Home Health ICD-9/ICD-10 Alert

ICD-10: ICD-10: Prepare for ICD-10 Conversion With 3 Simple Tips

Know your anatomy and physiology if you want a quick transition.

It's not too early to start educating yourself about ICD-10 implementation, but don't spend your time trying to memorize code sets.

That was the advice **Rhonda Buckholtz, CPC, CPMA, CPC-I, CENTC, CGSC, COBGC, CPEDC,** shared with attendees at the AAPC's regional conference in Nashville Sept. 7-9. Buckholtz is vice president of ICD-10 education and training at AAPC and led a general session at the conference entitled "ICD-10: What You Need to Know."

"It's too soon to learn code sets, plus there's not much sense in learning them right now because final codes won't go into play until later," Buckholtz said. "It's not a bad idea to start looking at how some of your common diagnoses will change, but you really don't need to start memorizing things."

Buckholtz's advice is consistent with what **Trish Twombly, BSN, RN, HCS-D, CHCE, COS-C, HCS-O,** director of coding with **Foundation Management Services** in Denton, Texas suggests. In-depth training for general staff shouldn't take place until the first quarter of 2013, she says. But staff who will be conducting that training should begin their own training in the first quarter of 2012.

Step 1: Focus on Foundations

To begin preparing for ICD-10, look at the top ten or twenty ICD-9 codes you use most frequently, Twombly says. Learn how to code these conditions appropriately and consider creating new job aids for these diagnoses.

You'll also want to see which systems will be impacted by these new codes. "Every form will need updating," Buckholtz said. "If you really want to see the impact of ICD-10, take one of your most frequent diagnosis codes and follow it through your entire practice/system. See where it comes into play to help check everything you'll need to update."

Step 2: Check Documentation Practices

Once you've identified your top ten or twenty ICD-9 codes, you should also take a look at the documentation you normally receive to support these diagnoses, Twombly says. Ask yourself whether this documentation is thorough enough for you to choose the correct ICD-10 code.

ICD-10 codes are often more specific than ICD-9 codes, so you will likely discover some opportunities for improved medical record documentation, Twombly says. "High quality documentation will increase the benefits of the new coding system and will also help you to be ready for other initiatives that are beginning to require better documentation," she says.

"Physicians should take the opportunity to improve their documentation skills," said **Daniel Duvall, MD,** medical officer with **CMS**'s Hospital and Ambulatory Policy Group during the "ICD-10 Implementation Strategies for Physicians" call earlier this year. "As there are more opportunities for coders to pick from a list, they're going to be coming back to physicians early on to say 'Wait, I need more definition to help me pick A or B.'"

"Coders need to realize that physicians don't document for coding," Buckholtz said. "They document for health care. Things that weren't on their radar as important before will need to be important now. It's a great time for coders to step out of their comfort zones and learn new things, even if they're not responsible for training or implementation."

Step 3: Brush Up On A&P Knowledge

A coder's top focus should be on anatomy and physiology (A&P), Buckholtz said. "Coders will need a good understanding of so many A&P nuances with ICD-10," she said. Work on skill sets to get to that level of specificity so you can read physician documentation and pull the details you need instead of constantly querrying the physician, she said.

Many ICD-10 codes will be more detailed than their ICD-9 counterparts, which is why adequate A&P knowledge will help coders. For example, Buckholtz said coders will need a good understanding of bones and different types of fractures with ICD-10. New diabetes codes will explain underlying manifestations but will no longer include controlled/uncontrolled options. Neoplasm choices will expand by site (including 54 codes for male/female malignant neoplasm of breast, for example).