ICD-10 - ARRA/HITECH - HIPAA 5010 -ACA

FIRST ANNUAL CASE MANAGEMENT CONFERENCE

March 4, 2011
Presented by:
Elaine Lips, RHIA



PRESENTATION OBJECTIVES

- Understand how the ICD-10, ARRA / HITECH, HIPAA 5010 and ACA initiatives are inter-related
- Compare compliance dates and timelines
- Understand critical success factors
- Questions / Answers



FIVE ENORMOUS INITIATIVES HAVE BEGUN THIS YEAR

ARE YOU WHERE YOU NEED TO BE?



I. 2009 ARRA / HITECH ACT Key Components

I.A. I.B. Medicare / Medicaid Comparative **HIPAA "TWO" Effectiveness** Incentive Research Confidentiality/ Privacy **Payments** (CER) and **Security Standards** Quality **MEANINGFUL USE of** Outcomes / **CERTIFIED EHRs** Reporting Providers / Hospitals **Work Force** Regional Health **Broadband Expansion Extension** Information **Telemedicine Centers** Exchange **Public Health** Intra- / Inter-Organizational

I.A. Beginning in October 2010* 2009 ARRA / HITECH Act

Incentive
Payments
MEANINGFUL USE
of
CERTIFIED EHRs
Providers / Hospitals

 Division B, Title IV: Electronic Health Record (EHR) Installations Incentive Payments are for "Adoption and Meaningful Use of Certified EHR Technology"

*Applies to Medicare ONLY – Eligible Hospitals

II. Compliance on January 1, 2012

1996 HIPAA Title II--Administrative Simplification Standards Modifications

The EDI Transactions Set

Version 5010 and D.0 Transactions

Applies to <u>ALL</u> (new / existing) HIPAA Covered Entities and <u>ALL</u> Accredited Standards Committee (ASC) X12 and National Council for Prescription Drug Program (NCPDP) transactions

HIPAA 5010 COMPLIANCE DATES

HIPAA 5010 EFFECTIVE DATE:

March 17, 2009

LEVEL I COMPLIANCE BY:

December 31, 2010

CMS Medicare Fee-for-Service Schedule:
 April 1, 2010 through December 31, 2010

LEVEL II COMPLIANCE BY:

December 31, 2011

CMS Medicare Fee-for-Service Schedule:
 January 1, 2011 through December 31, 2011

ALL CES FULLY COMPLIANT ON:

January 1, 2012

III. Beginning on October 1, 2013 ICD-10-CM / PCS

Physician

ICD-10-CM CPT / HCPCS

All Other

ICD-10-CM CPT / HCPCS Hospital

ICD-10-CM ICD-10-PCS

Inpatient

ICD-10-CM CPT / HCPCS

Outpatient

Long Term Healthcare

ICD-10-CM CPT / HCPCS Behavioral Health

ICD-10-CM CPT / HCPCS

Laboratory

ICD-10-CM CPT / HCPCS

IMPACT OF ICD-10

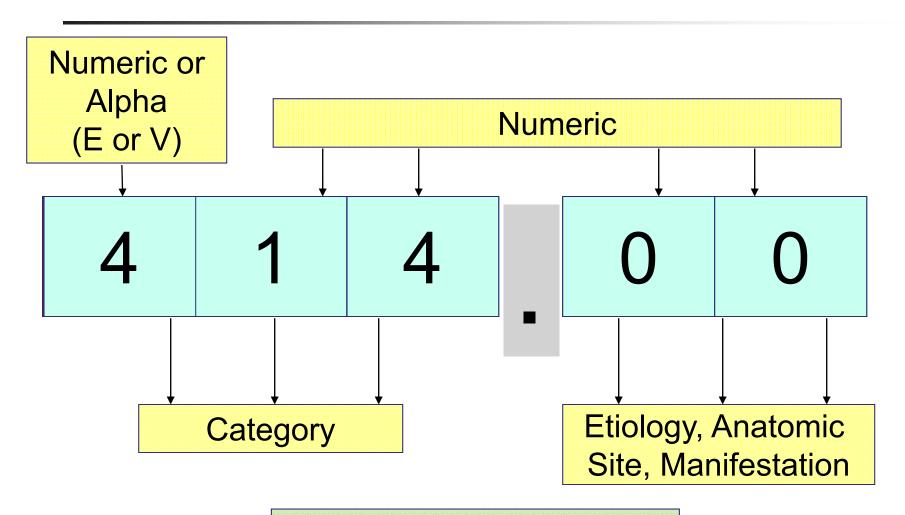
- Hospitals
- Laboratories
- Payers
- Pharmacies
- Clearinghouses
- Quality Organizations
- Electronic Health Record
- Physicians
- Federal/State Gov't Programs -Quality Organizations (TJC)
- Clinics
- Product Vendors

- Behavioral Health
- Long Term Care
- Urgent Care
- **Employers**
- CDC
- **Employers**
- Patients (PHR)
- Public Information
- Charities
- Public School Systems

ICD-10 IMPACT TO YOUR ORGANIZATION

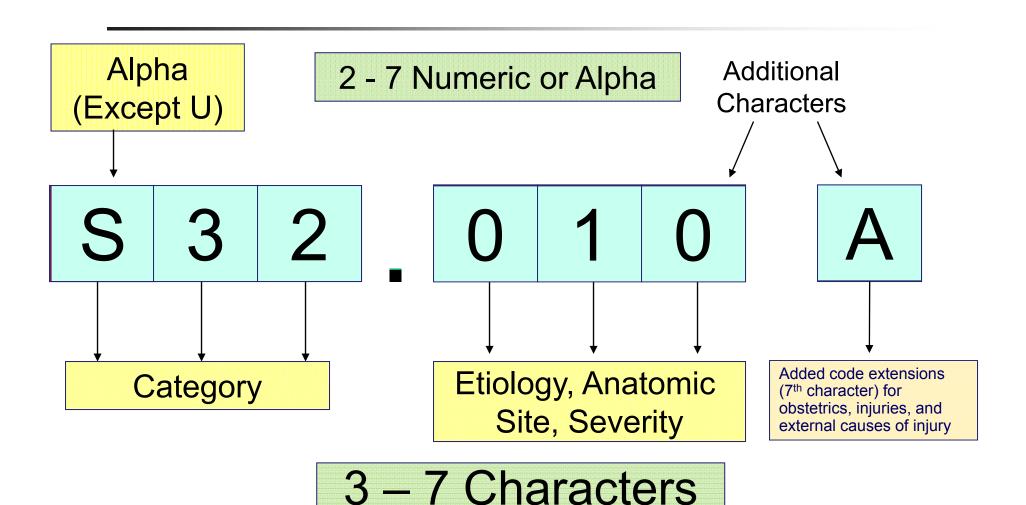
- Strategic and operational planning
- Improve clinical, financial & administrative performance
- Payment systems
- Claims processing
- Research, clinical trials, and other studies
- Measuring quality, safety & efficacy of care
- Tracking public health issues

ICD-9-CM Structure – Format



3 – 5 Characters

ICD-10-CM Structure – Format



Comparison of ICD-9-CM vs. ICD-10-CM (For Coding Diagnoses Only)

ICD-9-CM	ICD-10-CM		
Diagnosis Codes Only	Diagnosis Codes Only		
3-5 characters in length	3-7 characters in length		
Approximately 14,000 codes	Approximately 69,000 available codes		
First digit may be alpha (E or V) or numeric; Digits 2-5 are numeric	Digit 1 is alpha; Digits 2 and 3 are numeric; Digits 4-7 are alpha or numeric		
Limited space for adding new codes	Flexible for adding new codes		
Lacks detail	Very specific		
Lacks laterality	Allows laterality and bilaterality		
Difficult to analyze data due to non- specific codes	Specificity improves coding accuracy and richness of data for analysis		
Codes are non-specific and do not adequately define diagnoses needed for medical research	Detail improves the accuracy of data used for medical research		
Does not support interoperability because it is not used by other countries	Supports interoperability and the exchange of health data between the U.S. and other countries		

ICD-10-CM = GREATER TRANSPARENCY

CODE COMPARISON EXAMPLE: CORONARY ARTERY DISEASE with ANGINA

ICD-9-CM	ICD-10-CM
 2 codes needed: location of CAD – 8 codes (414.0X) type of angina – 4 codes (411.1, 413.X) 	1 code needed from 36 codes (I25.XXX) • Includes: • more specific location • with / without angina

THERE IS AN ICD-10 CODE FOR EVERYTHING!

Skateboarder Colliding Into The Wall of His Garage V00.132A



ICD-10-PCS - Structure

ICD-9-CM:

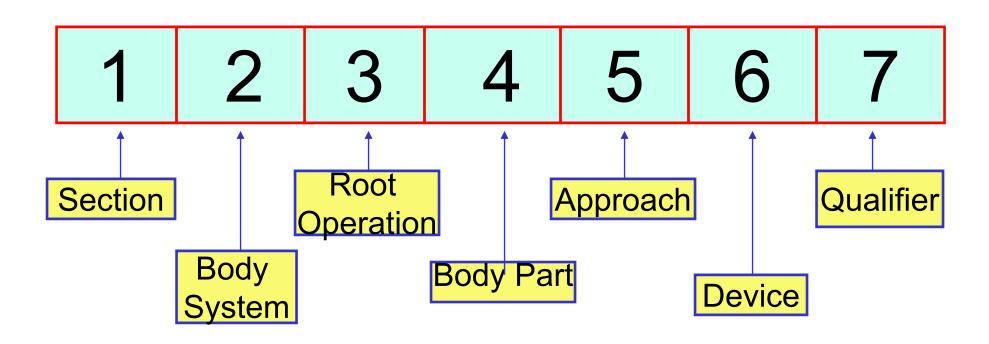
4 5

7 5

ICD-10-PCS:

0 D T G 0 Z

ICD-10-PCS – Structure Characters (Med/Surg)



Comparison of ICD-9-CM vs. ICD-10-PCS (For Coding Procedures Only)

ICD-9-CM Procedure Codes	ICD-10-PCS Procedure Codes		
3-4 numbers in length	7 alpha-numeric characters in length		
Approximately 3,000 codes	Approximately 71,000 available codes		
Based on outdated technology	Reflects current usage of medical terminology and devices		
Limits DRG assignment	Allows DRG definitions to better recognize new technologies and devices		
Limited space for adding new codes	Flexible for adding new codes		
Lacks detail	Very specific		
Lacks laterality	Has laterality		
Lacks description of methodology and approach for procedures	Provides detailed descriptions of methodology and approach for procedures		
Lacks precision to adequately define procedures	Precisely defines procedures with detail regarding body part, approach, any device used and qualifying information		
Generic terms for body parts	Detailed descriptions for body parts		

ICD-10-CM = GREATER TRANSPARENCY

CODE COMPARISON EXAMPLE: DIAGNOSTIC COLONOSCOPY

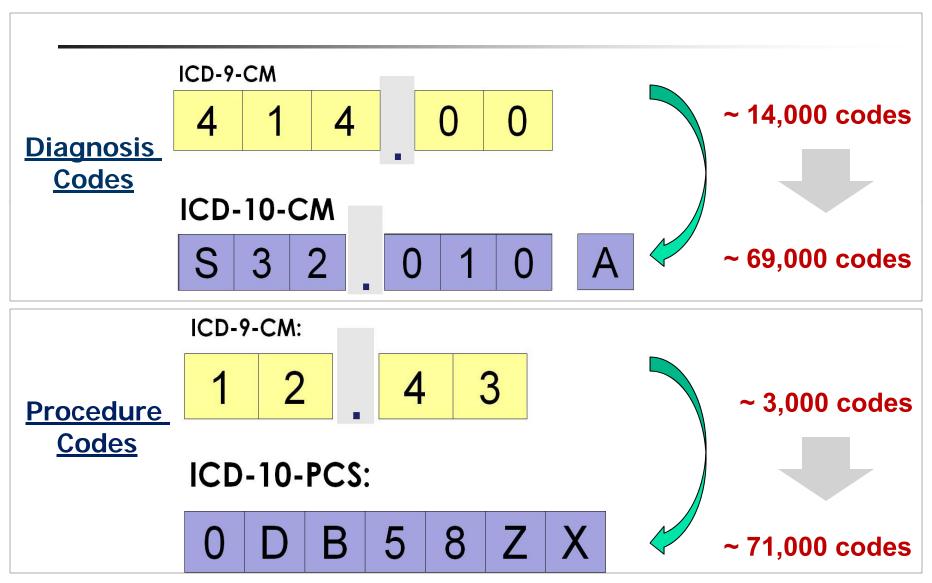
ICD-9-CM	ICD-10-PCS
Only 1 code needed:	1 code needed from 12 codes (ODJX8ZZ)
approach (45.2X)	• Includes:
	 approach
	 more specific
	location

THERE IS AN ICD-10 CODING FOR EVERYTHING!

Farmer Struck By His Prized Pig – Initial Occurrence W.55.42xA



10- Fold Increase In Number of Codes





ICD-9 AND ICD-10 CODE SET PARTIAL FREEZE ANNOUNCED

- Currently, there are over 150,000 ICD-10 CM/PCS codes
- On September 15, 2010, at the ICD-9-CM Coordination and Maintenance Committee Meeting the final decision for partial code set freeze was announced
- Last regular, annual updates to <u>both</u> ICD-9-CM and ICD-10 code sets will be made on October 1, 2011
- On October 1, 2012, there will be only <u>limited code updates to both</u> ICD-9-CM and ICD-10 codes sets to capture new technologies and diseases
- On October 1, 2013, there will be only <u>limited code updates to ICD-10</u> code sets to capture new technologies and diagnoses. There will be <u>No updates to ICD-9-CM</u>, as it will no longer be used for reporting
- On October 1, 2014, regular updates to ICD-10 will begin

GENERAL EQUIVALENCE MAPPINGS (GEMs): ICD-9-CM TO / FROM ICD-10-CM & ICD-10-PCS

- General Equivalence Maps (GEMs) between ICD-9-CM and ICD-10-CM / PCS have been developed as a tool to assist with converting large ICD-9-CM databases to ICD-10-CM / PCS
 - ICD-9-CM ↔ ICD-10-PCS via CMS web site



- ICD-9-CM ↔ ICD-10-CM via CMS / NCHS web site
- GEMs can be used:
 - to convert payment / reimbursement systems, payment and coverage edits, risk-adjusted logic
 - to track quality measures
 - to record morbidity & mortality
 - in research applications involving trend data

TOOLS TO CONSIDER USING DURING AND AFTER ICD-10 IMPLEMENTATION

Examples:

- Computer-Assisted Coding (CAC)
- Translation Engines
 - Various Types of Mapping Tools
 - Terminology Portal To Access Content & Standards
 - Encoder "Crosswalk" or "Simulator" capability
- Medical Content
 - SNOMED or ICD-10 For Problem Lists
 - Provider-friendly Terminology
 - Consumer-friendly Terminology
- Analytic
- Predictive Modeling
- Mapping Analysis



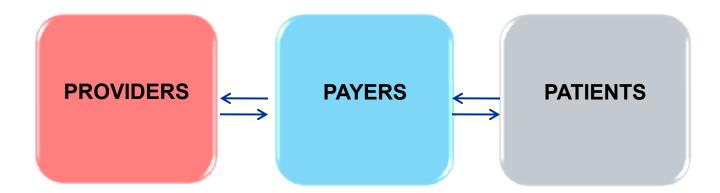
IV. 2010 PATIENT PROTECTION and AFFORDABLE CARE ACT

with the Health Care and Education Reconciliation Act

aka HEALTHCARE REFORM ACT

covering 32M more Americans

Key Components



Beginning in 2010* 2010 ACA (Healthcare Reform) Act

*Applies to US Hospitals / Other Providers

ACA EFFECTIVE DATE:	March 23, 2010	
CMS PAYMENT REDUCTIONS:	<u>2010</u>	
• INITIATIVES TO IMPROVE VALUE/ QUALITY:	2012	
■ PENALTIES – HIGH HOSPITAL READMISSION RAT	ES : 2013	
• MEDICAID:	2014	
 Coverage Expansion 		
 State Health Insurance Exchanges 		
 Payment Advisory Commission 		
 Disproportionate-share Payment Cuts PENALTIES – HOSPITAL-ACQUIRED INFECTIONS: 		
PENALTIES – HOSPITAL-ACQUIRED INFECTIONS:	2015	

THEREFORE

Strategic Planning must begin YESTERDAY for the convergence of these five ENORMOUS Technology, Process, and People initiatives.



Most Organizations Perceive Compliance as a VENDOR Problem

Vendor will NOT change internal interfaces and custom reports

Vendor might fail compliance or decide not to comply

Vendor might not be timely or fully compliant

Vendor's compliance strategy might be different from yours

Vendor's timing might not sync with your timing

Vendor might not view their role the same as you do

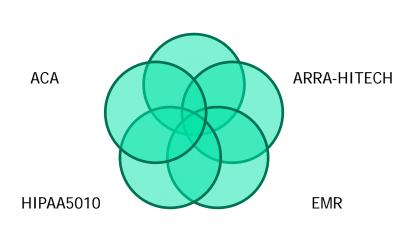


Most Organizations Perceive Compliance as a VENDOR Problem

And internal functions – workflows, health plans and business processes – will be affected, not just information systems!

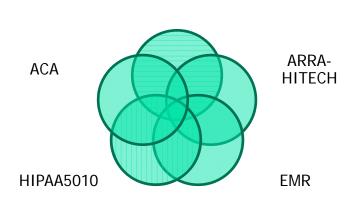


- Leadership, teams, and committee members for these initiatives are similar to RAC Committee and ARRA / HITECH MU Committee:
 - IT / CIO and CMIO
 - Medical Staff / CMO / VP Medical Affairs
 - Revenue Cycle Management
 - Health Information Management
 - Nursing / CNO
 - Case Management
 - Legal
 - Quality Management
 - Internal Auditors



ICD-10

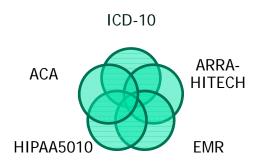
- Same systems, vendors, interfaces, IT resources
- Same existing and planned priorities
 - Contract changes (provider, payer, vendor)
 - System modifications / upgrades
 - New reports / report revisions
 - Reimbursement schemes



ICD-10

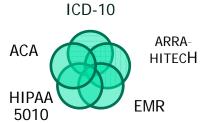
ARRA / HITECH - Meaningful Use of Certified EHRs

- CPOE's Revenue Cycle Impact
- Clinical Documentation Impact
- HIPAA 5010 / ICD-10 are NOT only HIM / RCM initiatives
- All the physicians implementing their first EHRs also will be impacted by HIPAA 5010 and ICD-10
- Legal EHR Impact



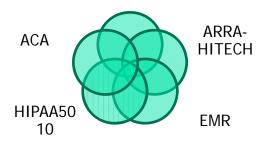
ARRA / HITECH – HIPAA "TWO"

- Many organizations still haven't implemented HIPAA "ONE"
- Raises the bar on expectations
- Don't wait until 2015 to move information from the desktop and incorporate encryption into information management.
- CE's are now faced with new rules regarding expanded accounting for disclosures, such as giving patients who pay for their own services the ability to restrict disclosure of their records upon request.



THESE INITIATIVES ARE INTER-RELATED! WHY PLAN SEPARATELY? ACA (Healthcare Reform)

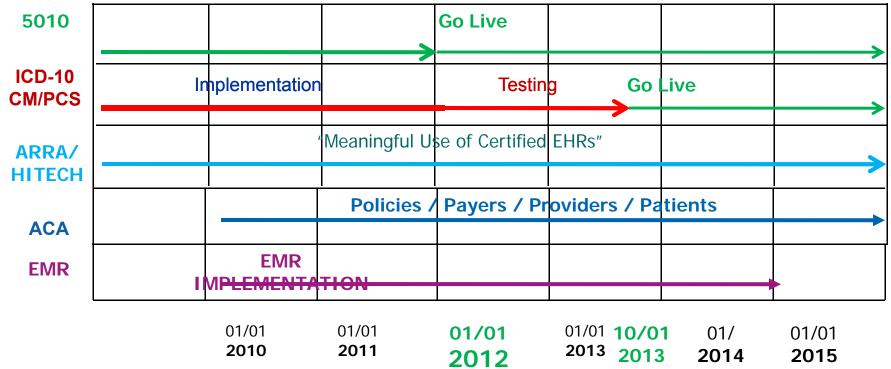
- CMS' payment contractors to conduct medical reviews of claims BEFORE paying them; includes fraud provisions
- Operating Rules for New and Existing HIPAA EDI Transaction Codes: Standardization for determining and updating Eligibility, Enrollment Benefits, and Claims Status
- ICD Coordination & Maintenance Committee (ICD-9-CM) convened on September 15, 2010 and clarified that the "crosswalks" mentioned in ACA refer to the GEMs posted on the CMS and CDC websites



STRATEGIC PLANNING IS KEY

AVOID THE "PERFECT STORM"





COMBINED HIPAA 5010 and ICD-10 TIMELINE

Source: NCHICA (No Carolina Healthcare Information and Communications Alliance, Inc.) and WEDI (Workgroup for Electronic Data Interchange)

TASK NAME	DURATION	START	FINISH
PROVIDER TASKS	1286days?	1/16/09	12/21/13
Partner Communications	60 emo	1/16/09	12/21/13
Organize Implem. effort	256 days	1/16/09	1/11/10
Briefing and buy in	2 emo	1/16/09	3/17/09
Develop preliminary impact analysis and implementation plan			
	9 emo	1/16/09	10/13/09
Organize Cross func. effort	12 emo	1/16/09	1/11/10
Estimate budgets	2 emo	10/13/09	12/12/09
Develop implementation pla	n 3 emo	10/13/09	1/11/10



ICD-10 IMPLEMENTATION TIMELINE

Source: American Health Information Management Association (AHIMA)

TASK NAME	DURATION	START	FINISH
ICD-10 Implementation Schedule	1276d	1/16/09	12/6/13
Final Regulations	792d	1/16/09	1/30/12
"Published Rule-ICD-10, v5010, vD.0,v.3.0"	1d	1/16/09	1/16/09
Rule effective	1d	3/17/09	3/17/09
Version 5010/D.0/3.0 Activities	542d	1/1/10	1/30/12
Planning	67d	6/1/09	9/1/09
Kick-off Meeting	1d	6/1/09	6/1/09
Develop Project Documents	55d	6/2/09	8/17/09
Work Breakdown Schedule (WBS)	15d	6/2/09	6/22/09
Project Strategy	10d	6/23/09	7/6/09
Project Budget	15d	7/7/09	7/27/09
Project Schedule and Plan	15d	7/28/09	8/17/09
Submit Project Documents for Approval	41d	6/23/09	8/18/09
Project Schedule and Plan	1d	8/18/09	8/18/09
Approve Project Documents	50d	6/24/09	9/1/09

ICD-10 IMPLEMENTATION BENCHMARKS – 2010

Source: WEDI and NCHICA

COMPLETED

- Briefing and buy-in
- Development of preliminary impact analysis and implementation plan
- Organized cross functional efforts
- Estimated budgets
- Developed implementation plan
- Contacted system vendors

Q2 ACTIVITIES

- Continue impact assessment
- Continue identification of process

Q3 Q4 ACTIVITIES

- Continue impact assessment
- Continue identification of process improvements
- Begin internal system design/development



AHIMA MILESTONES – 2010

Source: AHIMA ICD-10 Project Guide



Develop & Execute Project Plan
Awareness Presentations
Impact Assessment – Gap Analysis

Internal & External Software System Modifications
Update Vendor/Contractor Contracts (Clinical Systems, Coding Systems, Payment Systems)
Implementation Test Systems

Initial ICD-10 CM & PCS Training & Education
-Clinical staff, Medical Staff, Billing/Financial Staff, HIM/Coding Staff
Approvals for Project Strategy, Budget, Schedule

THE 'OMG' FACTOR

POTENTIAL CONSEQUENCES FOR INADEQUATE PLANNING OR MINIMUM COMPLIANCE

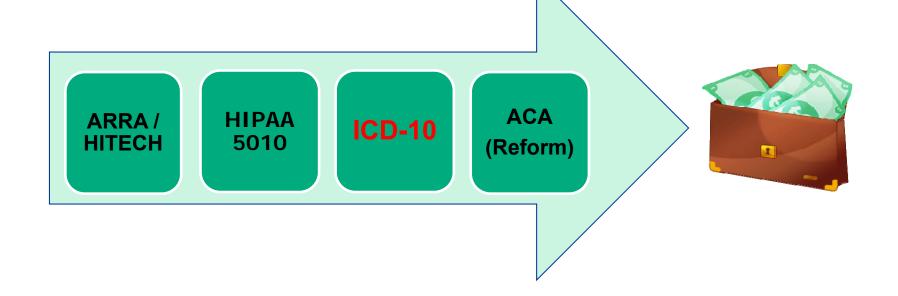
- ARRA / HITECH
- HIPAA 5010
- ICD-10
- ACA (Reform)
- EMR



F41.0

THE WOW FACTOR

STRATEGIC ADVANTAGES, REWARDS, & BENEFITS FOR EARLY COMPLIANCE



RECOMMENDED STEPS TO COMPLIANCE

2011 - ICD-10 Road Map

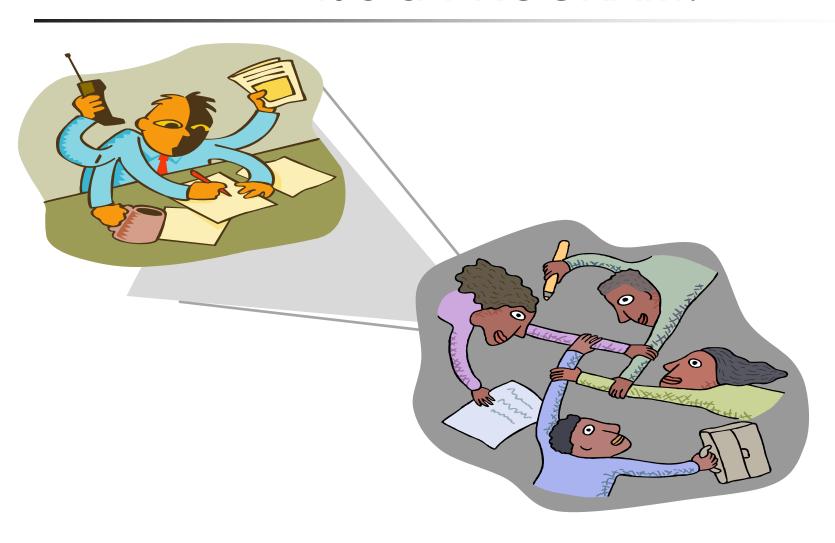
- Develop a Strategic Process
- Perform a Technical & Operational Inventory
- Assess Readiness/Perform Gap Analysis
- Develop Education & Training Plan
 - Use ICD10 to enable change
- Analyze Costs/Prepare Budget
- Develop Implementation Plan



THESE FIVE ENORMOUS INITIATIVES

- Will significantly impact the organization's business processes as well as affect its revenue cycle and information systems that supports their current clinical and administrative operations
- Will significantly impact an organization's investment priorities – more than you are facing today

It's not a project.....it's a PROGRAM!



CONTACT INFORMATION

EXPERIENCE THAT CAN ASSIST

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QUESTIONS / ANSWERS

