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ICD-10: Get a Jump Start on Your ICD-10 Training

Do you know what you can do today that will pave the way for a successful Oct. 1?

Whether you like it or not, this New Year one of your resolutions is going to be to start learning a new diagnosis code set. While you can wait a few more months to start up in-depth training, there's no time like the present to start getting to know ICD-10.

Analyze for Gaps

Before you can determine exactly what kind of ICD-10 training you'll need, you must assess each coder's strengths and weaknesses — especially in anatomy, physiology, pharmacology, and medical terminology, Sharon Molinari, RN, HCS-D, COS-C, a home health consultant based in Henderson, Nev. ICD-10 codes can provide detail only dreamed of in ICD-9, so being able to drill down to diagnosis specifics will be an asset.

After you've identified education needs, develop plans to brush up on those areas before it's time to start really digging into ICD-10 training.

Read the Guidelines

If you want to get to know ICD-10 better, reading through the ICD-10 coding guidelines is a great place to start, suggests Therese Rode, RHIT, HCS-D, senior coding manager with Inova VNA Home Health in Falls Church, Va. Coders have a responsibility to read the guidelines. "Like when you first started with ICD-9, you have to get familiar. You can't do that without practice. You need a basic understanding of the rules."

No shortcuts: "When updates to the guidelines come, we often only read the bold text part," Rode says. "But to be certain you're up-to-speed with ICD-10, you'll need to read the whole thing."

You'll find that a lot of the guidelines are similar to ICD-9, but there are some differences, too, Rode says. For example, there have been changes in sequencing for anemia due to cancer, Rode points out. In ICD-10, you'll list a code for the cancer first, then follow with a code for the anemia such as D63.0 (Anemia in neoplastic disease) even when the focus of care is anemia. In ICD-9, you would list the anemia in neoplastic disease code first, followed by a code for the cancer.

You don't have to purchase a book to read the guidelines. You can find the guidelines online at www.cdc.gov/nchs/data/icd/icd10cm_guidelines_2014.pdf.

Get Familiar with the Manual.

Once you've become familiar with the ICD-10 coding guidelines, the next step in getting to know the new code set is to acquire a draft ICD-10 coding manual and begin to look up some of the common diagnoses you code, Molinari says. You should be able to pull a report that lists your agency's top 10 or 20 diagnoses. Try coding for them in ICD-10 using a coding manual or going online to download the ICD-10 files at <http://cms.gov/Medicare/Coding/ICD10/2014-ICD-10-CM-and-GEMs.html>. Working with the manual will allow you see how the code set is organized and where your most-used codes are located. Plus you'll start to see the full array of codes you'll have to choose from once the transition date arrives

Be sure to investigate the following diagnoses, Molinari says:

Diabetes. Take a look at the various types of diabetes codes available in ICD-10. Notice the combination codes for documenting diabetic manifestations.

Circulatory and pulmonary diseases. Watch for changes to your hypertension coding.

Neurological conditions. Locate codes for Alzheimer's and Parkinson's diseases with and without dementia.

Wounds. Find codes for pressure ulcers, chronic ulcers, and other common wounds.

Adverse effects, poisonings, and neoplasms. Familiarize yourself with the Table of Drugs and Chemicals and the Neoplasm Table as well as the appropriate coding guidelines.

Tip: As you work your way through coding your agency's top diagnoses, pay close attention to the listings in Alphabetic Index and the instructional notes in the Tabular List, Molinari says.

Keep an Eye on Documentation

Another way to boost your ICD-10 preparations is to provide training on clinical documentation improvement (CDI) strategies, Molinari says. Better documentation will be a major factor in transition success.

There will still be "unspecified" codes in ICD-10, but only time will tell which of them CMS will accept on home health claims, Rode says. For example, reporting a code that specifies a healing fracture of the right hip will most likely be reimbursable, but a code for an unspecified closed fracture, subsequent encounter might not, she says.

ICD-10 codes for cerebrovascular disease, asthma, and exposure to tobacco are among the many that can provide increased detail over their ICD-9 counterparts. But that's only possible with good documentation. (See related story on p. 11)

Watch your Efforts Pay Off

The **Centers for Medicare & Medicaid Services** expects to return a lot of claims based on incorrect codes as the ICD-10 implementation deadline passes, Rode says. "This will impact our bottom lines. Coders are under the gun now to get the RAP out □ you hardly have time to do ICD-10 tests. Are employers going to allow the time needed to get it right?"

Taking the time to dig in and familiarize yourself with the ICD-10 code set before your comprehensive training six to nine months before implementation, will help put you ahead of the game, Molinari says.