

## Eli's Rehab Report

### News Briefs: Relax: You Won't See ICD-9 Overhaul Again After 2011

#### 2011 will be the last time ICD-9 will undergo a large overhaul.

CMS has followed through on its proposal to update the ICD-9 code set one last time on Oct. 1, 2011, after which no ICD-9 codes will be added to the set except for those updates required for new technologies and diseases.

That's the word from the ICD-9-CM Coordination and Maintenance Committee meeting, held on Sept. 15 and 16, where CMS's **Pat Brooks** explained the following process for ICD-9 and ICD-10 code updates:

- Oct 1, 2011: The last regular annual updates will be made to the ICD-9 and ICD-10 code sets.
- Oct 1, 2012: Limited code updates to the ICD-9 and ICD- 10 code sets to capture new technologies and diseases.
- Oct. 1, 2013: Limited code updates to ICD-10 code set to capture new technologies and diagnoses; ICD-9 will no longer be used for reporting purposes, so no updates to ICD-9 will take place.
- Oct. 1, 2014: Regular updates to ICD-10 will begin.

Vendors, payers, and coding educators asked CMS to freeze the current diagnosis code set to help make ICD-10 transition planning simpler, so the announcement that CMS has confirmed a code-set freeze should assist you when you're trying to get the hang of ICD-10 coding.

Resource: To read the entire handout from the ICD-9-CM Coordination and Maintenance Committee meeting, visit [www.cms.gov/ICD9ProviderDiagnosticCodes/03\\_meetings.asp](http://www.cms.gov/ICD9ProviderDiagnosticCodes/03_meetings.asp) and click on "Sept. 15-16, 2010 Meeting Documents."

**New Anti-Fraud Law Could Delay Your Medicare Payments** A provision buried in the Small Business Lending Act could slow your Medicare cash flow to a trickle next year.

The legislation, which was enacted Sept. 27, mainly addresses credit issues for small businesses. But one provision requires the Centers for Medicare & Medicaid Services to use "predictive modeling" software to verify suspicious claims before paying them.

The model is based on the ones credit cards use, notes the Miami Herald. Suspicious claims would be flagged for investigation before payment.

"Our health care system is rife with fraud," said **Sen. George LeMieux** (R-Fla.), who authored the bill. "We need to use up-to-date technologies to stop improper payments. Putting predictive modeling in place will save taxpayers money and make Medicare a better program," LeMieux said.

"Unfortunately, Florida is ground zero for health care fraud and I am hopeful this program will help," the senator added in a release.

CMS already has the authority to use such software and has been pilot-testing it, a CMS representative tells the Herald. "We have every intention and interest in going forward" with predictive modeling, **Peter Budetti**, Medicare's deputy administrator for program integrity, told the newspaper.

#### Tune In For Answers To Your MDS Compliance Questions

Skilled nursing facilities must now be implementing the Minimum Data Set version 3.0 (MDS 3.0). If you're like most therapists, you still have some burning questions.



New resource: The American Physical Therapy Association has created a podcast series to help with the hot topics guaranteed to affect physical therapists and physical therapist assistants. Current podcast topics include modes of therapy and use of therapy students; future topics include using therapy aides and documentation tips.

To listen to the broadcasts, go to [www.apta.org](http://www.apta.org), click on "Podcasts" in the center section of the site, and select either "Implementing the Minimum Data Set Version 3.0 for SNFs" part 1 or 2.