysis
  - Developing a business plan for ICD-10 implementation
  - What to expect during the implementation process
  - Clinical documentation issues in ICD-10

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ICD-10-CM Changes

- Multitude of Change
  - expanded injury codes in which ICD-10-CM groups injuries by site of the injury, as opposed to grouping in ICD-9-CM by type of injury or type of wound
  - creation of combination diagnosis/symptom codes, which reduces the number of codes needed to fully describe a condition
  - greater specificity in code assignment (up to seven characters)
  - V and E codes being incorporated into the main classification in ICD-10-CM
  - ICD-10-CM codes being alphanumeric and including all letters except U

Format of ICD-10-CM

- The Tenth Revision (ICD-10) differs from the Ninth Revision (ICD-9) in a number of ways
  - ICD-10 has alphanumeric categories rather than numeric categories
  - Some chapters have been rearranged and titles changed as well as conditions regrouped
  - Almost twice as many categories as ICD-9

Performing a Gap Analysis

Improving Process in Your Practice

- Take a systematic approach
- Make sure there is a need for change
- Don’t bite off more than you can chew
  - Keep time in mind
  - Is change welcomed?

Improving Process in Your Practice

- Focus on I10 Implementation
  - Do a Gap Analysis
  - Find the “cracks” or weakness

Improving Process in Your Practice

- For example:
  - Based on findings you realize there is a documentation issue
    - Prioritize
    - Begin to formulate a game plan for fixes

Policy Changes

- To improve it is necessary to
  - Develop
  - Test
  - Implement

Change Concept

- Figure out a change concept for your practice
  - Plan for the changes and needed fixes
  - Work on those items
  - Review if they are working
  - Take action on any areas found lacking or not improving

Developing a Business Plan

ICD-10 Business Case

- An ICD-10 business case needs to include
  - the business problem
  - the possible solutions
  - the risks and benefits of necessary action
  - the solution recommended

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Useful Business Cases

- The business case helps communicate the objectives of the project
- Allows decision makers to determine their level of acceptance and commitment to moving forward

Analyzing the Processes

- An analysis should be conducted of how ICD-10-CM/PCS will impact the organizations business process.
  - You will be surprised at how far reaching ICD-10 is in your practice

Impacted Areas

- Look hard
  - Clinical
  - Administrative
  - Billing
  - IT
  - Reporting

Other Area of Concerns

- Health Plan Contracts
- Pay for Reporting
- Quality Reporting

The Patient

- Plan for patient education
- Changes in coverage
- Pre-existing prescriptions

Clinical Documentation

- Greater specificity requires more complete documentation
  - Look at existing documentation now
  - Will it stand up to I10 coding requirements?

Documentation Impact

- Providers current documentation practices will reflect tremendously on implementation efforts
  - Could decrease productivity
    - Might actually decrease number of patients seen per day

Example

- Acute otitis media
- In ICD-9-CM we would have 381.00
- In ICD-10-CM we would need to know which side and if it is recurrent
  - Patient has an acute onset of otitis media of the right ear, which is recurrent.
  - In ICD-10-CM this is report with H65.114 (Acute and subacute otitis media recurrent, right ear).

Let's Talk Differences

- Going from 14,000 codes to over 69,000
  - Requires greater specificity
  - Laterality
  - Stages of healing
  - Trimesters in pregnancy

Laterality

- *ICD-10-CM code descriptions include right or left designation*
  - *Right side is always character 1*
  - *Left side character 2*
  - *Bilateral character 3*
  - *unspecified side is either a character 0 or 9, depending on whether it is a fifth or sixth character*

Laterality Example

- H80.0 Otosclerosis involving oval window, nonobliterative
  - H80.00 Otosclerosis involving oval window, nonobliterative, unspecified ear
  - H80.01 Otosclerosis involving oval window, nonobliterative, right ear
  - H80.02 Otosclerosis involving oval window, nonobliterative, left ear
  - H80.03 Otosclerosis involving oval window, nonobliterative, bilateral

Diabetes Mellitus

- The biggest change in guidelines
- There are six (6) Diabetes Mellitus categories in the ICD-10-CM. They are:
  - E08 Diabetes Mellitus due to an underlying condition
  - E09 Drug or chemical induced diabetes mellitus
  - E10 Type I diabetes mellitus
  - E11 Type 2 diabetes mellitus
  - E13 Other specified diabetes mellitus
  - E15 Unspecified diabetes mellitus

Diabetic Type

- Guideline states
  - *The age of a patient is not the sole determining factor, though most type 1 diabetics develop the condition before reaching puberty*
  - For this reason type 1 diabetes mellitus is also referred to as juvenile diabetes

Insulin Usage

- Guidelines state:
  - *If the documentation in a medical record does not indicate the type of diabetes but does indicate that the patient uses insulin, code E11, Type 2 diabetes mellitus, should be assigned for type 2 patients who routinely use insulin*
  - *code Z79.4, Long-term (current) use of insulin, should also be assigned to indicate that the patient uses insulin.*

Example

- Tom is a 50 yr old type II patient and returns to his physician for his 6-month follow-up. Tom has been on insulin for the past eight months as his diabetes was not well controlled. The physician documents in the medical record, “Type II diabetes mellitus currently maintaining good control with insulin, diet, and exercise. Patient will continue with same medication dosage, monitor glucose levels with home monitoring system, and return in 3 months for recheck We may consider discontinuing insulin if patient remains in good control.
  - E11.9-Type 2 diabetes mellitus without complication
  - Z79.4, Long-term (current) use of insulin

Diseases of the Musculoskeletal System and Connective Tissue

- **Site and laterality**
  - Site represents either the bone, joint or the muscle involved
  - For some conditions where more than one bone, joint or muscle is usually involved, such as osteoarthritis
    - There is a “multiple sites” code available
  - For categories where no multiple site code is provided and more than one bone, joint or muscle is involved
    - Multiple codes should be used to indicate the different sites involved

Example

- Jennifer is treated by her Orthopedic surgeon for osteoarthritis of the right knee that worsens throughout the day. She was prescribed Naprosyn.
  - First listed diagnosis: M17.11 Unilateral primary osteoarthritis, right knee

Bone VS Joint

- In certain conditions, the bone may be affected at the upper or lower end
  - Portion of bone affected may be at the joint, the site designation will be the bone, not the joint

Coding of Pathologic Fractures

- 7th character “A” is for use as long as the patient is receiving active treatment for the fracture ; “D” is to be used for encounters after the patient has completed active treatment
  - The other 7th characters, listed under each subcategory in the Tabular List, are to be used for subsequent encounters for treatment of problems associated with the healing, such as malunions and nonunions, and sequelae
  - Care for complications of surgical treatment for fracture repairs during the healing or recovery phase should be coded with the appropriate complication codes.

Coding of Traumatic Fractures

- Fractures of specified sites are coded individually by site in accordance with both the provisions within S categories and the level of detail furnished by medical record content.
  - A fracture not indicated as open or closed should be coded to closed
  - A fracture not indicated whether displaced or not displaced should be coded to displaced

Initial vs. Subsequent Encounter for Fractures

- Traumatic fractures are coded using the appropriate 7th character extension for initial encounter (A, D, S—possible choices) while the patient is receiving active treatment for the fracture

Example

- A patient underwent surgery for a closed displaced avulsion fracture of the illum of the left side
- First listed diagnosis: S32.312A
  - Seventh character “A” identifies the initial encounter for the closed fracture.

Pregnancy, Childbirth, and the Puerperium

- **General rules for the "O" codes**
  - Trimesters are defined as follows:
    - 1st trimester- less than 14 weeks 0 days
    - 2nd trimester- 14 weeks 0 days to less than 28 weeks 0 days
    - 3rd trimester- 28 weeks 0 days until delivery

Final character for trimester

- Majority of codes in Chapter 15 have a final character indicating the trimester of pregnancy
  - The timeframes for the trimesters are indicated at the beginning of the chapter
- If trimester is not component of a code
  - it is because the condition always occurs in a specific trimester, or the concept of trimester of pregnancy is not applicable

Case Examples

The patient has been increasing her smoking use; she is up to 1/2 pack per day. She is waking up with chest discomfort, tightness, and shortness of breath. She as recently found herself smoking in front of one of her children and she has decided that she needs to quit smoking.

Blood pressure is 140/70, weight is 101.36 kilograms. Heart regular rate and rhythm, no murmurs. Lungs are clear to auscultation bilaterally. Abdomen has positive bowel sounds times 4 quadrants. There is CVA tenderness and left lower quadrant pain on palpation. There is no guarding and no rebound tenderness. Skin is clean without rashes, erythema, or jaundice.

1. Left nephrolithiasis.
2. Urinary tract infection with beta hemolytic strep
3. Tobacco abuse, uncontrolled
4. Elevated blood pressure secondary to pain.

1. The patient will stop her Ciprofloxacin.
2. A prescription for amoxicillin 850 mg p.o. b.i.d. times 7 days.
3. Vicodin 5/500 1 to 2 p.o. every 4 hours p.r.n. pain, #60 were given with no refills.
4. Chantix. The side effects were discussed with the patient, as well as instructions for taking this with food. The patient was also encouraged to take this medication after she passes her kidney stone

Case Examples

IMPRESSION: Cellulitis and superficial abscess index finger.
PLAN: I am recommending debridement and irrigation of the digit today. I think the skin is dead and that she will tolerate it without anesthesia, I would like her to stay on the clindamycin and I will check her back in 3 days to see how she is doing.

Case Examples

Enter Code: 681.00 Lookup

ICD-9 681.00 > ICD-10

CODE	DESCRIPTOR
LØ2.511	Cutaneous abscess of right hand
LØ2.512	Cutaneous abscess of left hand
LØ2.519	Cutaneous abscess of unspecified hand
LØ3.Ø11	Cellulitis of right finger
LØ3.Ø12	Cellulitis of left finger
LØ3.Ø19	Cellulitis of unspecified finger
LØ3.Ø21	Acute lymphangitis of right finger
LØ3.Ø22	Acute lymphangitis of left finger
LØ3.Ø29	Acute lymphangitis of unspecified finger

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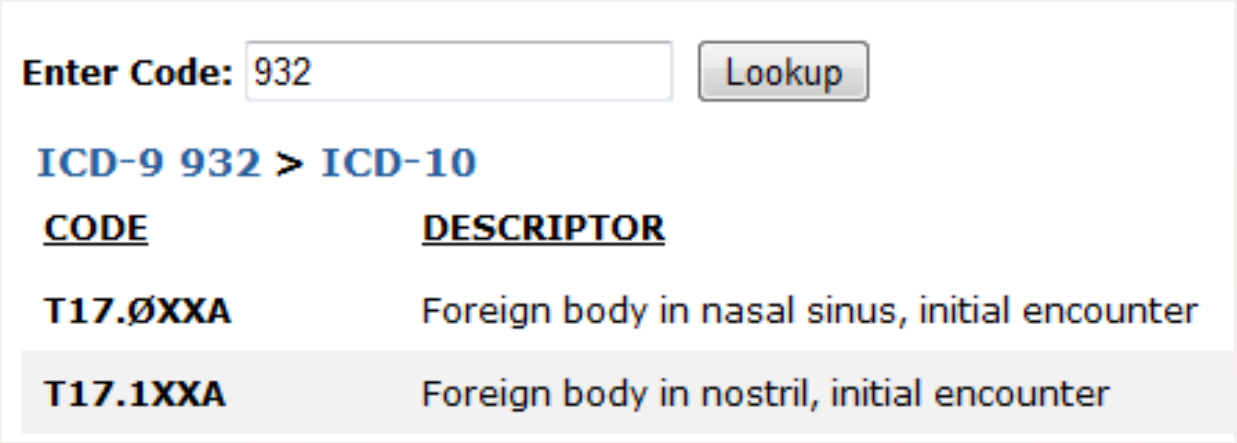
Case Examples

PROBLEM: Foreign body in nose.

HISTORY OF PRESENT ILLNESS: The patient is a 3-year-4-month-old child who comes in today after having put a raisin in her left nostril. Grandmother was unable to remove this.

EMERGENCY DEPARTMENT COURSE: The raisin was grasped with bayonet forceps and removed atraumatically. Examination of the nostril fails to reveal any further foreign body or problems.
DIAGNOSIS: Foreign body removal, nostril.

Case Examples



Case Examples

Placenta and AF: Placenta is posterior/anterior, grade 0. Amniotic fluid volume is WNL.

Maternal Adenexa: No abnormality seen.

Impression: EGA 24.6 wks by measurememts, fetus 701 gms.

Case Examples

Enter Code: v22.0 Lookup

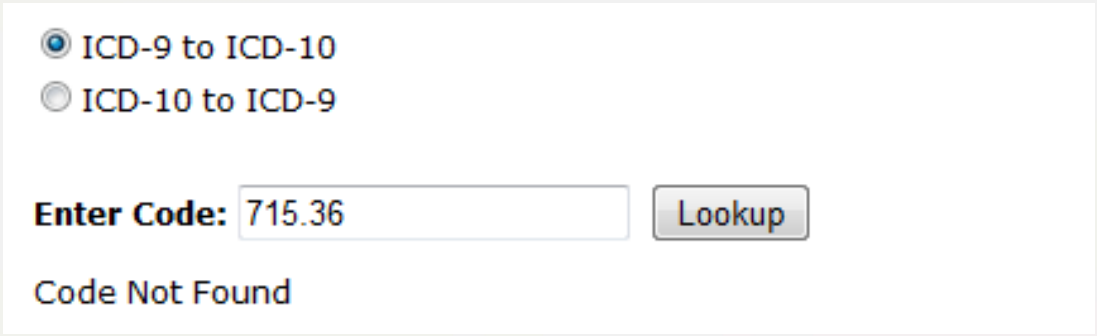
ICD-9 V22.0 > ICD-10

CODE	DESCRIPTOR
Z34.ØØ	Encounter for supervision of normal first pregnancy, unspecified trimester
Z34.Ø1	Encounter for supervision of normal first pregnancy, first trimester
Z34.Ø2	Encounter for supervision of normal first pregnancy, second trimester
Z34.Ø3	Encounter for supervision of normal first pregnancy, third trimester

Osteoarthritis

- Patient was seen for osteoarthritis of right knee….

Case Examples



Case Examples

Assessment #1:
Plan:
Med Current
Lab
250.00 Diabetes Mellitus W/o Compl Type Ii Or Unspec Controlled
: Metformin HCL 500 mg 1 po bid
: Lipid Screen
Assessment #2:
Plan:
Comments
Med Current
357.2 Polyneuropathy In Diabetes
: MAY ALSO HELP WITH MOOD STABILITY
: Neurontin 100 mg
take 1 tablet in the morning, 1 tablet
at noon and 2 tablets atbedtime

Case Examples

INTERPRETIVE FINDINGS: Exam reveals a stable knee under examination under anesthesia. The video arthroscopy examination reveals smooth articular surfaces throughout the entire knee. He has a lateral meniscus which is normal. His medial meniscus shows a locked bucket-handle medial meniscal tear which underwent excision. The cruciate ligament is intact.

Case Examples

Enter Code: 836.0 Lookup

ICD-9 836.0 > ICD-10

CODE	DESCRIPTOR
S83.211A	Bucket-handle tear of medial meniscus, current injury, right knee, initial encounter
S83.212A	Bucket-handle tear of medial meniscus, current injury, left knee, initial encounter
S83.219A	Bucket-handle tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.221A	Peripheral tear of medial meniscus, current injury, right knee, initial encounter
S83.222A	Peripheral tear of medial meniscus, current injury, left knee, initial encounter
S83.229A	Peripheral tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.231A	Complex tear of medial meniscus, current injury, right knee, initial encounter
S83.232A	Complex tear of medial meniscus, current injury, left knee, initial encounter
S83.239A	Complex tear of medial meniscus, current injury, unspecified knee, initial encounter
S83.241A	Other tear of medial meniscus, current injury, right knee, initial encounter
S83.242A	Other tear of medial meniscus, current injury, left knee, initial encounter
S83.249A	Other tear of medial meniscus, current injury, unspecified knee, initial encounter

Case Examples

- Subjective: This 17-year-old patient presents to the emergency department after racing motorcycles earlier today. He had his helmet on as well as all of his racing gear. He actively races motorcycles and has done this all summer long, winning a number of times. He came over a jump and lost control of the bike, going over the handlebars. He denies hitting his head but landed on his left elbow and his left knee and has had some discomfort in these areas since. He tells me that he was not going fast, then approximately 30 mph. He denies any loss of consciousness. The main complaints center only on the left knee and the left elbow.

Case Examples

- Coded as:

- S50.02xA, S80.02xA, V28.0xA, Y92.39

Questions??