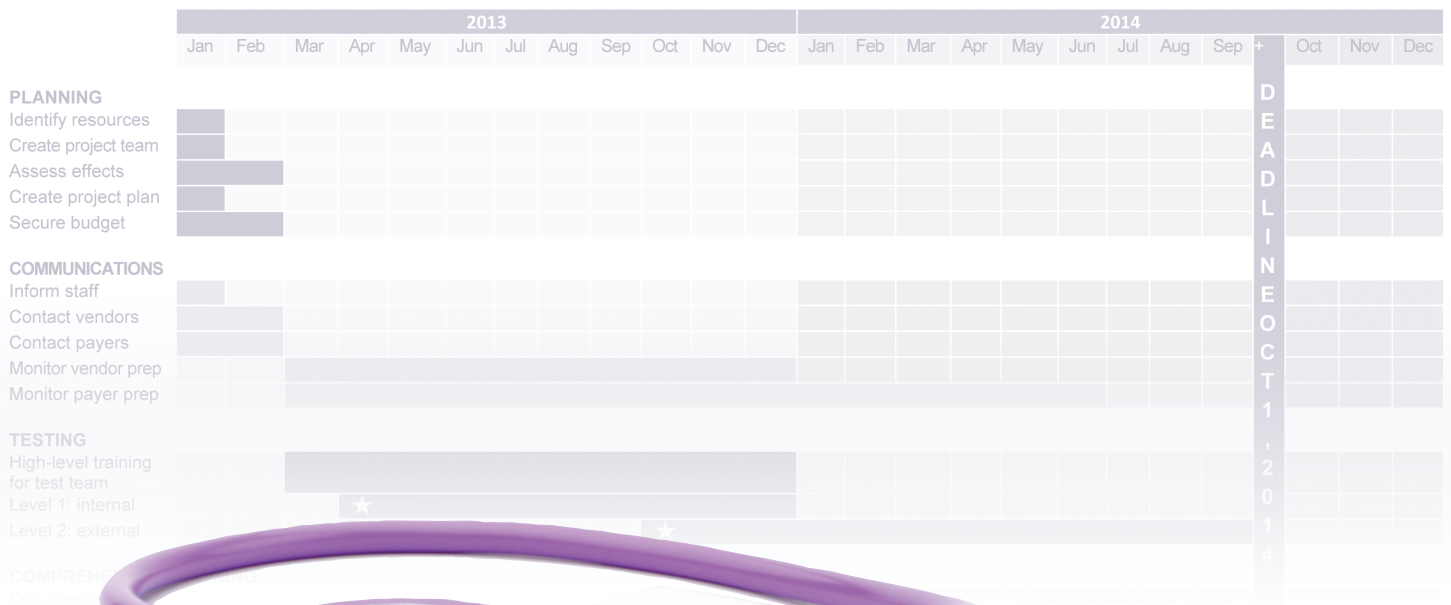


Chart a Cost-Effective and Simple Course to ICD-10



Change isn't easy, and it can be disruptive, especially if you aren't prepared for it. Big changes are coming in healthcare October 1, 2015 with the introduction of ICD-10, the tenth revision of the International Statistical Classifications of Diseases and Related Health Problems. The revision of classifications increases reporting diagnosis and procedures codes from 13,000 to 140,000. The complexity of the new codes will require a great deal more specificity, and implementing ICD-10 can potentially impact every area of your practice.

Not surprisingly, providers and others have Google searched "ICD-10" about 110,000 times per month recently, demonstrating the concern that exists about the change. If your practice isn't ready for this transition, you risk losing reimbursement and your practice could take a very large financial hit to its cash flow.

Despite all of the concern, ICD-10 can be a positive change for your practice. The current ICD-9 code is 30 years old, and the United States is the only industrialized nation that hasn't yet implemented ICD-10. The increased fine points of the new code set should result in more accurate data that can help to enhance your decision-making and improve reporting. It could also result in more precise, and potentially increased, reimbursements for your practice. Instead of viewing ICD-10 as a checkbox on a seemingly endless government compliance "to do" list, you can view it as a strategic opportunity for your practice.



Why is the switch to ICD-10 happening?

ICD-10 codes allow for greater specificity and exactness in describing a patient's diagnosis and in classifying inpatient procedures.

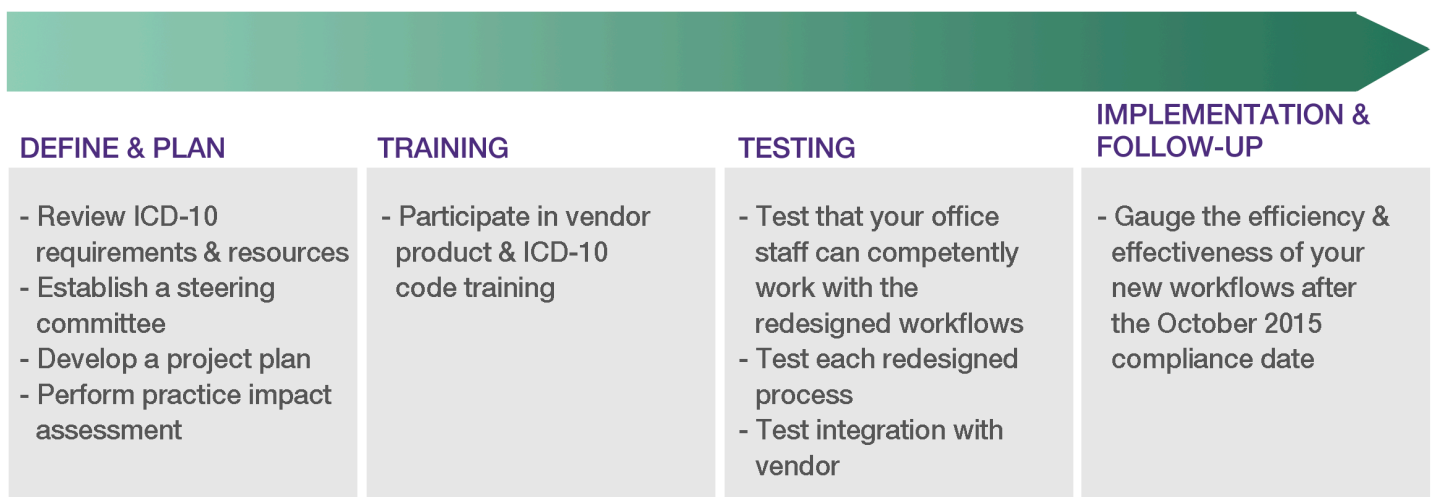
Will You Be Ready?

There's no shortage of resources offering guidance to help you prepare for the change-over to ICD-10. In fact, the amount of information can be overwhelming. Many of these resources come directly from the Centers for Medicare and Medicaid Services (CMS) and healthcare consultants offering tips and best practices.

Several common themes emerge from all of this advice, including the importance of planning for the changes to come and the need to evaluate the systems that you'll use before, during and after the transition. The following tips will help you simplify the process of gearing up for the switch to ICD-10.

Keys to Success

Plan. Nearly all of the ICD-10 implementation resources emphasize the importance of planning for the code change. Time flies, and you definitely don't want to get caught short with the October 1, 2015, deadline unexpectedly around the corner. Planning includes many different elements, from determining the amount of budget you'll need to invest in systems and staff training, arranging for any system implementation, and anticipating the potential revenue impact to your practice during the changeover.



Keys to Success (cont'd)

First, get organized to manage the project. If you have a small practice, assign a staff member to develop an implementation roadmap and plan training for the practice. In a larger practice, create an internal team to conduct an inventory of IT systems and determine the next steps that need to be done. This internal team can include providers, nurses, billing and IT staff, among others. Next, create a communications plan to ensure that all employees are aware of the upcoming changes and the importance of preparing for the new code set. You should also evaluate how the change will affect your office workflow, from the initial touch point of a patient scheduling an appointment to when an insurance company pays the bill.

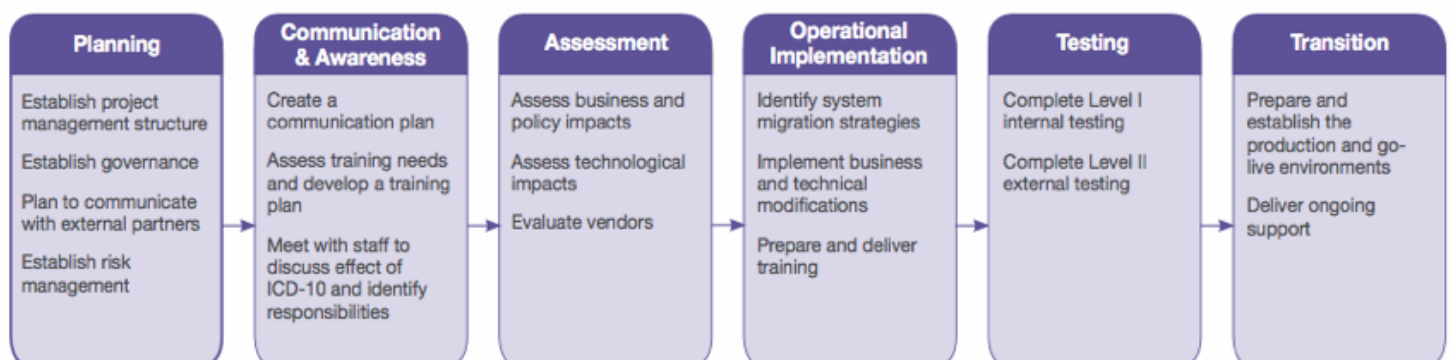
Contact your technology vendors. If your practice is using an Electronic Medical Records (EMR) system, Practice Management (PM) system and other billing systems, contact them and ask about their plans and preparedness for ICD-10. Questions you should ask include:

- Will your documentation workflow be specific enough for ICD-10?
- What is your ICD-10 implementation timeframe?
- What does the implementation process involve?
- How will the systems work with both ICD-9 and ICD-10 codes?
- What type of training and resources will you provide, and what will be the cost?

Communicate with your vendors early and often to ensure that you understand their readiness and that you're getting the answers you need. You may also want to inquire how your other service providers, such as coders and claims clearinghouses, plan to transition to ICD-10, and how that may affect your practice's plans. ICD-10 has many moving parts, so you'll want to ensure that all of your technology vendors and partners are moving forward with a clear plan.

Key phases of implementation

In "ICD-10 Implementation Guide for Small and Medium Practices," the Centers for Medicare and Medicaid Services identifies six key phases of implementation.



Test and Assess

If you plan to rely on legacy systems or manual coding processes to implement ICD-10, be sure to allocate time to test these processes in advance. Conduct an assessment to see if your coders can identify correct ICD-10 codes based on specific examples. Focus training on areas of weakness and allow time for practice and improvement.

Potential Roadblocks

What could prevent you from successfully meeting the October 1, 2015 deadline for ICD-10 implementation? Logistical issues might play a role; perhaps you're too busy managing the day-to-day business of your practice or focusing on other current government requirements and programs. Or, maybe the deadline just seems too far away. Aside from these factors, however, a very tangible roadblock to your success may lie in your not having the right systems in place to help support your ICD-10 transition.

If your practice still relies on paper charts for clinical documentation, you'll likely face a steep investment in time and money in the transition to ICD-10. If you fail to chart to the level of granularity that the new code set requires, your claims reimbursement may be significantly delayed. Your coding staff may hold off on submitting claims until they can clarify specific diagnoses with you. The complexity of the new codes also means that manual methods of coding, like a provider's memorizing frequently used codes or relying upon printed sheets of commonly used codes, may no longer be an option. Also, because your coding process is manual, there will be a greater need for training and more room for human error. This could increase the risk of an audit and may also delay claims reimbursement.

If your practice has an EMR system in place, understand if the system will automatically assign the exact ICD-10 code to a diagnosis, or if you'll need to select from a range of codes during or after the patient visit. Because of the specificity and long list of choices for the new code set, manually selecting codes from a range of choices could slow down your documentation at the point of care or leave you more vulnerable to choosing the wrong code.

Rely on a Technology Solution to Manage the Complexity

A report by Nachimson Advisors, commissioned by the Medical Group Management Association and other medical industry associations, estimated that the cost to practices of implementing ICD-10 could range from \$83,000 for a small medical practice to \$2.7 million for a large practice¹. These figures cover the estimated costs of:

- Staff education & training
- Business-process analysis of health plan contracts, coverage determinations & documentation
- Changes to superbills
- IT system changes
- Increased documentation costs
- Cash flow disruption

The good news is that there is an alternative. Instead of relying on manual methods or legacy technologies for coding, using state-of-the-art technology can help reduce, nearly all of these potential expenses associated with the transition to ICD-10.

New technologies are available that will manage the complexity of ICD-10 for you. Select a solution with an intuitive coding system that will automatically transfer your documentation into the correct, specific ICD-10 code. This type of dynamic coding functionality can take the manual steps out of the coding process and can provide you with the most specific ICD-10 code possible for a given diagnosis, rather than a confusing range of codes.



(1) Impact of Implementing ICD-10, Nachimson Advisors, LLC, October 8, 2008 pp. 3-5

A solution of this type that can also code with extreme accuracy could increase your reimbursements and reduce concerns about being out of compliance or risking an audit. A system that automates the coding process for you can give you a simpler user experience, increase your efficiency and allow you to better focus on patient care. It can also minimize the potential disruption in cash flow to your office during the transition to ICD-10.

Becker, Richard
Encounter - May 22, 2013

Sex: Male DOB: 08/21/1950 Phone: (555) 603-2137 MRN: 252885013

PATIENT INFORMATION					
LAST NAME Becker	FIRST NAME Richard	MI	SSN 522246032	DATE OF BIRTH 08/21/1950	SEX Male
STREET ADDRESS 80779 Park Lane			CITY Plantation		
STATE FL	ZIP CODE 78865	HOME PHONE 5556032137	CELL PHONE 5554635313		

PRIMARY BILLING / INSURANCE INFORMATION					
INSURANCE NAME Richard Becker	RELATIONSHIP Self	DATE OF BIRTH 08/21/1950	COMPANY NAME Aetna	GROUP/CONTRACT # 2094309	MEMBER ID # 280137904
STREET ADDRESS			STREET ADDRESS CONTD.		
CITY	STATE	ZIP CODE	EMPLOYER NAME	MEDICARE #	MEDICAID #

SECONDARY BILLING / INSURANCE INFORMATION					
SUBSCRIBER NAME	RELATIONSHIP	DATE OF BIRTH	COMPANY NAME	GROUP/CONTRACT #	MEMBER ID #
STREET ADDRESS			STREET ADDRESS CONTD.		
CITY	STATE	ZIP CODE	EMPLOYER NAME	MEDICARE #	MEDICAID #

Staff
Reddy Karuna (Primary Provider) (Bill Under)

Diagnoses		
Diagnosis	ICD Code	Description
1	L91.9	Skin hypertrophy/atroph

Procedures				
CPT/HCPCS	Description	Modifiers	Diagnosis Pointer	Units
11200	Removal of skin tags		1	1
11201	Remove skin tags add-on		1	2

Follow Up
Follow up in 6 months - 10 minutes

When selecting your technology solution, be sure to partner with a vendor that's agile and flexible, so that they can quickly respond to changes that may arise in government regulations. Selecting the right technology partner can help you to speed compliance cycles, reduce your costs and minimize potentially lost revenue.

While the ICD-10 implementation deadline isn't until October 1, 2015, it may make sense for you to make an investment now in a technology that will help you with ICD-10 later. By implementing now, you'll already be up-and-running on your system when the new code changes come into place. You'll avoid the pressure of having to implement and learn a new application under a tight deadline. In addition, a system with advanced billing and coding capabilities can start to deliver an ROI for you today, helping you to code with more confidence and accuracy.

Navigate to a Better Place

ICD-10 represents a major change, but it can be for the better. With the right tools and technology, you could navigate this change and land in a better place, both financially and operationally.

Modernizing Medicine's Electronic Medical Assistant® (EMA™) can help you chart a new path to ICD-10 and beyond.

Take a look at the EMR that is charting a cost-effective and simple course to ICD-10 at www.modmed.com



Additional ICD-10 Resources:

ICD-10 Provider Resources

Centers for Medicare and Medicaid Services

<http://www.cms.gov/Medicare/Coding/ICD10/ProviderResources.html>

What You Need to Know to Get Ready for ICD-10

<http://www.medicalbillingandcoding.org/icd10>

Modernizing Medicine® is transforming how healthcare information is created, consumed and utilized in order to increase efficiency and improve outcomes. Our product, Electronic Medical Assistant® (EMA™), is a cloud-based, specialty-specific electronic medical record (EMR) system with a massive library of built-in medical content, designed to save physicians time. Available as a native iPad application or from any web-enabled Mac or PC, EMA adapts to each provider's unique style of practice and is designed to interface with hundreds of different practice management systems. Today, Modernizing Medicine provides specialty-specific offerings for the dermatology, ophthalmology, orthopedics, otolaryngology, plastic and cosmetic surgery markets, and to more than 1,300 physician practices across the country. In 2013 Modernizing Medicine was listed on Forbes' annual ranking of America's Most Promising Companies.



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