



# eHEALTH INITIATIVE

Real Solutions. Better Health.

## **How Will ICD-10 Impact You?**

A webinar to review a national multi-stakeholder survey

July 8, 2013

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- All participants are muted
  - To ask a question or make a comment, please submit via the chat feature and we will address as many as possible after the presentations.
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- Today's slides can be downloaded for free on our homepage at [www.ehealthinitiative.org](http://www.ehealthinitiative.org)
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# About eHealth Initiative

- Since 2001, eHealth Initiative is the only national, non-partisan group that represents all the stakeholders in health care.
- Mission to promote use of information and technology in healthcare to improve quality, safety and efficiency.
- Coalition of over 200 organizations and the most influential groups in data issues, HIT and HIE.
- eHealth Initiative focuses its **research, education and advocacy** efforts in four areas:
  - Using Data and Analytics to Understand and Improve Care
  - IT Infrastructure to Support Accountable Care
  - Technology for Patients with Chronic Disease
  - Connecting Communities through Data Exchange



# Thank You to Our Sponsor



# Agenda

- Welcome – **Jon Dimsdale**, Director, Programs & Research, eHealth Initiative
- ICD-10 Survey Overview and Results – **Allison Viola**, MBA, RHIA, Vice President, Policy and Government Affairs
- Industry Reactionary Panel
  - **Sue Bowman**, MJ, RHIA, CCS, FAHIMA, Senior Director, Coding Policy and Compliance, AHIMA
  - **Ann Chenoweth**, MBA, RHIA, Senior Director of Industry Relations, 3M Health Information Systems
  - **John Lucabaugh**, MBA, RHIA, Vice President of Health Information Management, Summit Health
- Questions & Answers and Final Thoughts from Speakers



# What is ICD-10?

- ICD-10-CM/PCS = International Classification of Diseases, 10th edition, Clinical Modification/Procedure Coding System
  - ICD-10-CM: diagnosis coding
    - Used in all U.S. healthcare settings
    - Used for reporting conditions, symptoms and diseases for data collection, payment policy and research
  - ICD-10-PCS: inpatient procedure coding
    - Used in U.S. inpatient hospital settings only
    - Used for classifying procedures



# The transition from ICD-9 to ICD-10

- The United States currently uses the 9<sup>th</sup> edition of ICD code sets to report medical diagnoses and inpatient procedures.
- All entities covered by HIPAA are required to transition to the 10<sup>th</sup> edition (ICD-10) on October 1, 2014.
- All Medicare and Medicaid claims submitted on or after October 1, 2014 using ICD-9 will not be processed.
  - All claims submitted prior to October 1, 2014 must be submitted using ICD-9.



# Why transition?

- ICD-9 codes are outdated
  - ICD-9 code sets are over 30 years old
  - ICD-10 was implemented by the World Health Organization in 1993 to replace ICD-9
  - The U.S. is the only industrialized nation not using an ICD-10 based classification system



# Why transition?

- Limited data:
  - ICD-9 has outdated medical terms that are inconsistent with current medical practices
  - The structure of ICD-9 limits the number of new codes that can be created to incorporate new medical practices
  - ICD-9 lacks specificity



# Opportunities and benefits of ICD-10

- Increased specificity and better coding accuracy
- Expanded use of combination codes
- Updated medical terminology
- Reduced coding errors
- Improved medical research and public health
- Higher quality and specific information for measuring health care service safety, quality and security
- Aligns the U.S. with international coding systems
- Reduction in fraud and abuse



# Who is impacted by the transition to ICD-10?

- *Everyone covered by HIPAA* must transition to ICD-10, including Medicaid programs, and providers and payers who do not deal with Medicare claims.
- The change to ICD-10 *does not* affect CPT coding for outpatient procedures and physician services.



# The impact of the transition

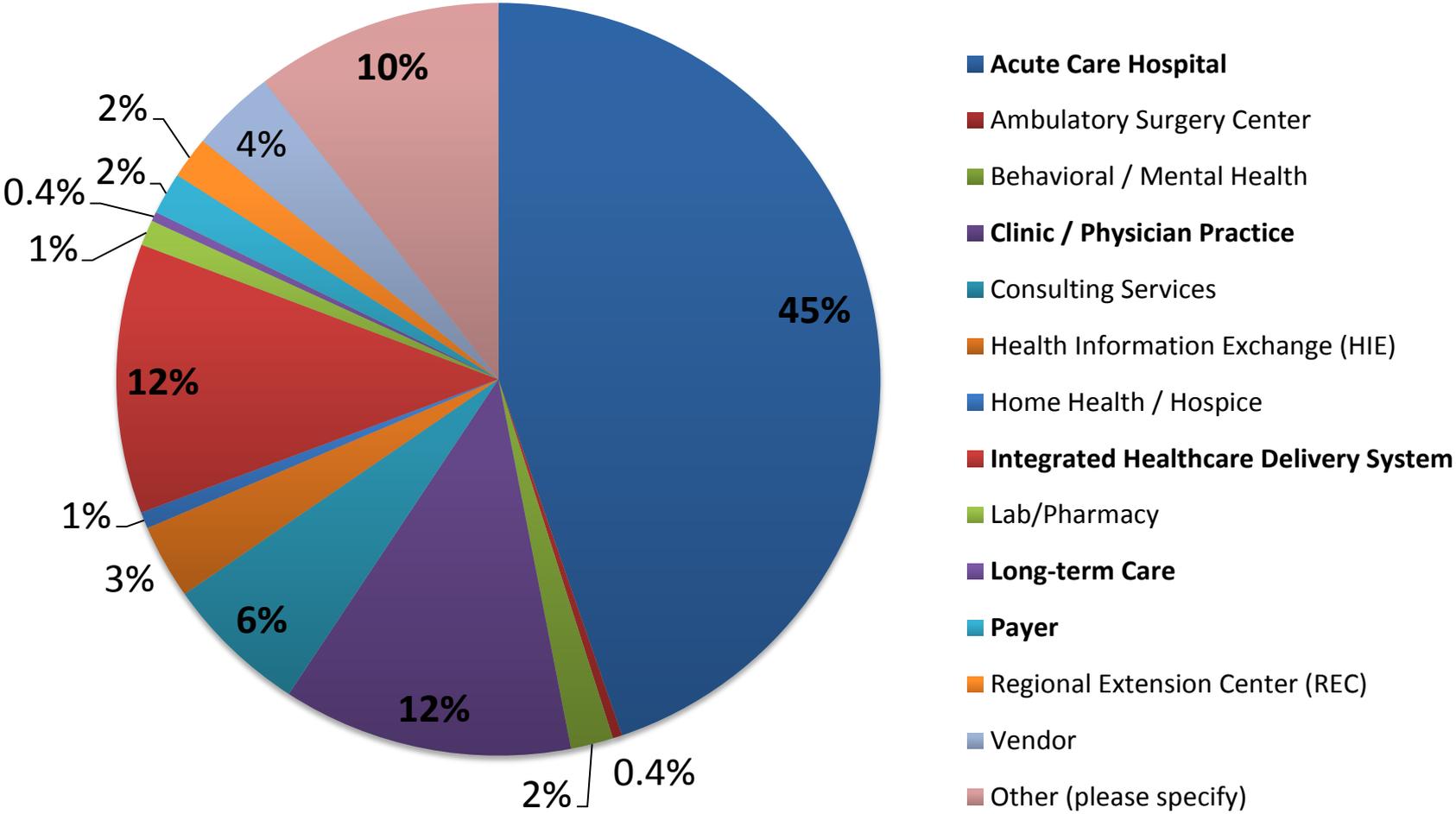
- Budget
  - Readiness testing and implementation
  - Software Upgrades
  - Staff training
- Payment and reimbursement changes
  - Updates and revisions to payer reimbursement policies
- Workflow changes
  - More specificity in clinical documentation
  - Updates and revisions to vendor and payer contracts
- New data
  - 17,000 codes in ICD-9 to 140,000 codes in ICD-10



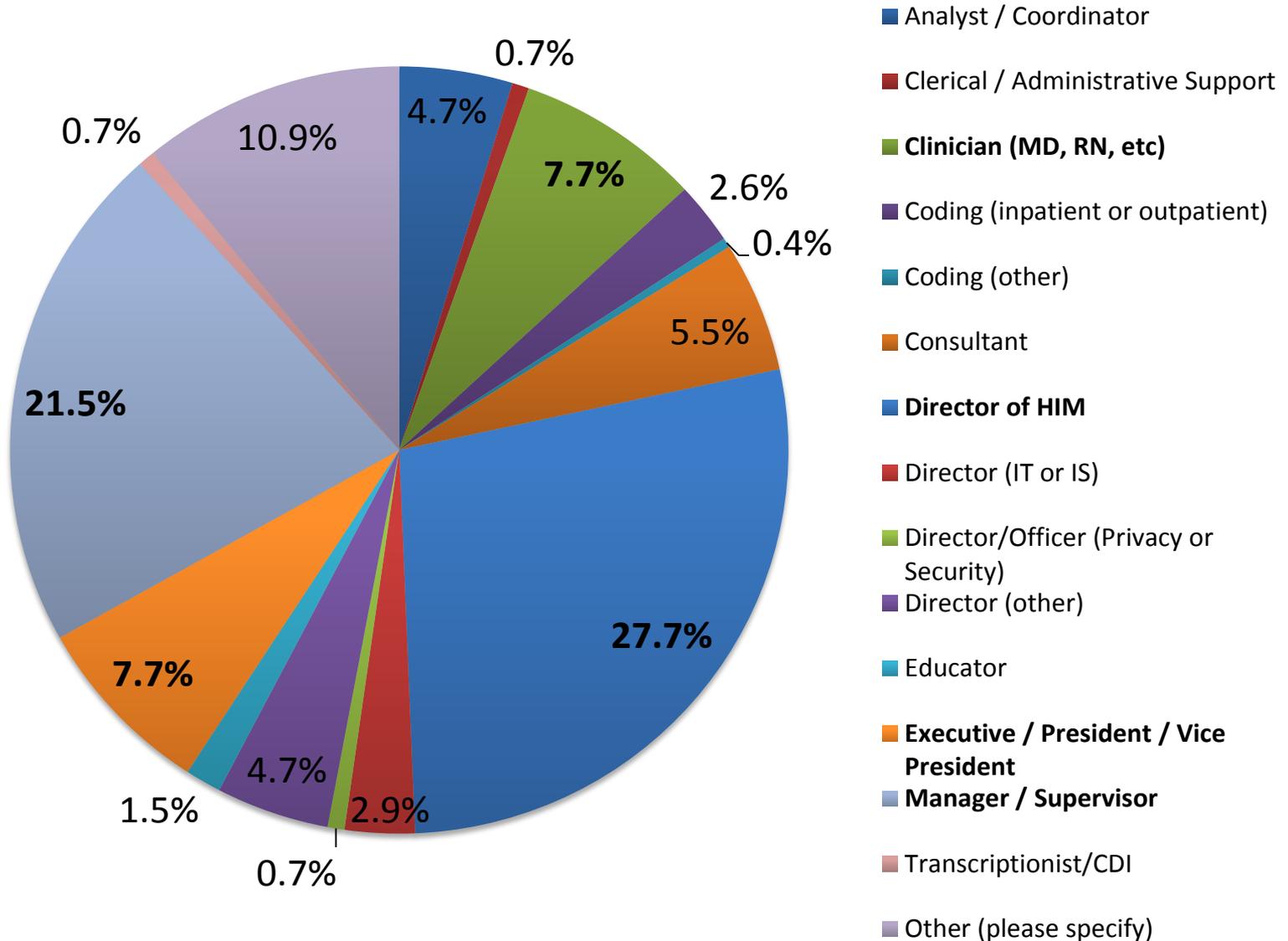
# Survey Results



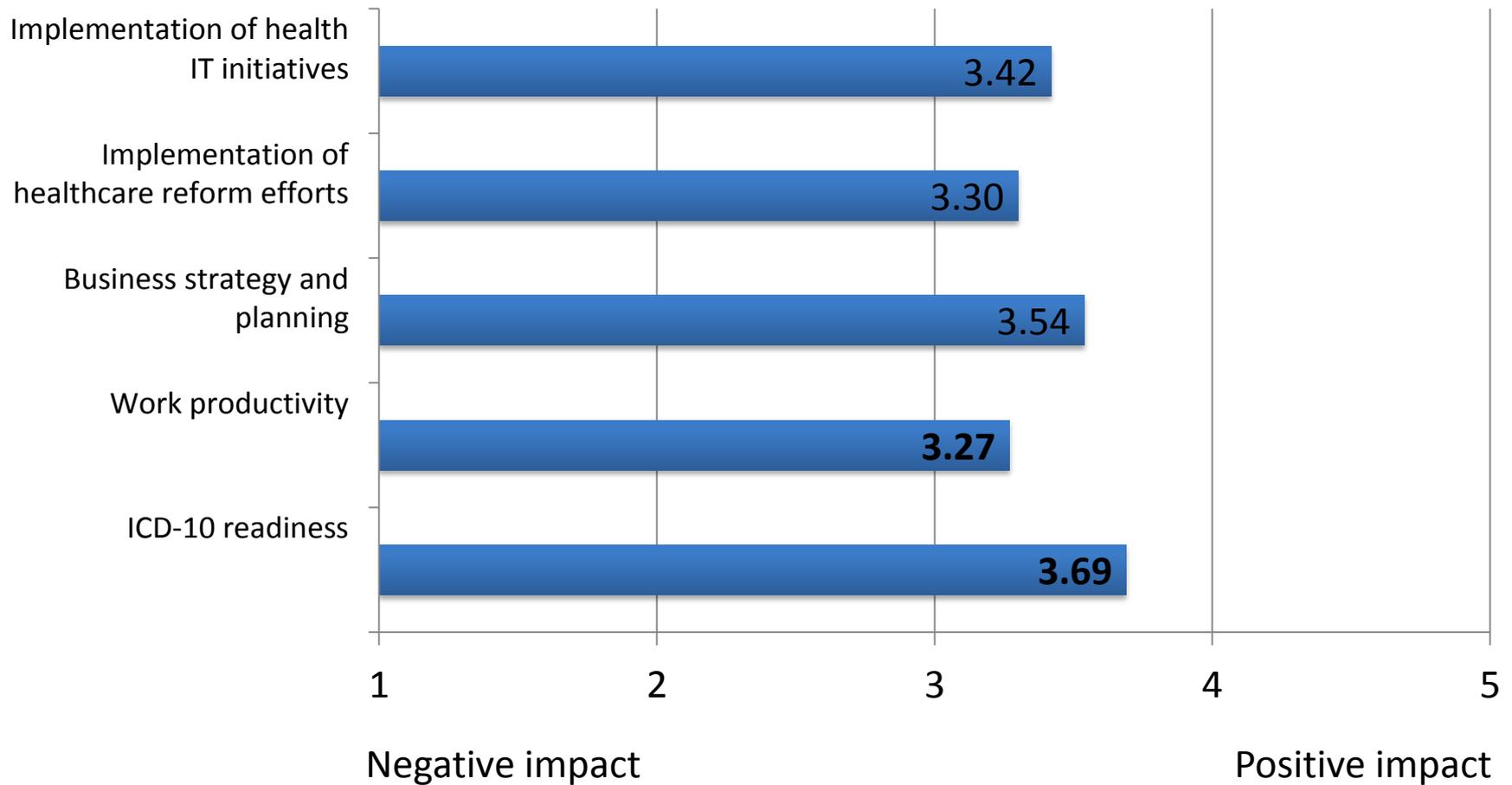
# Primary work setting of survey respondents (n = 281)



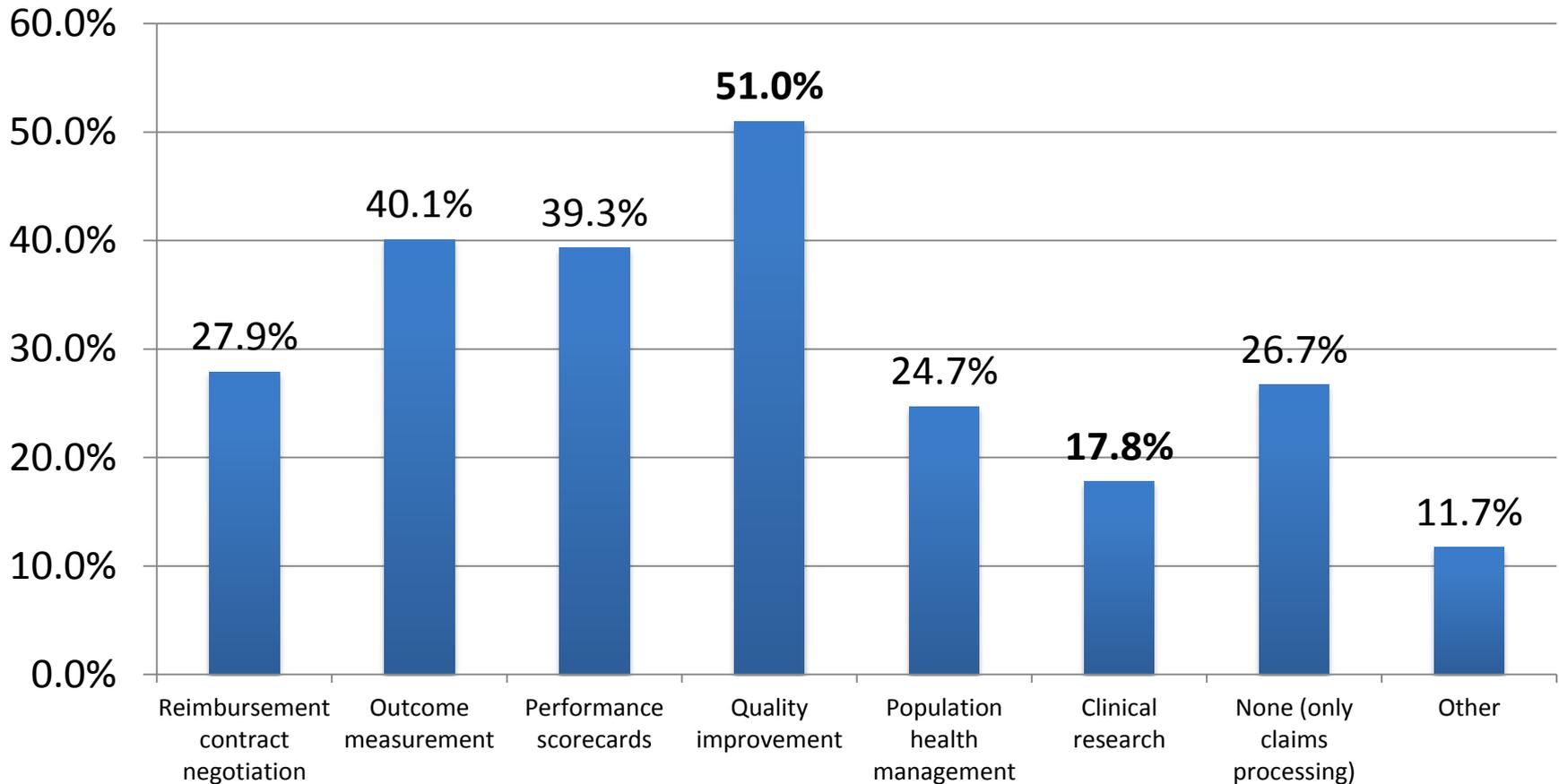
# Job level of survey respondents



# Effect of delayed ICD-10 compliance date (from 2013 to 2014) on surveyed organizations

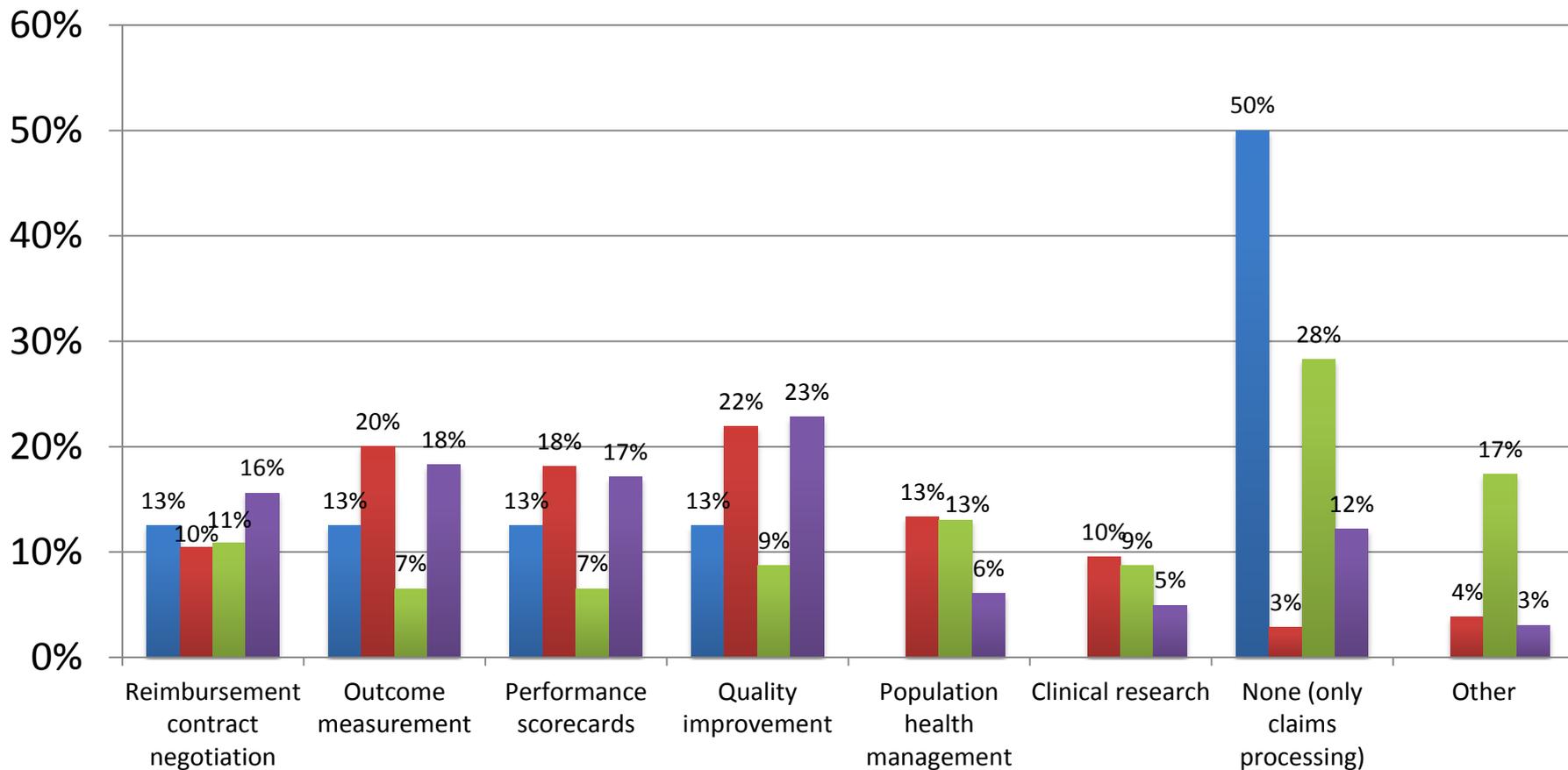


# Strategic goals for leveraging the increased specificity from the ICD-10 coded data



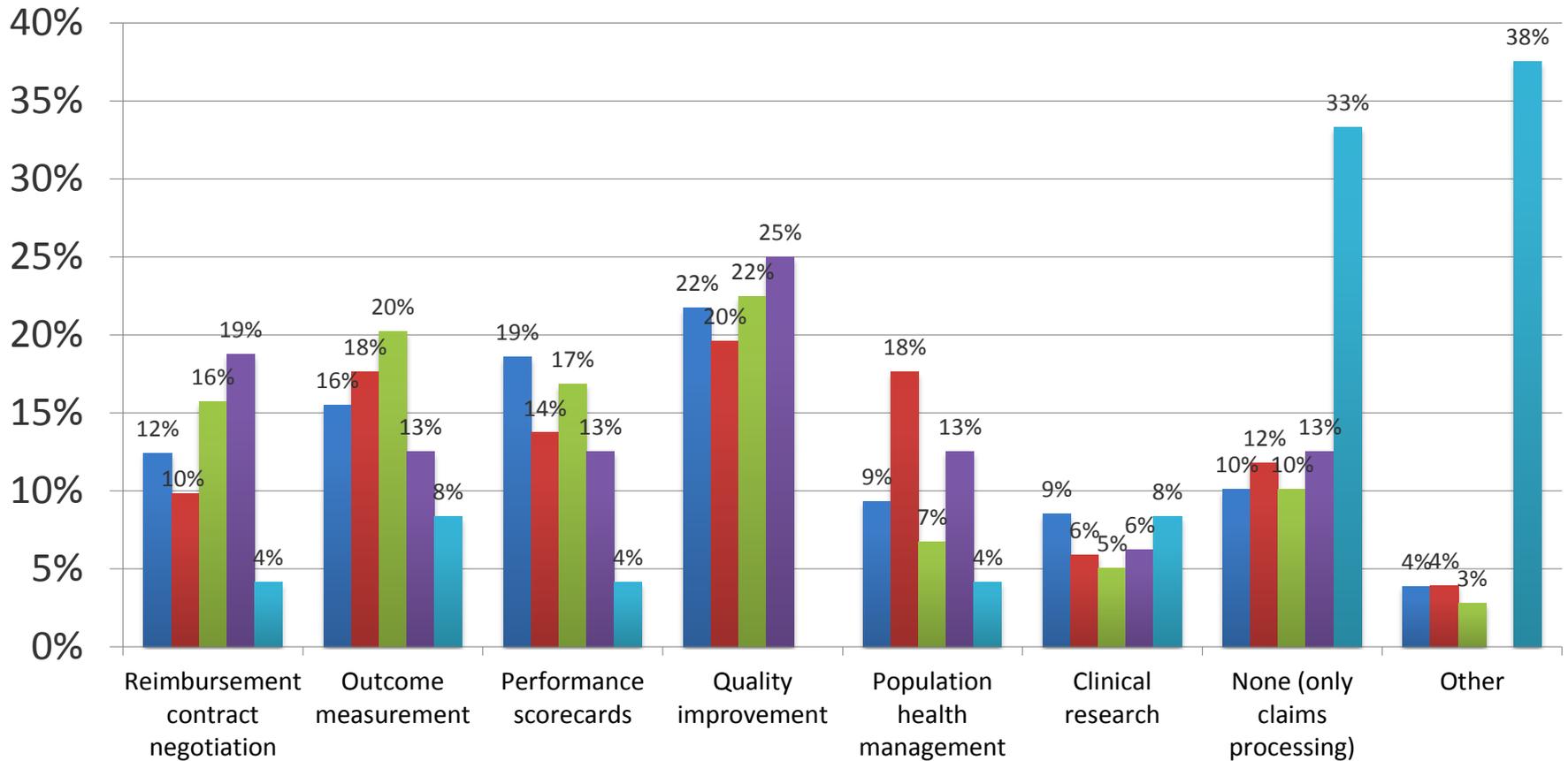
# Strategic goals for leveraging the increased specificity from the ICD-10 coded data

■ Payer   
 ■ Integrated Healthcare Delivery System   
 ■ Clinic / Physician Practice   
 ■ Acute Care Hospital

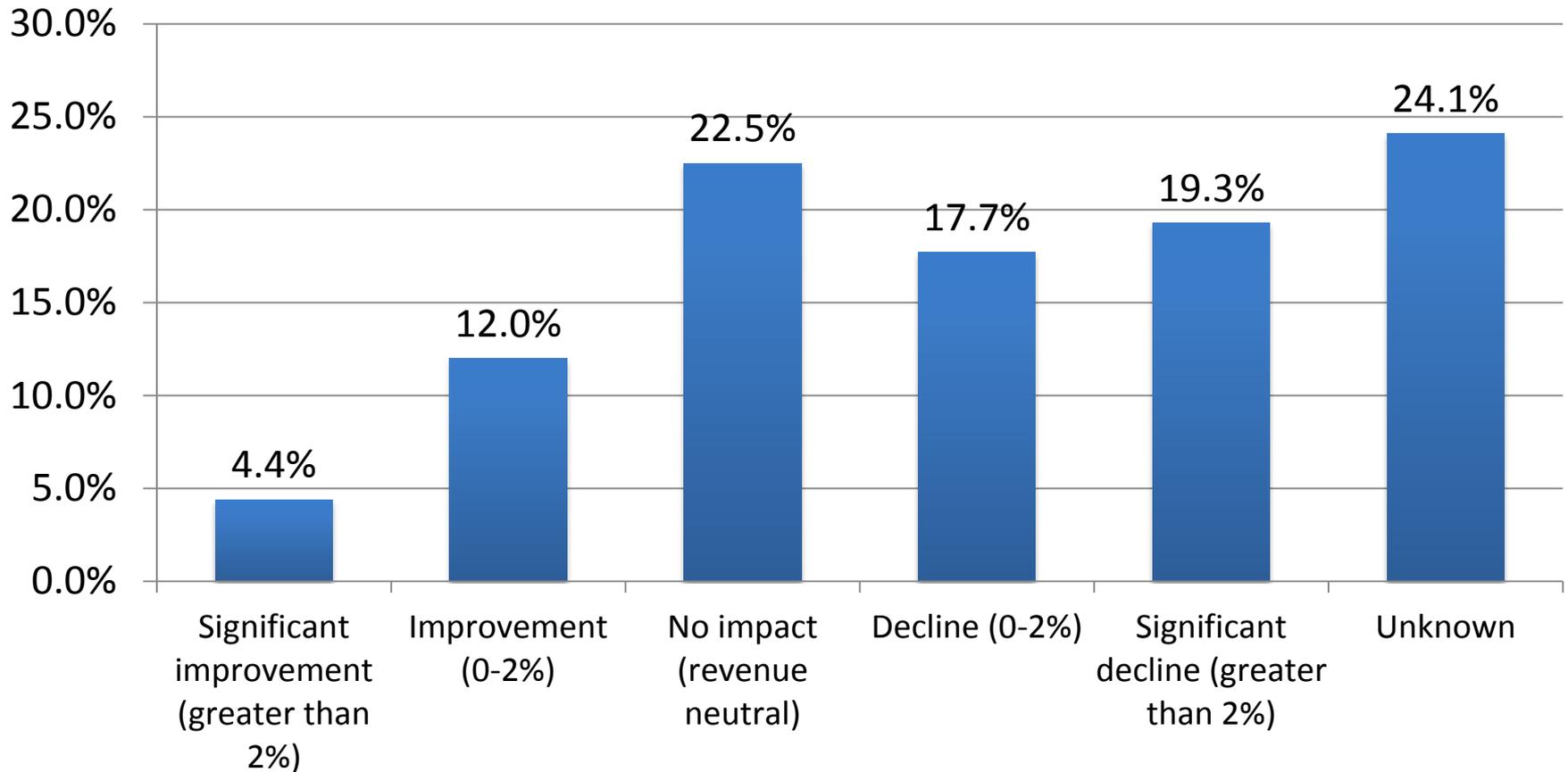


# Strategic goals for leveraging the increased specificity from the ICD-10 coded data

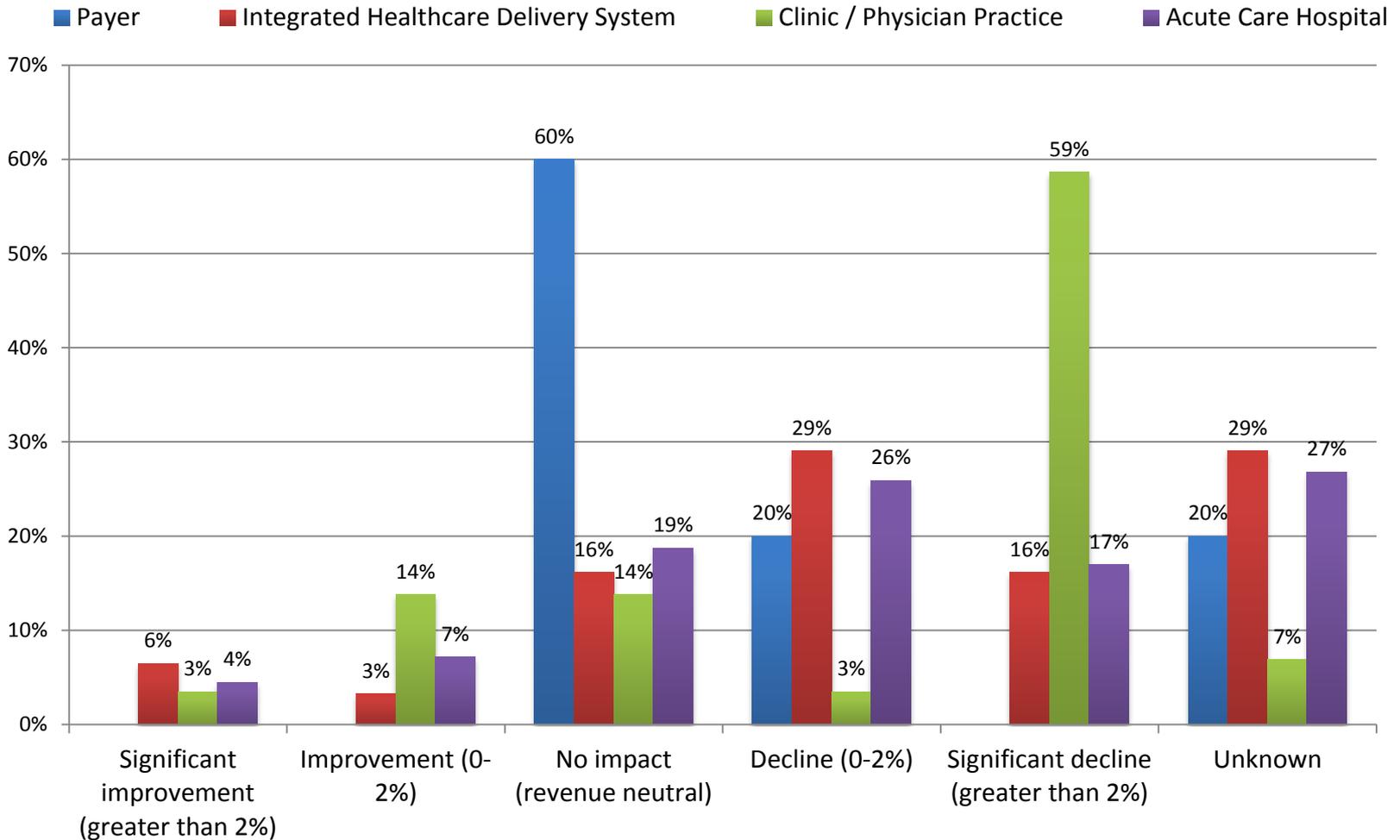
■ Manager / Supervisor  
 ■ Executive / President / Vice President  
 ■ Director of HIM  
 ■ Coding (inpatient or outpatient)  
 ■ Clinician (MD, RN, etc)



# Expected impact of ICD-10 on revenue of surveyed organizations

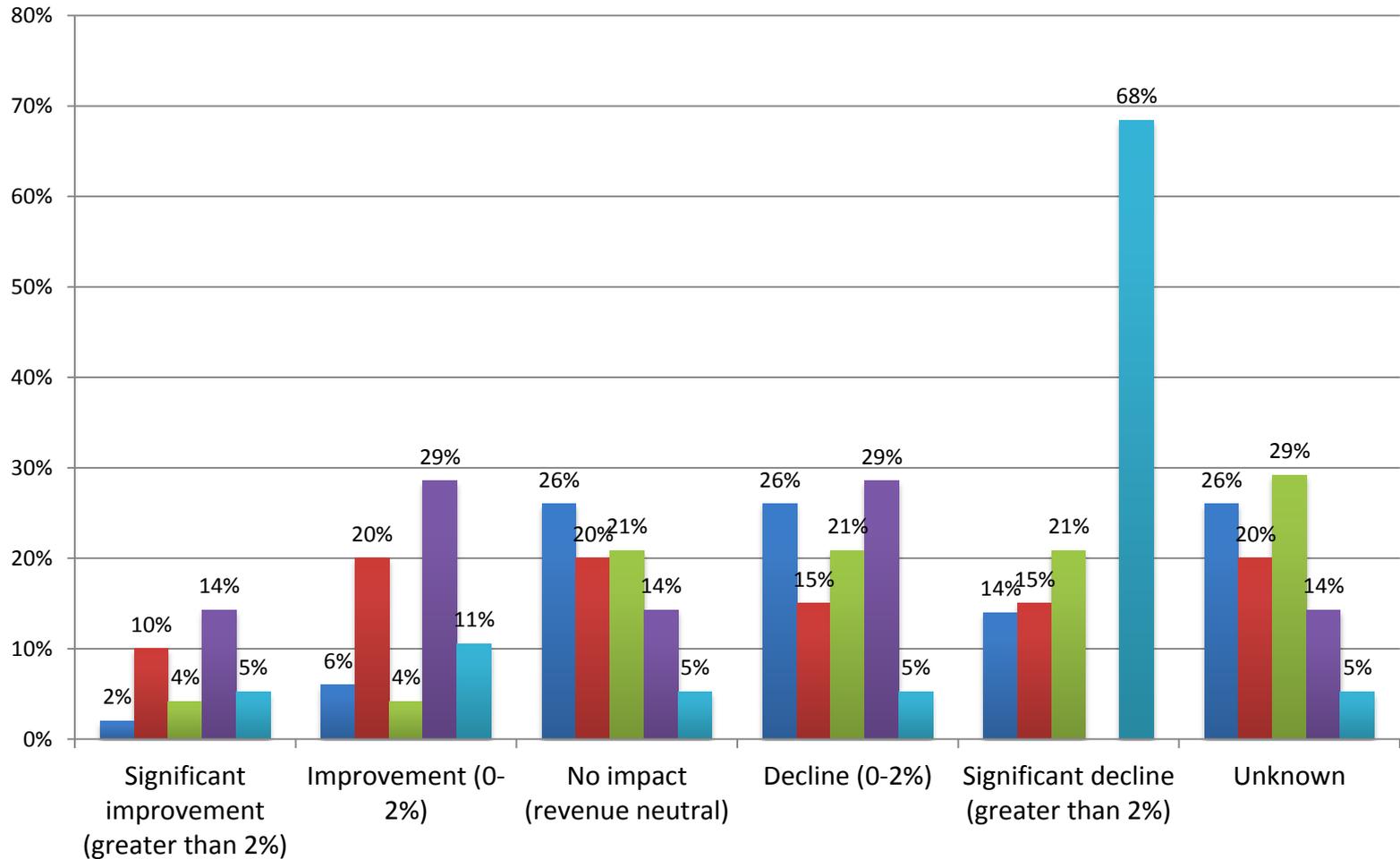


# Expected impact of ICD-10 on revenue of surveyed organizations



# Expected impact of ICD-10 on revenue of surveyed organizations

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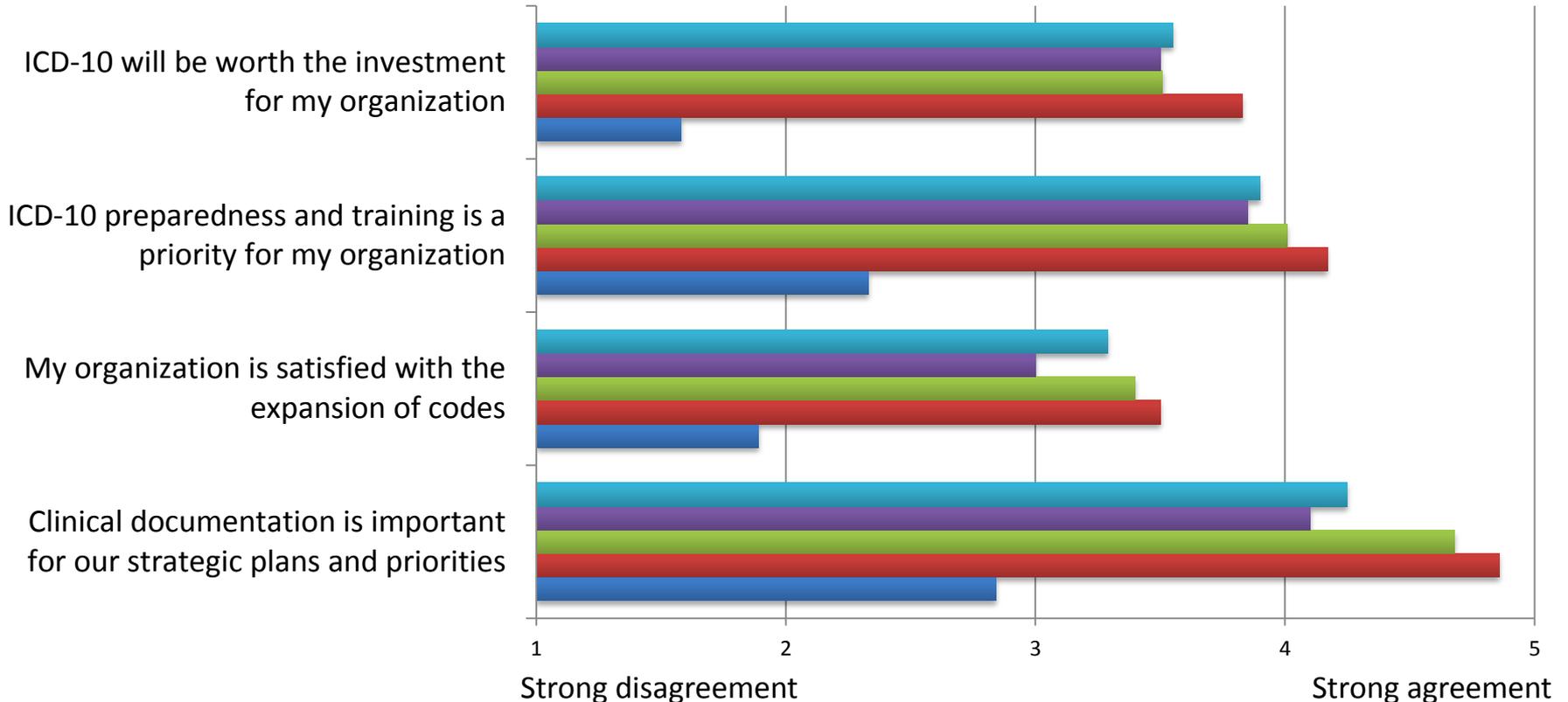


# Expected impact of ICD-10 on surveyed organizations



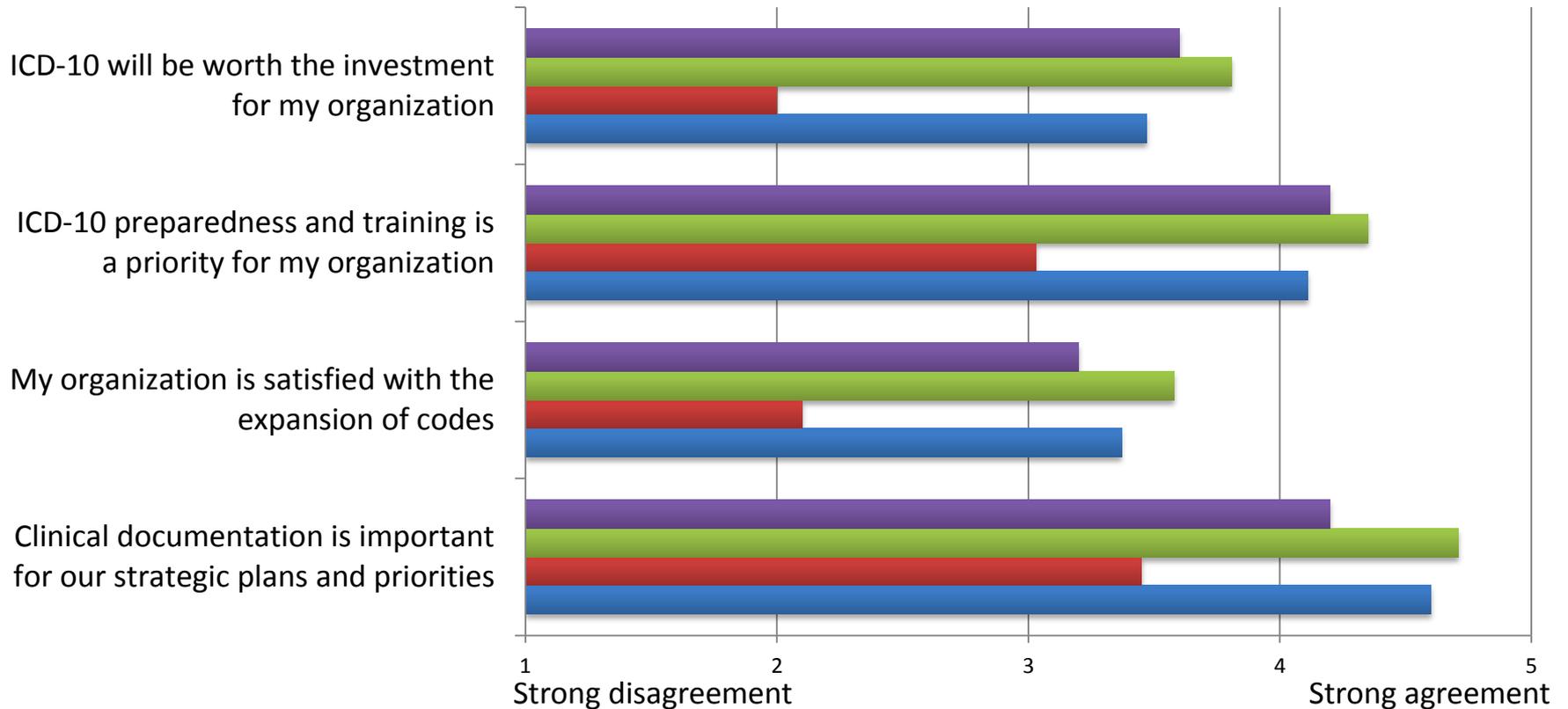
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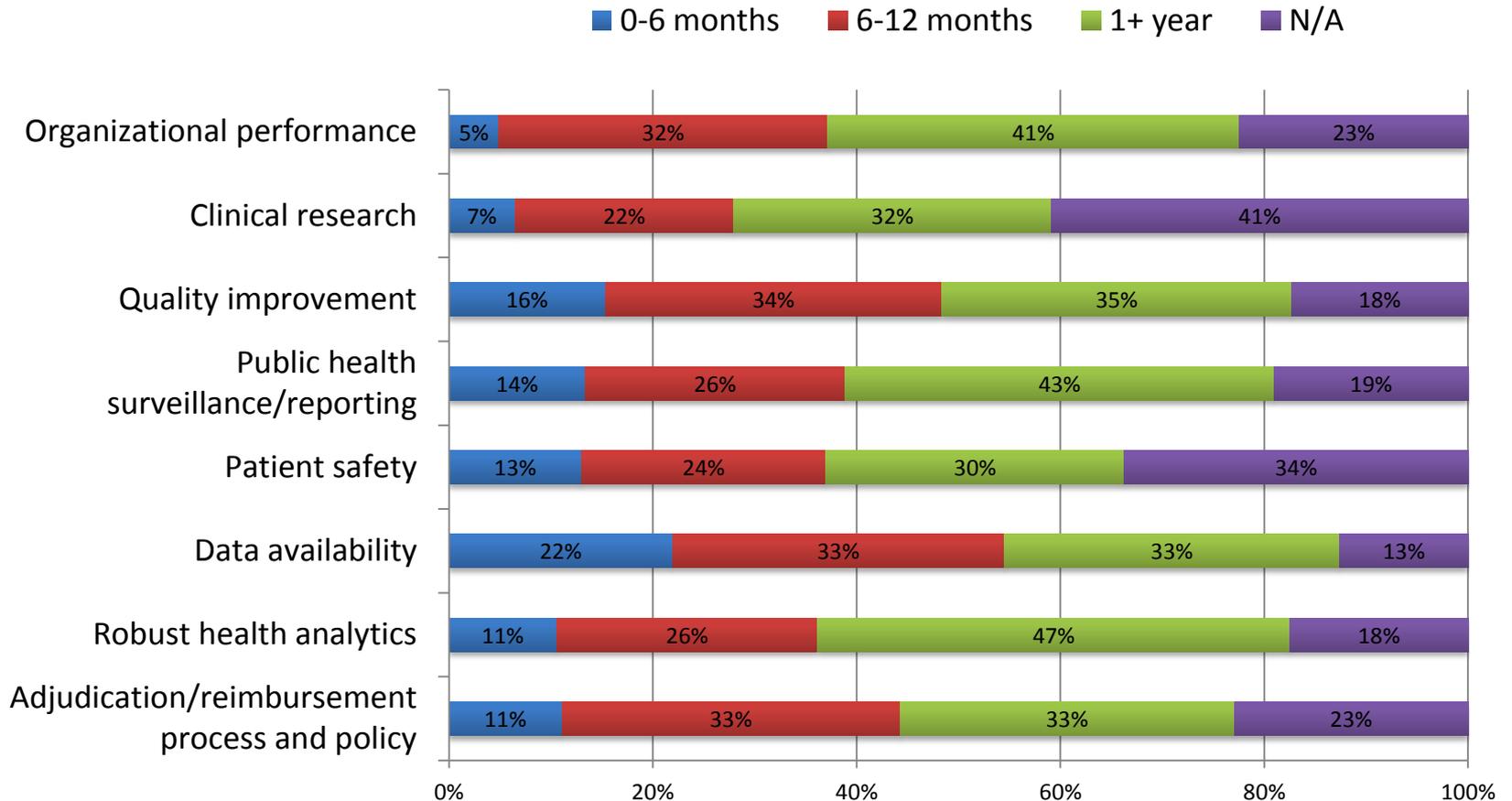


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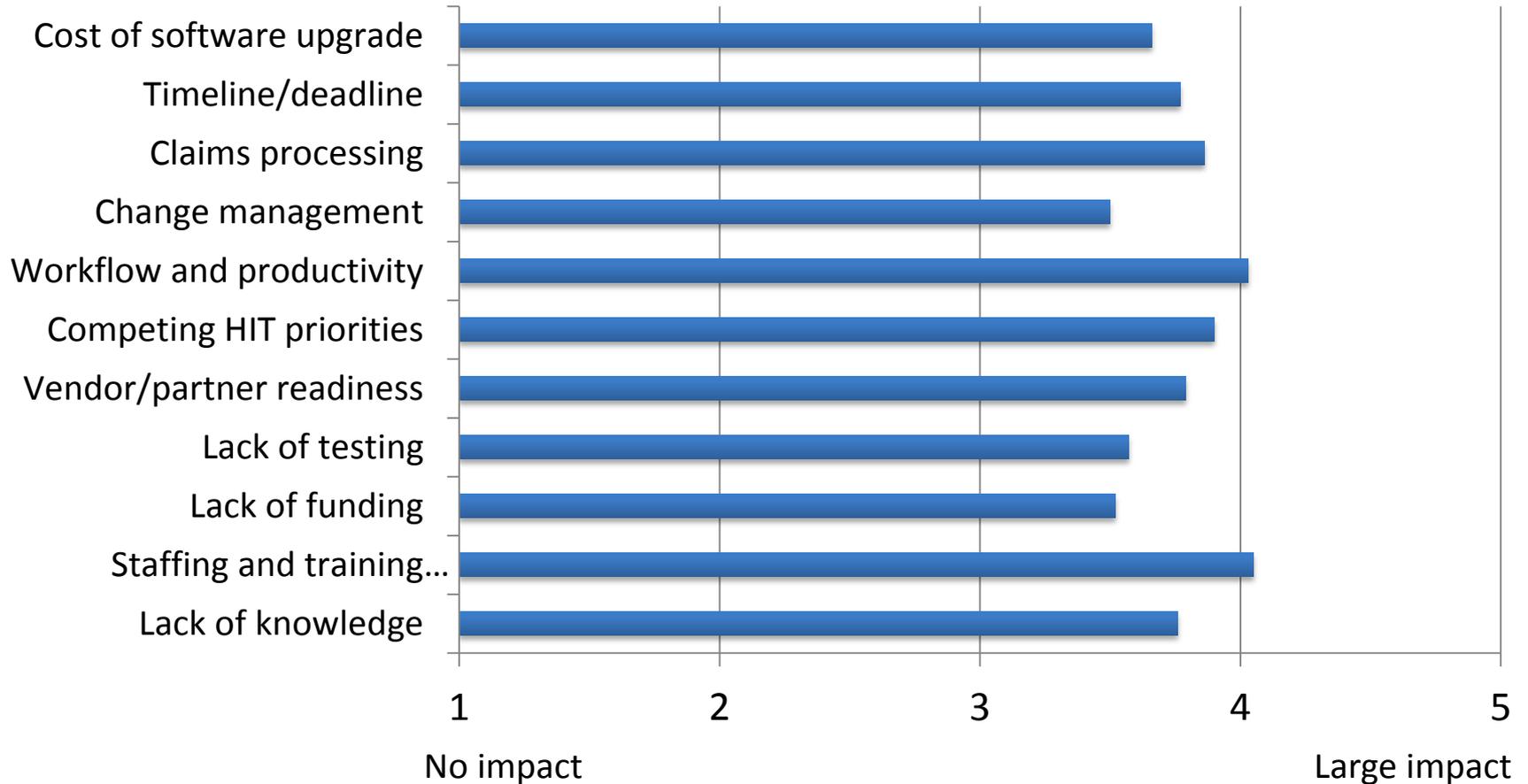
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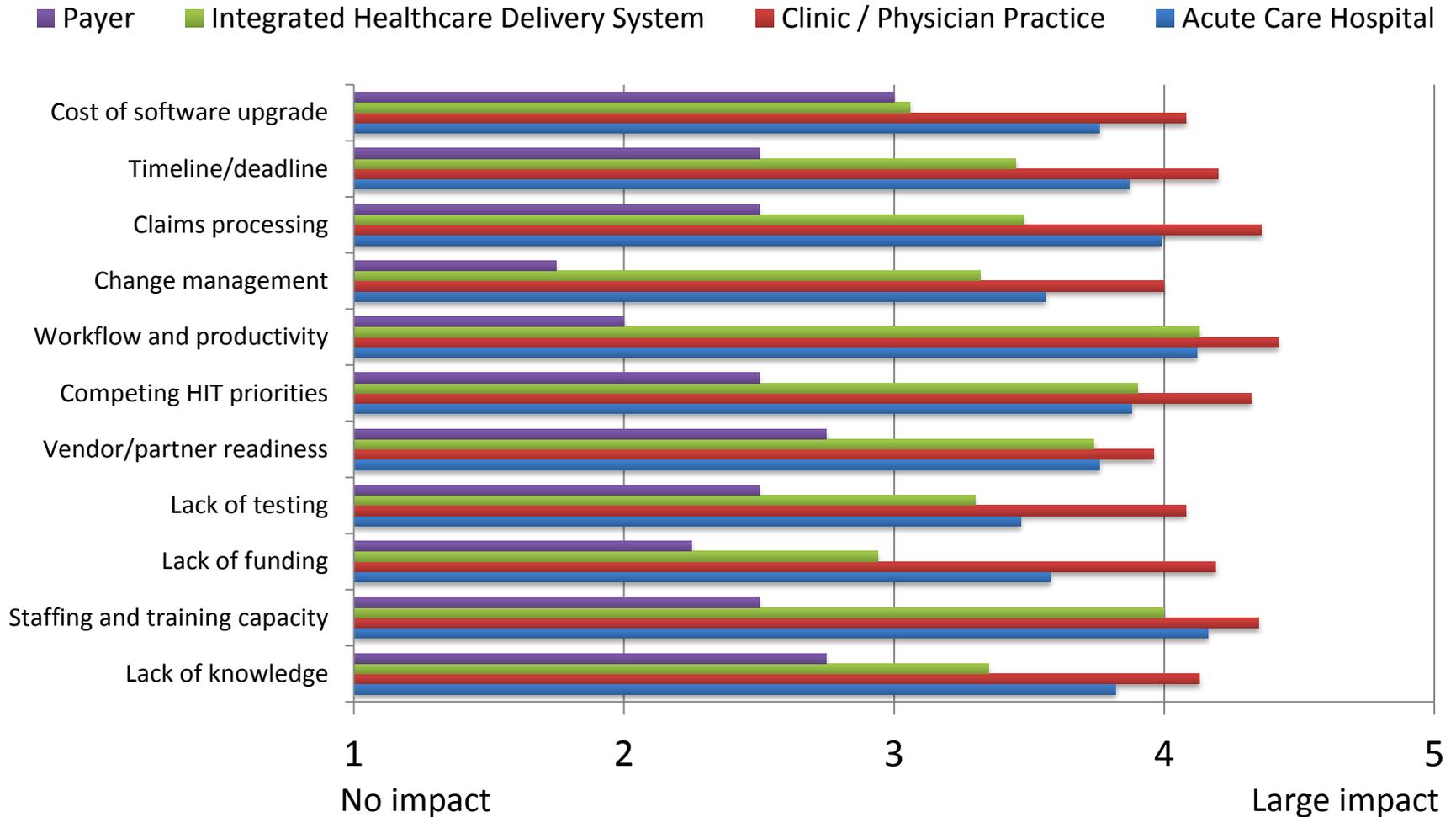
# Expected timeline of improvements once ICD-10 compliance begins on October 1, 2014



# Impact of the barriers below to ICD-10 implementation

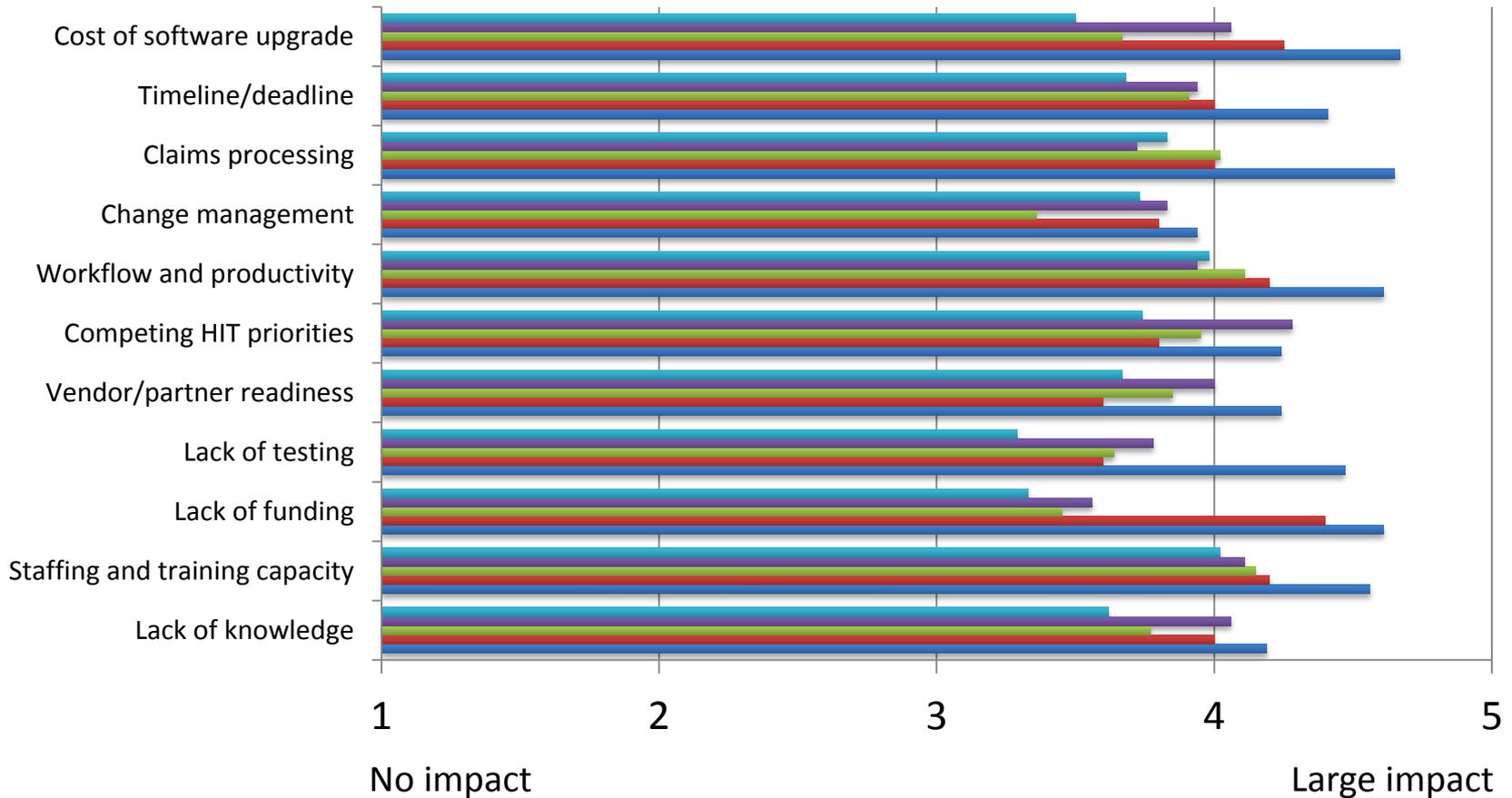


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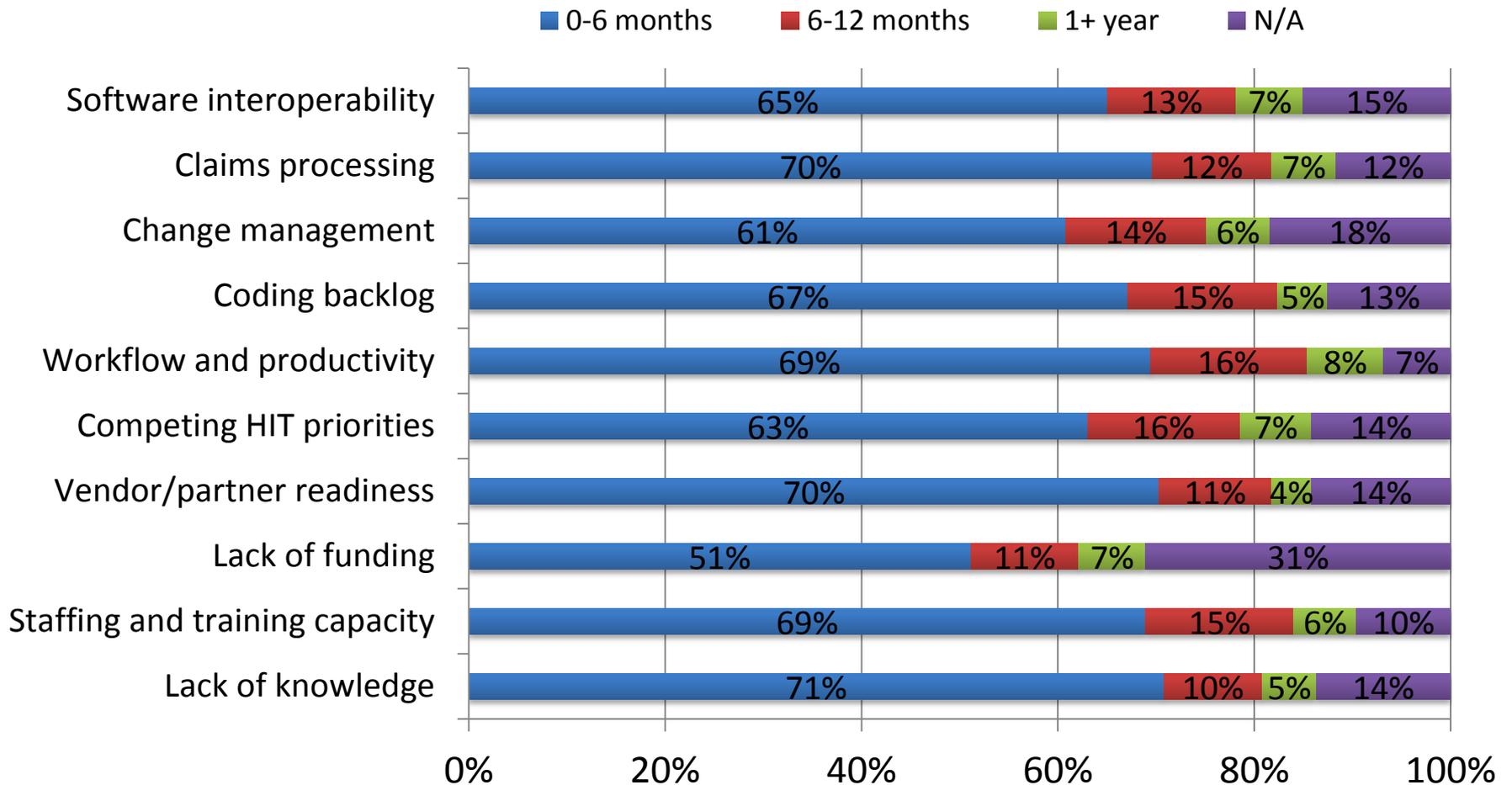


# Impact of the barriers below to ICD-10 implementation

■ Manager / Supervisor 
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 ■ Director of HIM 
 ■ Coding (inpatient or outpatient) 
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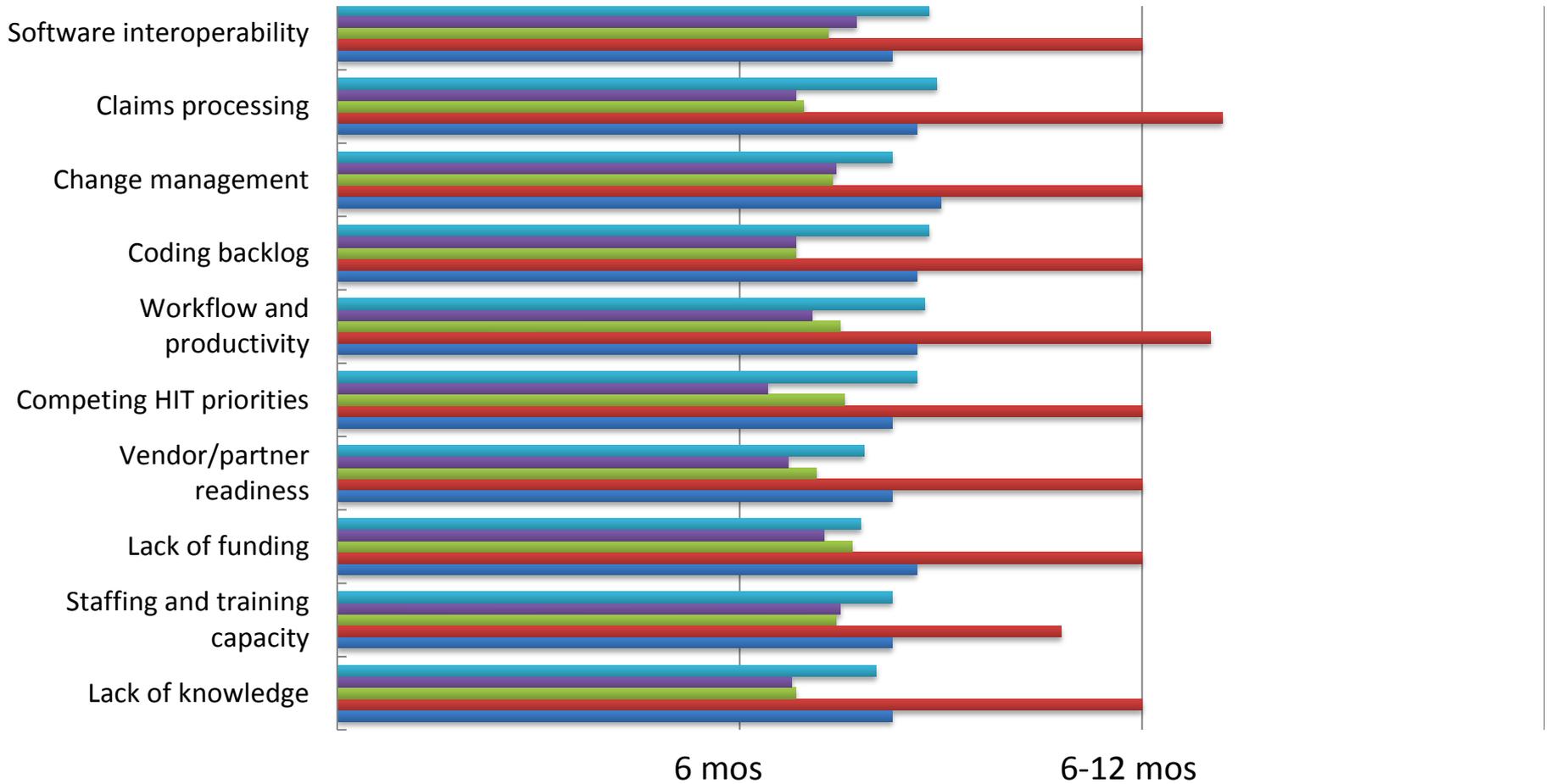


# Expected timeline of barriers to be encountered once ICD-10 compliance begins on October 1, 2014

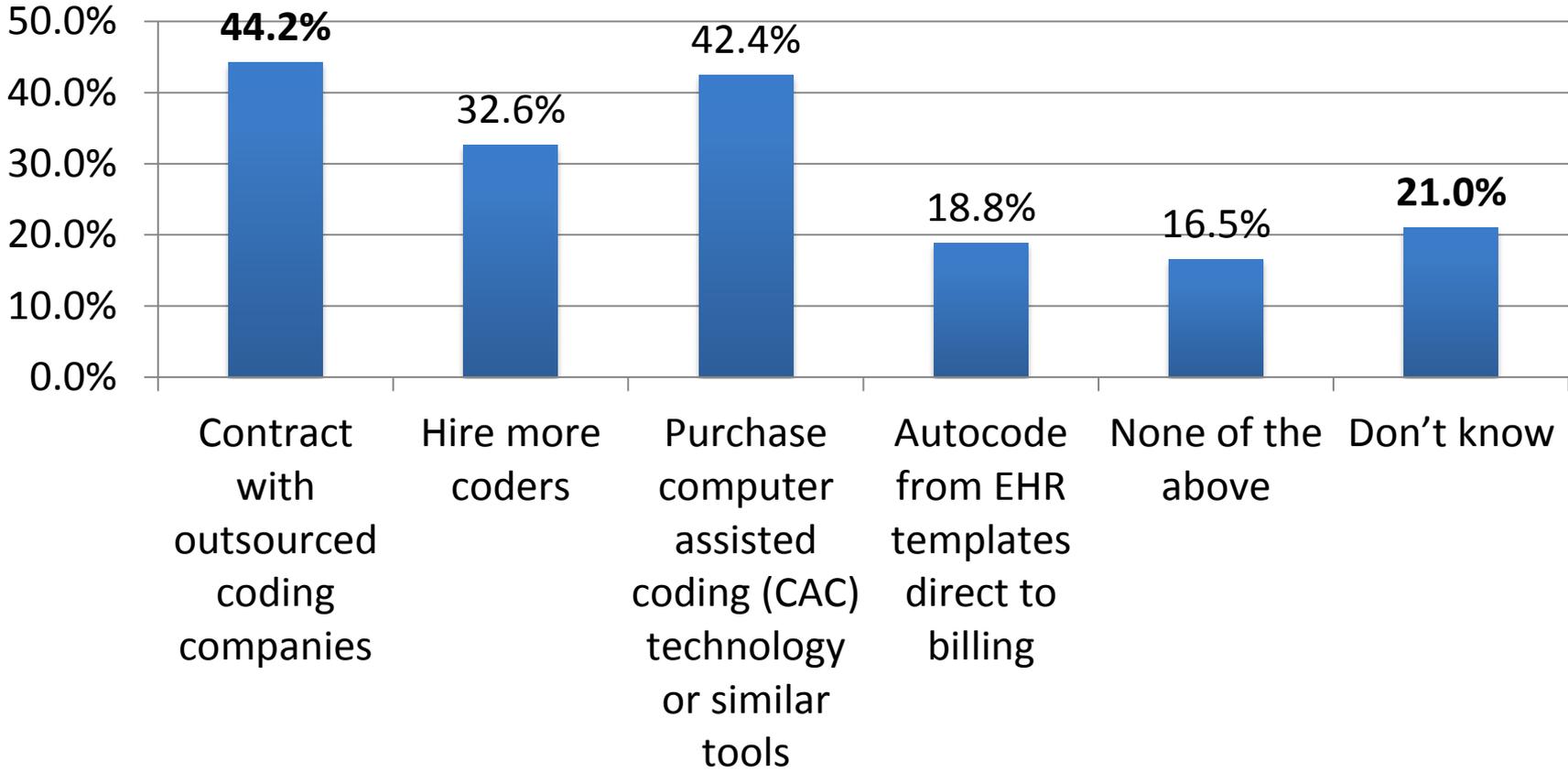


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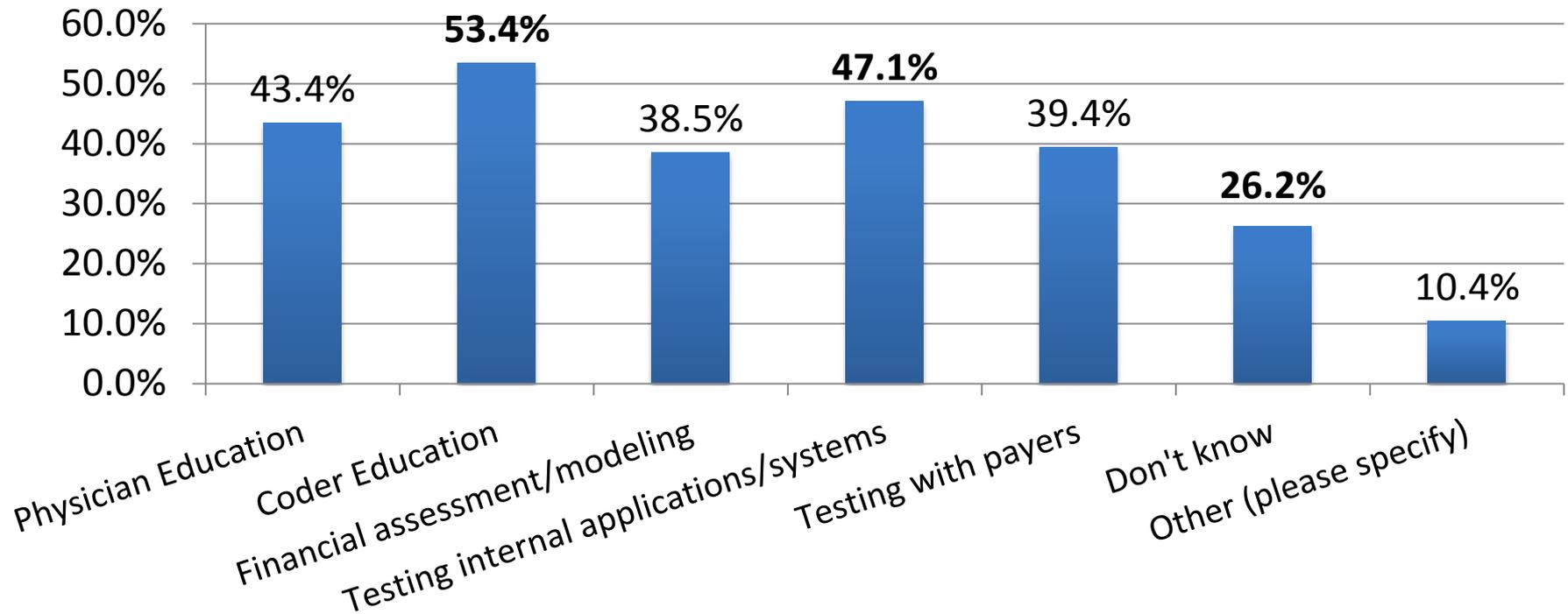
■ Manager / Supervisor ■ Executive / President / Vice President ■ Director of HIM ■ Coding (inpatient or outpatient) ■ Clinician (MD, RN, etc)



# Expected strategies to mitigate potential negative impacts to coder productivity

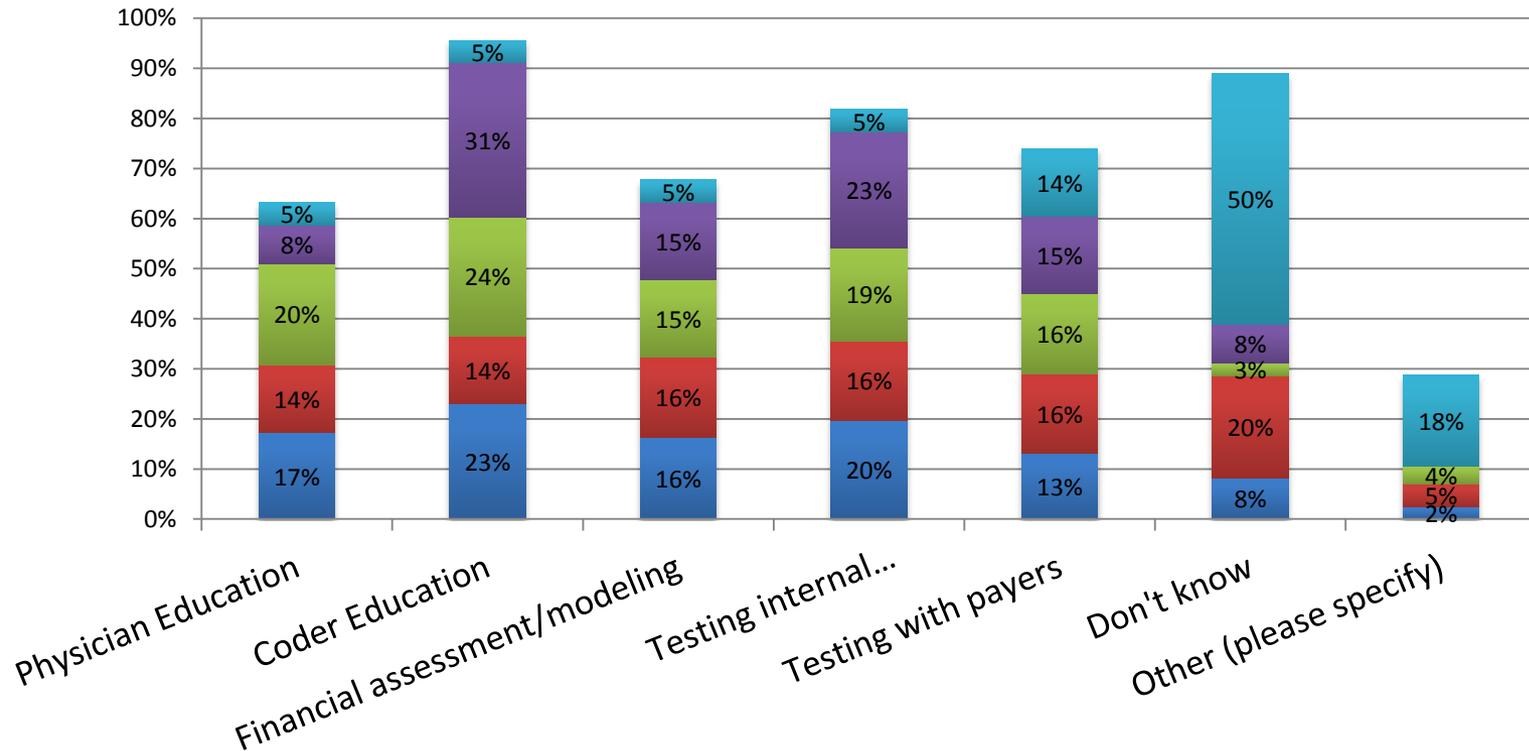


# How to utilize data if staff is dual coding ICD-9 and ICD-10

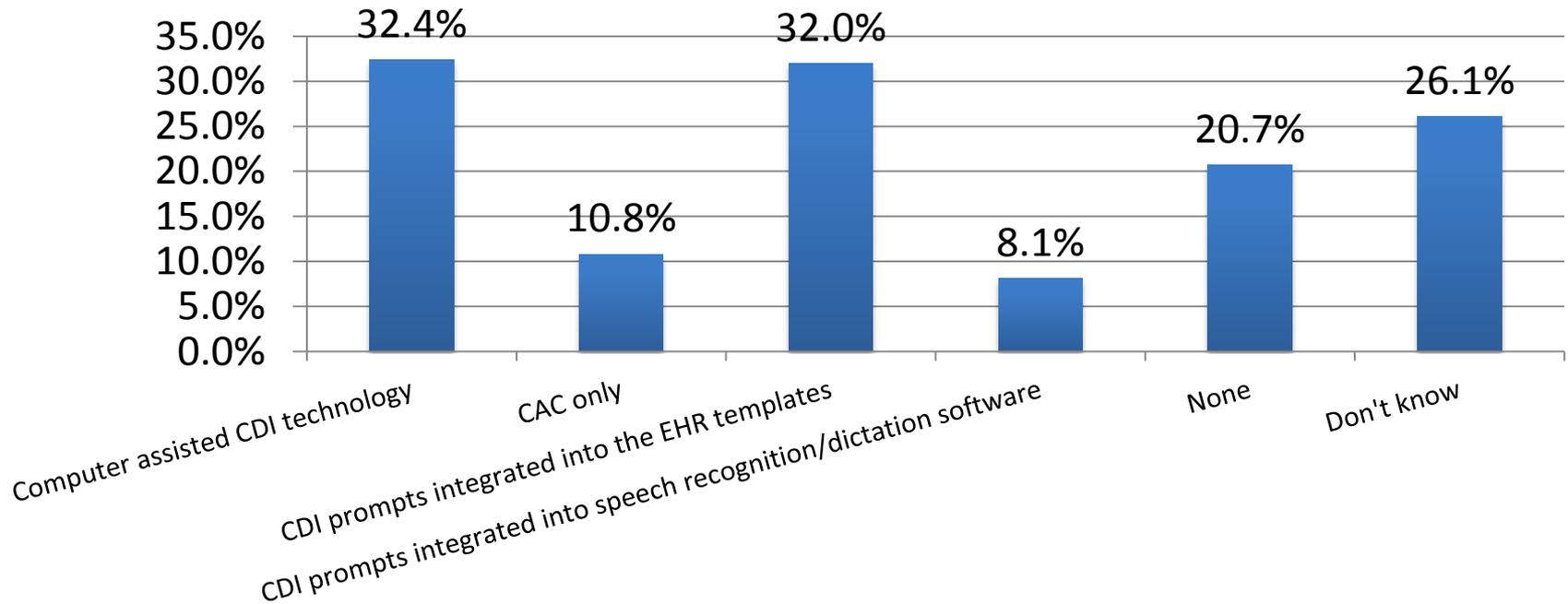


# How to utilize data if staff is dual coding ICD-9 and ICD-10

■ Clinician (MD, RN, etc) 
 ■ Coding (inpatient or outpatient) 
 ■ Director of HIM 
 ■ Executive / President / Vice President 
 ■ Manager / Supervisor

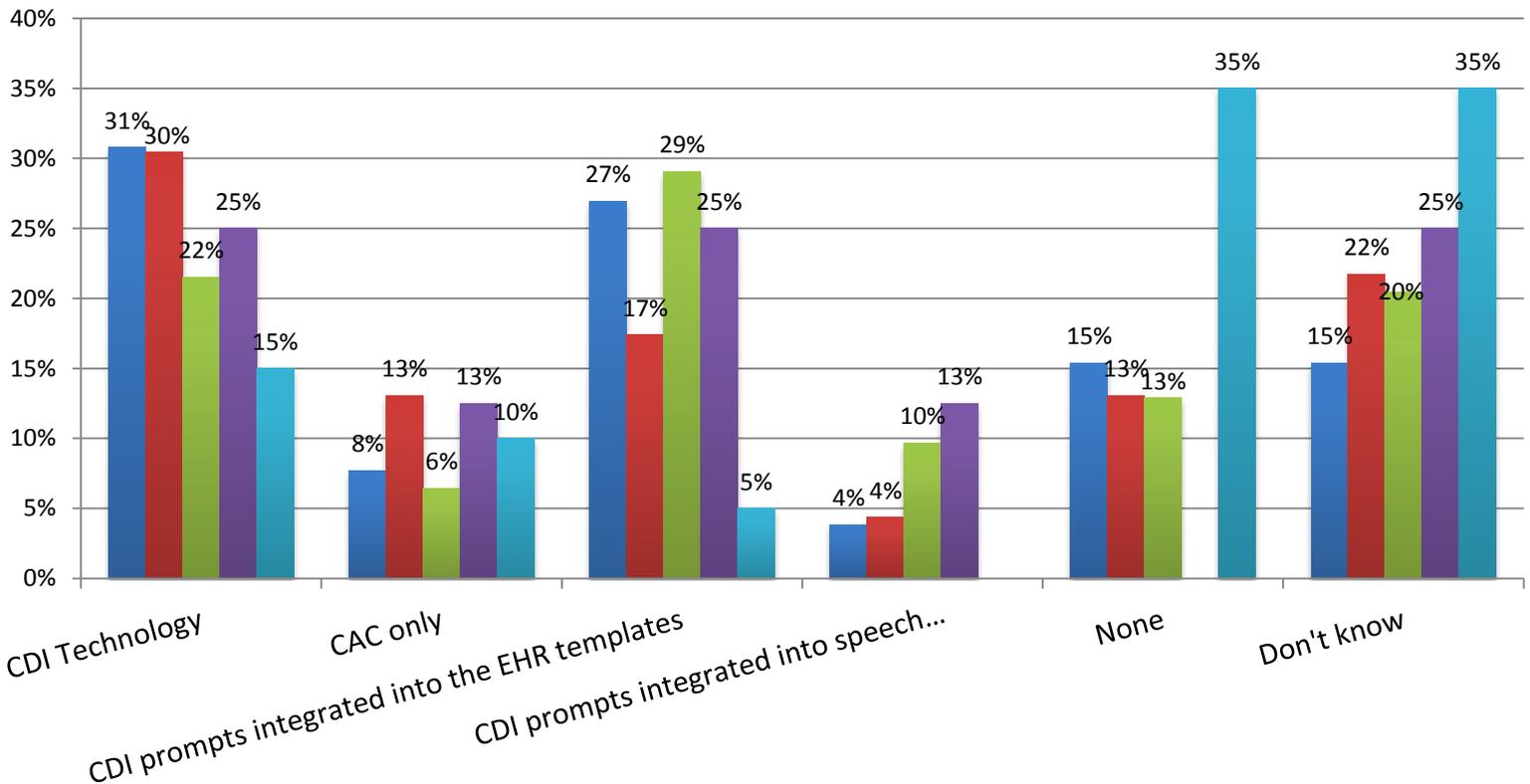


# Desired technology to be leveraged to achieve the increased specificity of physician documentation of ICD-10

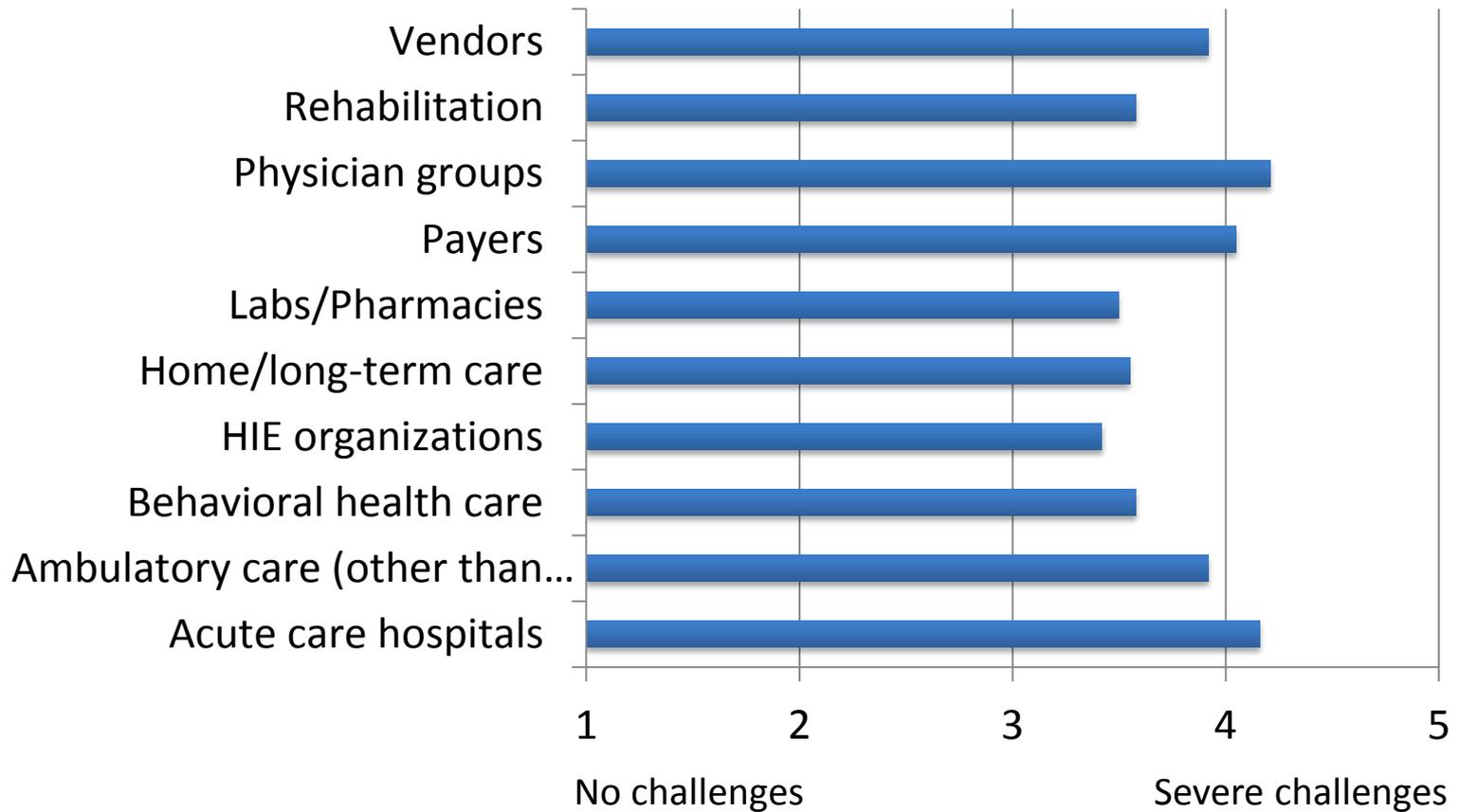


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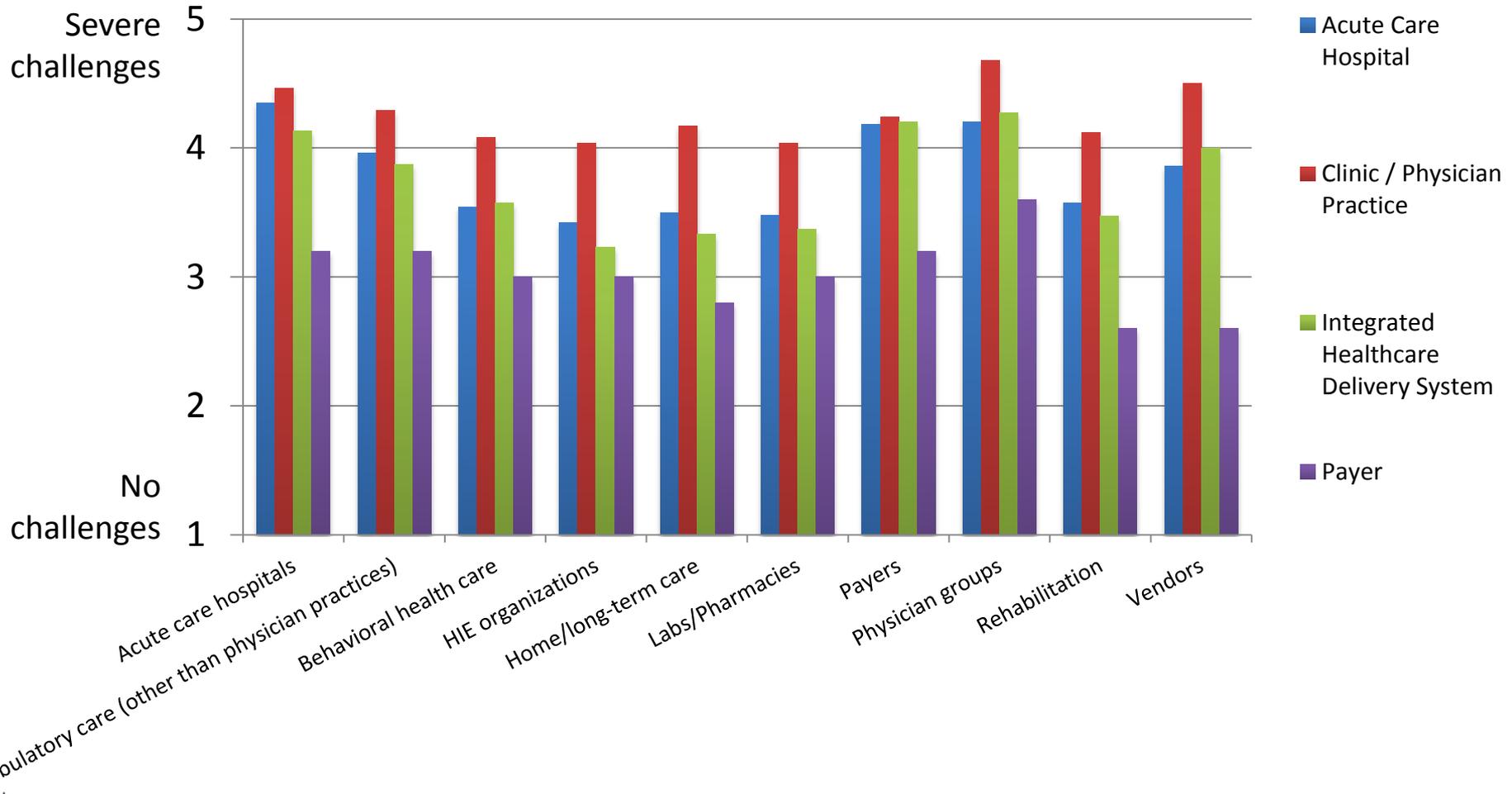
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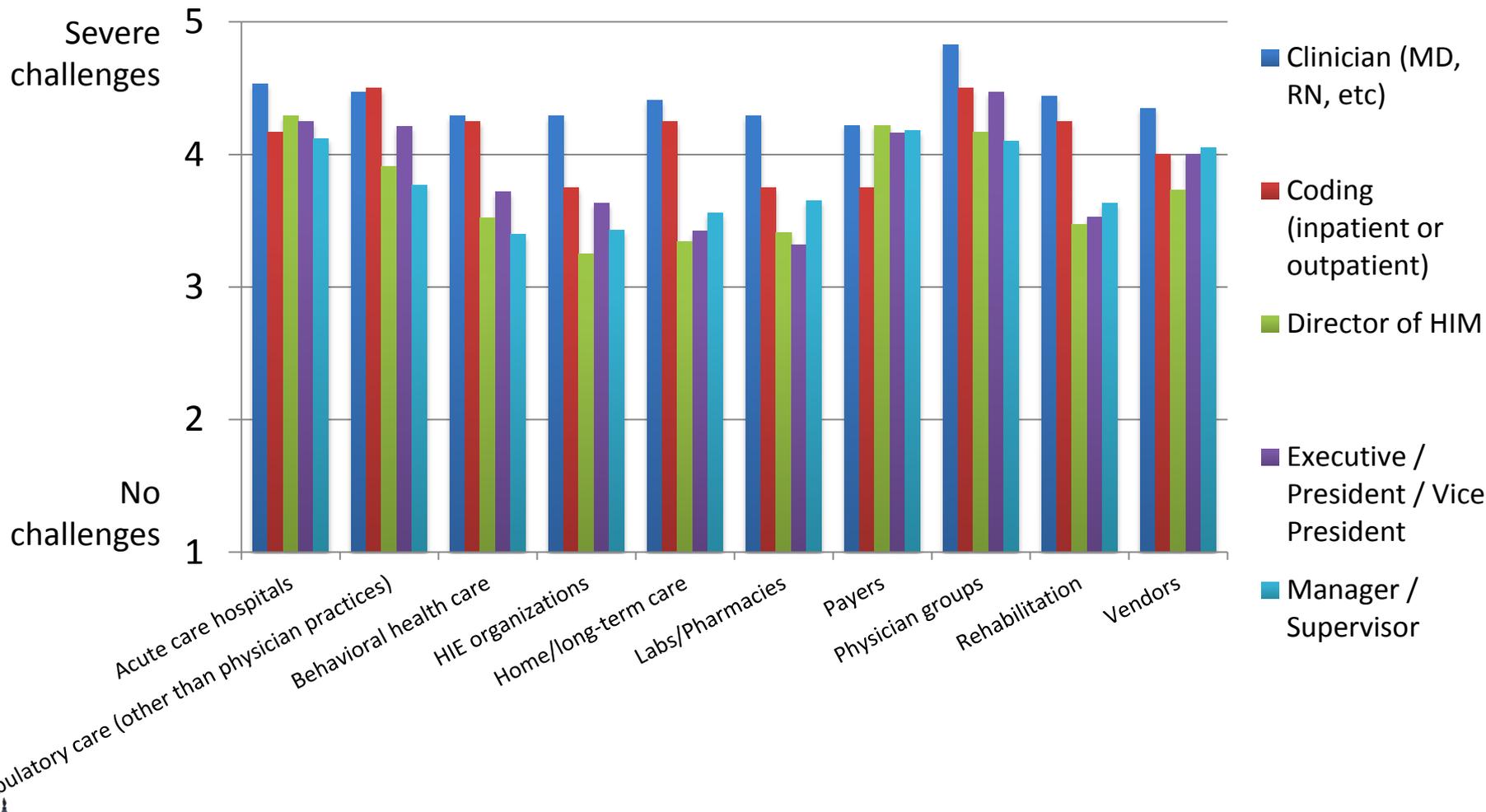
# Level of challenges and barriers that each of the following stakeholders will experience following ICD-10 implementation



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# Reactionary Panel



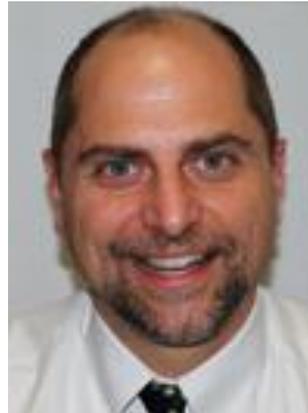
**Allison Viola, MBA, RHIA**  
Vice President, Policy and  
Government Affairs  
*eHealth Initiative*



**Sue Bowman, MJ, RHIA,  
CCS, FAHIMA**  
Senior Director, Coding  
Policy and Compliance  
*AHIMA*



**Ann Chenoweth, MBA,  
RHIA**  
Senior Director of Industry  
Relations  
*3M Health Information  
Systems*



**John Lucabaugh, MBA,  
RHIA**  
Vice President of Health  
Information Management  
*Summit Health*



# Questions?

*Please submit via the Chat feature*



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AUGUST 1-2, 2013 WASHINGTON DC

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Office of the National  
Coordinator (ONC)



**John Glaser**  
Chief Executive Officer  
Health Services  
*Siemens Healthcare*



**Sam Ho**  
Executive Vice President  
and Chief Medical Officer  
*United Healthcare*



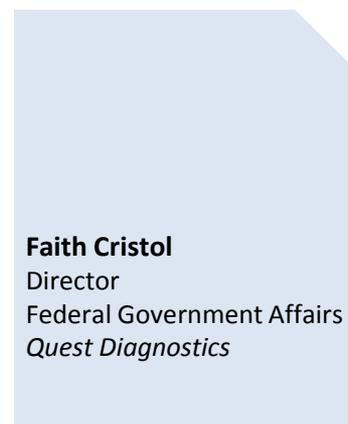
**Tehseen Salimi**  
Vice President  
Global Evidence and Value  
Development  
*Sanofi-Aventis*



**Marcus Wilson**  
Pharm.D., President  
*HealthCore*



**George Lazenby**  
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*OptumInsight*



**Dan Garrett**  
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Practice Leader *PwC*



**Christopher Ross**  
Chief Information Officer  
*Mayo Clinic*

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## PANEL DISCUSSIONS - DAY 1

Achieving Quality Improvement Through Data and Analytics

Predictive Analytics for Genomics and Personalized Medicine

Leveraging Analytics to Facilitate Accountable Care

Health Insurance Exchange (HIX) Analytics

For Big Data to Realize its Promise, Industry Collaboration Will Be Key

## PANEL DISCUSSIONS - DAY 2

Driving Down Healthcare Costs: Using Data and Analytics to Achieve Savings

Care Transformation in Oregon and the Use of Data and Analytics

Analytic Techniques for Community, Population Health Management and Surveillance

Integration of Big Data and EHR Systems

Policy/Privacy Issues in the Era of Big Data & Analytics

Building the Business Case for Data Analytics

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