Phase 2 Plan for ICD-10 Implementation

Time Frame: June 2012 through December 2012

The International Classification of Diseases Tenth Revision (ICD-10) transition from ICD-9 will be a complex and enterprise-wide endeavor for the Indian Health Service (IHS). The IHS National ICD-10 Team has compiled a series of documents to highlight activities that support the implementation. The Phase documents (1 - 4) are meant to inform IHS facilities, Tribal, and Urban programs (I/T/U) of the high-level activities that occur in each phase.

ICD-10 Awareness and Communication

Continue efforts toward spreading ICD-10 awareness:

- Use the presentations available on the IHS ICD-10 Website and pre-recorded Webinars.
- Encourage others to join the Listserv to be informed of ICD-10 related efforts.
- Communicate with your Area ICD-10 Coordinator and other stakeholders.

Impact Assessment Continuation and Changes

In the first phase, initial assessments were made to your work environment: documentation, processes, operational readiness, revenue streams, etc. In this phase, work continues to understand and prepare for the transition.

- Continue assessments on workflow, documentation, processes, and procedures.
- Make changes to operating processes as needed.

Reporting and Analysis

The IHS National ICD-10 Team is reviewing the change requirements for reporting and analysis at the national level. This would include RPMS and its applications, the data warehouse, the personal health record, health information exchange, and the reports for the Government Performance and Results Act (GPRA). The national team may not be aware of reporting and analysis performed at your facility.

- Identify data comparison and reporting needs that may be impacted by the transition.
- Consider any longitudinal data analysis.
- Consider General Equivalence Mappings (GEMs) and the role in the transition; information on GEMs will be available on the IHS ICD-10 Web site.

Business Associate, Vendor, and Payer Readiness

In Phase 1, business partner readiness was assessed initially. It will be important to maintain communications on IHS progress and business partner progress for an effective transition:

• Establish regular communications with business associates, vendors, and payers for status updates.

• Alert the IHS National ICD-10 Team to any changes in the initial readiness timelines.

Training Plan Implementation

Awareness of ICD-10 should become a regular part of I/T/U communications. Reinforce the national deadlines and local milestones:

- Continue training for coding staff on foundational and ICD-10 topics.
- Begin role-based training as outlined in the training plan.

Clinical Documentation Improvement Efforts

In the first phase, an initial review of clinical documentation was conducted to assess impact from the transition. In the second phase, a more detailed review of clinical documentation should be conducted with an eye toward improvement strategies:

- Review clinical documentation for quality and detail.
- Implement improvement strategies with the collaboration of providers.

Revenue Cycle

The transition from ICD-9 to ICD-10 may impact revenues. Coder and physician productivity may be impacted until proficiency is gained. Some payers may not be fully converted by October 1, 2013:

- Conduct an in-depth analysis on potential revenue losses due to productivity decreases, rejected claims, and improved clinical documentation.
- Communicate with payers to understand transition timeline and any impacts to reimbursement from policy changes, reimbursement schedules, etc.

Risk Management

The risks identified in the first phase should be refined and risk management strategies identified to manage the risks:

- Continue documenting risks and strategies to accept, transfer, avoid, mitigate, or manage risks.
- Escalate risks/issues that impact national efforts to the national team.
- Develop an initial contingency plan in preparation for the transition.

Resource and Patient Management System (RPMS)

Continue with efforts to ensure that RPMS applications are up-to-date with all patches, including security requirements.

Retention and Recruitment

The conversion to ICD-10 will mean drastic changes in workflow and knowledge for many functions but most especially for the coding function. With the scarcity of experienced coders

and new training making coders more saleable, it will be important to retain coders and continually recruit for experienced coders:

- Identify coders who may be retiring or leaving.
- Identify strategies for retention in keeping with facility/area policies.
- Develop new or use existing means for recruiting experienced and ICD-10 trained coders.

Sources: AHIMA Top 10 List, CDR Kelly Stewart (Phx AO), IHS ICD-10 Training sub-group