Top 10 List: Phase 2

ICD-10-CM/PCS Implementation Preparation

Time Frame: First Quarter 2011–Second Quarter 2013

The implementation date for ICD-10-CM/PCS has been established as October 1, 2013, and CMS has reiterated that the date will not be delayed (www.cms.gov/ICD10/Downloads/ICD-10MythsandFacts.pdf). This is a wide-reaching project that impacts financial and clinical systems and operational aspects throughout organizations. In early 2011, Phase 1 of the ICD-10-CM/PCS Implementation Plan Development and Impact Assessment will come to a close and Phase 2, ICD-10-CM/PCS implementation preparation, begins. As identified in the Top 10 List for Phase 1, it is important to note that ICD-10-CM/PCS and 5010 implementation are not mutually exclusive; it is critical to work on both of these projects simultaneously. In other words, do not dedicate exclusive time and resources to completing 5010 implementation and then expect to start working on ICD-10-CM/PCS afterwards, because the implementation of ICD-10-CM/PCS requires as much time as possible to complete all steps in each of the four phases by 2013.

This **Top 10 List: Phase 2–ICD-10-CM/PCS Implementation Preparation** outlines tasks to help facilitate this process. The list is intended to highlight key areas and should be used in tandem with the more complete "ICD-10-CM/PCS Transition: Planning and Preparation Checklist" at www.ahima.org/ICD10. This brief resource identifies key tasks that must be done in Phase 2 of the implementation project, but the steps are not necessarily listed in the order of completion. The tasks are all interrelated and may need to be done simultaneously rather than sequentially. HIM professionals should take an active leadership role in this project by offering expertise and sharing resources with those involved in ICD-10-CM/PCS implementation.

1. **Continue Impact Assessment and Initiate Resolutions**
   a. Implement, test, and validate systems changes identified via impact assessment
   b. Develop and modify policies and procedures and processes for the new systems
   c. Assess the effect of the new changes on the workflow of the institution

2. **Continue to Evaluate the Effect on Data Analysis**
   a. Identify major areas of change between ICD-9-CM and ICD-10-CM/PCS that impact data comparison and reporting for both internally and externally reported data
   b. Determine the impact of transition on longitudinal data analysis and consider:
      i. Legacy data requiring conversion and how this will be accomplished
      ii. Application-specific mappings requiring development for coded data and whether it will be mapped between ICD-9-CM and ICD-10-CM/PCS by using the General Equivalence Mappings (GEMs)
      iii. Which data will be linked by using mapping applications and which data will be maintained separately according to the source code set

2. **Continue to Evaluate the Effect on Data Analysis** *(continued)*

   c. Provide information on the use of the GEMs to personnel who will be involved in data-conversion projects

   d. Identify the business associate's process for applying GEMs to determine appropriate interpretation

3. **Monitor Business Associate Readiness (including payers, providers, system vendors, and electronic data interchange trading partners)**

   a. Follow up periodically on the readiness status of business associates for updates on ICD-10 transition progress

   b. Use the AHIMA vendor questionnaire when working with vendors

   c. Identify any changes to the readiness timeline communicated during Phase 1

4. **Implement the Training/Education Plan Identified During the Impact Assessment**

   a. Continue educating coding staff on ICD-10 code sets and guidelines, biomedical sciences, and pharmacology

   b. Begin educating all others based upon timelines and roles concerning:

      i. Characteristics of ICD-10-CM/PCS

      ii. ICD-10-CM Official Guidelines for Coding and Reporting and ICD-10-PCS Coding Guidelines

      iii. Data comparability issues

      iv. Quality reporting

      v. GEMs and their role in the transition process

5. **Update and Reassess the Project**

   a. Review and update internal timelines and project plans

   b. Make necessary staffing adjustments to complete identified tasks

   c. Perform budget assessment review and adjust as needed

6. **Continue to Assess Clinical Documentation Improvement (CDI) Practices**

   a. Evaluate the detail and quality of medical record documentation

   b. Implement and monitor documentation improvement strategies

      i. Continue to collaborate with physicians

      ii. Provide training on CDI to providers

   c. Assess vendor-supported CDI tools

7. **Review the Potential Reimbursement Impact During Transition**

   a. Evaluate potential diagnosis-related groups shifts and case mix index changes

   b. Actively establish correspondence with payers concerning possible revisions in reimbursement schedules and policies, paying careful attention to conversion policies

   c. Discuss individual payers' mapping strategy

   d. Analyze the impact on reimbursement due to improved clinical documentation

8. **Develop Risk Mitigation Strategies to Minimize Transition Problems and Maximize Opportunities for Successful Transition**
   a. Identify other potential problems or challenges during the transition
   b. Implement strategies aimed at reducing the potential negative effect

9. **Develop a Strategic Plan to Prevent Decreased Coding Productivity and Accuracy**
   a. Identify what steps can be taken to diminish the effects of decreased productivity
   b. Review and determine the effect or impact of decreased coding accuracy, and develop a quality improvement plan as needed

10. **Expand the ICD-10 Communication Plan**
   a. Continue to create awareness of the project and communicate progress to all stakeholders
   b. Expand your communication plan in preparation for go-live.
   c. Develop a contingency plan for continuing operations if critical systems issues or other problems occur when the ICD-10 implementation goes live.

For more detailed information on each step listed above, review the AHIMA ICD-10-CM/PCS Transition: Planning and Preparation Checklist.

References:

American Health Information Management Association (AHIMA). *ICD-10-CM/PCS Transition: Planning and Preparation Checklist* at www.ahima.org/downloads/pdfs/resources/checklist.pdf

Centers for Medicare & Medicaid Services. ICD-10. www.cms.gov/ICD10

Note:

A Top 10 List: Phase 1—ICD-10-CM/PCS Implementation Preparation was released earlier and is available at www.ahima.org/icd10/preparing.aspx.

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