BREAKING THE CODE:
The Impact of ICD-10 on Documentation and the Need for Organization-Wide Education
ICD-10 Impact

**Coder Productivity**

Change in Charts Coded per Hour
- 3-12 Mos. post transition
- Long Term
  - -5% to -10%*

**Coder:** -20%
- Inpatient: ~5 charts/day
- Outpatient: ~8 charts/day
- ER: ~24 charts/day

**Coding Manager:**
- -35% to -50%

**Physician Productivity**

Increase in Queries DNFB / DNFC
- -10% to -20%
- +45 to +90 min/day

**Rework**

Increase in Inquiries, Claims Adjustments & Rejections
- -10% to -25%

Source: Advisory Board Research & Analysis, recent Precyse customer data

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ICD-10 is one of the most pervasive changes in our industry’s history

It impacts every step along the Revenue Cycle

This presentation will look at:

- Impact on Documentation
- ICD-10 ‘Scary Areas’
- Need for Organization-Wide Education
- Nationwide Best Practices
The ICD-10 Code Systems
The ICD-10 classification systems will increase from a total of 17,849 codes in ICD-9 to over 170,000.

ICD-10 offers the opportunity to show the severity of our patient’s illnesses and the amount of services needed to care for them.

The increase in codes is irrelevant when it comes to education.
ICD-10-CM looks different than ICD-9-CM in its organization and structure, code composition and level of detail.

<table>
<thead>
<tr>
<th><strong>ICD-9-CM</strong></th>
<th><strong>ICD-10-CM</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Consists of three to five characters</td>
<td>• Consists of three to seven characters</td>
</tr>
<tr>
<td>• First character is numeric or alpha (0 or E)</td>
<td>• First character is alpha</td>
</tr>
<tr>
<td>• Second, third, fourth, and fifth characters are numeric</td>
<td>• All letters are used except U</td>
</tr>
<tr>
<td>• Always at least three characters</td>
<td>• Second and third characters are numeric</td>
</tr>
<tr>
<td>• Decimal is placed after the first three characters</td>
<td>• Fourth, fifth, sixth, and seventh characters can be alpha or numeric</td>
</tr>
<tr>
<td></td>
<td>• Decimal is placed after the first three characters</td>
</tr>
</tbody>
</table>
This example of an ICD-10-CM code is for the ‘injury of digital nerve of right index finger, initial encounter’.

As can be seen, an ICD-10-CM code provides far greater specificity than current ICD-9 codes. In fact, a great number of single ICD-10 codes would require multiple codes to ‘say’ the same thing in ICD-9.
Not as complex as it looks . . .

- Most common code length is 4 characters
- Single code captures clinical picture
- First character indicates disease category
The code follows logical method with alphabetical index and tables similar to ICD-9.

- 25% of codes differ only by laterality.
- 25% of codes differ only by encounter type or trimester.
Here is the structure of an ICD-10-PCS code. The illustration also includes the name of the character. Each ICD-10-PCS code is composed of seven characters.

<table>
<thead>
<tr>
<th>SECTION</th>
<th>BODY SYSTEM</th>
<th>ROOT OPERATION</th>
<th>BODY PART</th>
<th>APPROACH</th>
<th>DEVICE</th>
<th>QUALIFIER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medical &amp; Surgical</td>
<td>Gastro-intestinal</td>
<td>Resection</td>
<td>Sigmoid Colon</td>
<td>Open</td>
<td>No Device</td>
<td>No Qualifier</td>
</tr>
</tbody>
</table>

In the example above, this code is for:
0DTN0ZZ – Resection of Sigmoid Colon, Open Approach (or Sigmoid Colectomy)
- CPT and HCPCS are not changing

- CPT will remain the procedural system for Outpatient, HCPCS the service/supply system

- CPT and HCPCS though are not immune from the impacts of ICD-10

- Diagnostic codes in ICD-10-CM will be under extra scrutiny to show medical necessity for the chosen CPT and HCPCS codes (Ex: Laterality)
ICD-10 and its Impacts on Documentation
Here are some of the major impacts of the changes within ICD-10-CM that impacts those who interact with the medical record and/or the codes.

**Key Documentation Impacts in ICD-10**

- Axis of Classification
- Possible 7-digit codes
- Laterality
- Trimester Specificity
- Drug/Alcohol/Tobacco
- 7th Digit Expansion Codes
- Complication Codes
- Combination Codes
- Increased Specificity
An Example of the Impact

- ICD-10 often combines disease specificity, common sites/locations, and manifestations of the disease into one code
- Non-specific documentation (such as Regional Enteritis) will result in significant increases in queries

Regional enteritis of the large intestine

Unspecified intestinal obstruction

K50.112
Crohn’s Disease of the large intestine with intestinal obstruction

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### Hemorrhoids and SOI

<table>
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</thead>
<tbody>
<tr>
<td>455.-</td>
<td>K64.-</td>
</tr>
<tr>
<td>10 Hemorrhoid codes</td>
<td>8 Hemorrhoid codes</td>
</tr>
<tr>
<td>• External</td>
<td>• Degree of severity</td>
</tr>
<tr>
<td>• Internal</td>
<td>(First to Fourth)</td>
</tr>
<tr>
<td>• Unspecified</td>
<td></td>
</tr>
</tbody>
</table>
For ICD-10-PCS:

- All diagnostic information is excluded

- Standardized and self-contained
  (No Latin, terms have one definition, etc)

- No more Eponyms

- No more unspecified procedures
Typically, Operative Reports can provide far more detail and specificity.

However, the weakness of procedural documentation may become more evident in ICD-10 than we see today.

Laterality, Site specificity, and some basics of documentation are often not included, in ICD-10-PCS, this will stop coders in their tracks.

Bedside procedures will be especially concerning.
- Avoiding umbrella/non-specific codes
- Specific documentation of underlying conditions and manifestations
- ICD-10 ready templates/prompts
- Telling the ‘whole’ clinical story
- Drive severity of illness/medical necessity
THE CHALLENGE OF ICD-10-CM

ICD-10-CM represents a significant challenge on documentation, while the coding system represents less of a challenge for coders.

THE CHALLENGE OF ICD-10-PCS

ICD-10-PCS documentation will be less of a concern, while the coding system represents a significant challenge for coders.
ICD-10 and Organization-Wide Education
The Approach

Due to the various learner populations impacted, a successful education approach for ICD-10 must include:

- Formalized plan
- Initial Assessments/Audits
- Specific education for each of the impacted populations
- Must use a myriad of education and communication approaches
- Strong reporting to ensure compliance
We have identified over 50 ‘Impacted’ populations of ICD-10 requiring education:

- Patient Access
- Nurses
- Case Managers
- Physicians
- Quality Assurance
- Utilization Review
- Claims Review
- Finance/Patient Financial Services
- Contract Management
- IT/IS
- Senior Management
- Human Resources
- Compliance
- HIM Staff (MTs, CTRs, and other HIM Staff)
- HIM and Coding Managers
- Auditors
- Outpatient Coders
- Inpatient Coders
Physicians

Ancillary Departments

Finance

HIM

Coders

IT/IS

The ICD-10 Tree

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The Unit Nurse documents the ongoing complications a patient is experiencing. The attending speaks to the nurse on Rounds and uses these updates to document the issues. If the unit nurse is not educated on ICD-10 documentation requirements, this transfer of documentation may lead to lack of required specificity, and ultimately, query.
Ancillary providers are a diverse group, working in the lab, imaging, physical therapy and pharmacy.

Physician orders a spinal scan because of suspicion of a pathological fracture. Radiology sends results stating L5 has pathological fracture, but it does not note the laterality. Physician uses report to re-state the relevance and the diagnosis, but due to its absence, does not document the laterality resulting in lack of specificity in ICD-10.
Pharmacist wants to start a coagulation clinic to help patients monitor their anti-coagulation medication. To determine volume for clinic, Finance analyzes the number of patients taking medication for anti-coagulation. If ICD-10 coding is accurate, then this data will be easily retrieved allowing better financial and operational decisions.
It is September 2015 and the organization needs to find more ICD-10 Ready coders. There is no ICD-10 credential for coders, so Human Resources is forced to just ask candidates if they know ICD-10. With ICD-10 training, Human Resources will know that they will need pre-employment tests to ensure the best candidates are selected.
- Housekeeping
- Food service workers
- Maintenance
- Supply chain management
- Chaplain
ICD-10 Education Planning

- Minimal Impact
- Learn basics of ICD-10, its impacts across the revenue cycle, and what they need to know for the transition
- Approximately only 1 to 4 hours of coursework

**BASIC USERS**

- IT/IS
- Human Resources
- HIM (CTRs, MTs, and other staff)
- Senior Management
Minimal to Medium Impact

Clinical users will use ICD-10 coded data more than basic users

Need to understand impact of documentation within ICD-10

Approximately only 2 to 8 hours of coursework

CLINICAL USERS

- Patient Access
- Compliance
- Data Analysts (QA, UR, CR)
- Contract Management
- Patient Financial Services
**Significant Impact**

- Documenters are key to a successful transition
- It will be more than just physicians
- Approximately 2 to 12 hours of coursework depending on their role and function
**Significant Impact**

- This includes all types of coders and other heavy users of coding systems.

- For Outpatient coders, courseware with lab time is 32 hours.

- For Inpatient coders, courseware with lab time is 67 to 72 hours.
Still time to create a Tiger Team that takes the education before everyone else

Allows you to develop ‘super users’ who will be able to help others, answer questions, and provide potential training

Comprised of individuals from all major education groups, such as coders, CDIS, physicians, and others
Most of our clients view the Clinical Documentation Improvement Specialist role as the most critical to success

Will be using them to:

- Do face-to-face physician education
- Integrate documentation education into current practices
- Rework queries/forms
- Develop additional education collateral and printable documents
Due to the make-up of learners, must use many methods to reach all learner types

Some of these include:

- eLearning
- Simulators/Practice Tools
- Mobile/SmartPhone Apps
- Job Aids/Printed resources
- Communication collaterals
- Virtual Chats/Discussion Forums
- Classroom education
Get Physician Buy-In

- Need Clinical Leadership Support
- Make it practical, convenient and mobile
- Use a combination approach eLearning, peer-to-peer, and internal programs
- Communicate the ‘What’s In It For Me’ effectively
Have A Strong Communication Plan

- Essential to look at ICD-10 as an Education and Communication event

- Others are using:
  - Posters/Collaterals for awareness
  - E-mail Blasts
  - Organization Newsletters
  - Mailbox Stufflers
  - Organization Webinars
  - ICD-10 Website on Intranet
ICD-10 continues to change and show impacts beyond the annual code changes.

It is critical that your organization has a person, a team, and/or a vendor that is filtering the ‘noise’ and funneling the important new and impactful information to the broader organization.
Questions?