

## Home Health ICD-9/ICD-10 Alert

### ICD-10 Update: Don't Put the Brakes on Your ICD-10 Preparations

**Whether you've been preparing or procrastinating, use the delay to get ahead of the game.**

If you're like most home health coders, news of the ICD-10 delay probably caught you off guard. And you're likely left with a lot of questions, including "What now?"

**Background:** An ICD-10 transition postponement was slipped into the text of a bill designed to dodge the March 31 expiration of a delay to a pending physician pay cut. With the President's signature that bill became law, and the code set transition moved to at least Oct. 1, 2015.

Although the new implementation date hasn't been officially settled, the **Centers for Medicare & Medicaid Services** announced its intention to move forward with the Oct. 1, 2015 date in the ICD-10 section of its website. "Accordingly, the U.S. Department of Health and Human Services expects to release an interim final rule in the near future that will include a new compliance date that would require the use of ICD-10 beginning October 1, 2015. The rule will also require HIPAA covered entities to continue to use ICD-9-CM through September 30, 2015."

#### Make the Most of the Delay

"When anyone has more time to get ready for a change it's a good thing right?" asks **Delaine Henry, COS-C, HCS-D**, with **Health Care Management and Billing Services** in Lafayette, La. "Well, yes and no."

The delay puts ICD-10 trainers and advocates in an awkward position. "I think we have lost a lot of credibility with agencies who were hesitant to invest in the ICD-10 training because they were hoping it would be delayed as it has in the past. We tried to tell them there would be no delay, and we've been preaching that they will be sorry that they did not prepare in a timely manner. Now we all look like we've been crying wolf," Henry says.

The delay "gives providers another year to learn the changes," says **Pat Jump** with Rice Lake, Wis.-based **Acorn's End Training & Consulting**. But, "providers are very leery about starting training because this same type of situation has occurred many times over the years," she says. "Medicare mandates changes and then [the] changes are delayed or eliminated. This is very frustrating for providers."

As upsetting as the delay is for proponents of ICD-10, the transition is still on the horizon. "While there are some negative implications associated with the delay, the extra time should be viewed as an opportunity for home health and hospice providers to gain expertise in applying the ICD-10 codes □ as well as thoroughly examining and preventing pitfalls related to the transition," the **National Association for Home Care & Hospice** said in a member newsletter.

#### Two Sides of the Coin

Whether your agency greeted the ICD-10 delay with a sigh of relief or a groan of frustration, all coders are in the same boat now. But the challenge of how to best handle the delay depends on where your preparations stood when it was announced.

If your agency has already completed training and was ready to go live Oct. 1 2014, you'll need to find ways to keep coders' skills current over the next 18 months, says **Joan Usher, BS, RHIA, COS-C, ACE, AHIMA**-Approved ICD-10-CM Trainer with JLU Health Record Systems in Pembroke, Mass.

**Try this:** Continue to code one to three cases a month in ICD-10 to maintain proficiency and continue to gain experience in applying the codes, Usher suggests. This will decrease loss of productivity over the next year. You could also provide coding staff with a monthly case to code and an answer key to help keep coding skills fresh.

If your agency was still in the planning stages under the Oct. 1, 2014 deadline, now's the time to develop a timeline for training, Usher says.

**Try this:** Start out by establishing competency in ICD-9 during the second and third quarters of 2014, Usher says. The better your ICD-9 skills, the easier the ICD-10 transition will be.

Then progress to training in the basics of ICD-10 during the third and fourth quarters of 2014, she suggests. In first quarter 2015, complete comprehensive training on the different disease-specific categories of ICD-10. Then spend the second and third quarters of 2015 doing dual coding to gain proficiency in ICD-10.

Why is ongoing training important for home health coders? "Coding is more than numbers on documents," said **Linda Krulish, PT, MHS, COS-C** and Sparkle **Sparks, PT, MPT, COS-C, HCS-D**, AHIMA Approved ICD-10-CM Coding Instructor in an **OASIS Answers** blog post. "Coding contributes to our risk adjustment and reimbursement. When we are asked if what we are doing with our patients is 'reasonable and medically necessary,' the answer must tie back to what is wrong with the patient. We can provide all the best clinical practices with the right mix of clinicians but if the case is coded incorrectly it can appear as though we don't know what we're doing or that the care we're providing is unnecessary."

And wherever your agency stands with ICD-10 preparations, you should take this opportunity to educate your referral sources on the clinical documentation you'll need under the more specific ICD-10 code set, Usher says.

**Try this:** Create diagnosis-specific teaching sheets for referral staff, liaison staff, and intake staff.