

Long-Term Care Survey Alert

ICD-10 Transition: Stay On Top Of ICD-10 Transition With New Training Materials

Pay attention to the myriad of common coding practices.

To ensure that you're fully prepared for the Oct. 1 ICD-10 implementation date, you'll need to focus on this advice.

Prevent Billing Snafus after ICD-10 Implementation

Matt McGarvey of **Harmony Healthcare International LLC** offered the following tips for ICD-10 preparation specific to skilled nursing facilities (SNFs) in a June 25 blog posting:

1. Don't skimp on training. Find classroom training or webinars on ICD-10 that are specific for SNF providers. "Today's SNF patient population is unique and challenges will be different than that of hospitals, physician practices, ambulance providers, and home care," McGarvey noted.

2. Pow-wow with your software provider. Not only should you speak with your MDS/billing software provider, make sure you're also discussing ICD-10 preparations with any other software providers that you use, such as those for Activities of Daily Living (ADLs) coding, therapy, and other software. "Ensuring accurate ICD-10 coding across multiple platforms will be that much more difficult than doing so across a single system," McGarvey warned.

3. Learn the ICD-10 basics. SNFs in particular will need to pay attention to the myriad of common coding practices that ICD-10 will eliminate, including V-codes to identify therapy encounters, the 18 aftercare codes for fractures, the "late effects" codes, and the hypertension table. ICD-10 will add the "X" placeholder and change the timeframe in reporting a myocardial infarction.

ICD-10 codes will have the following format:

- Digit 1 is alpha (A-Z, not case sensitive)
- Digit 2 is numeric
- Digit 3 is alpha (not case sensitive) or numeric
- Digits 4 through 7 are alpha (not case sensitive) or numeric
- "X" is used as a placeholder for codes containing fewer than six characters when a seventh character is required

4. Start coding early. You should be dually coding all residents by the Oct. 1, 2015 ICD-10 deadline.

5. Use triple check to ensure accurate coding. "The triple check process will be your best friend in ensuring accurate coding," McGarvey said. "A sound process to compare the UB-04 to the MDS assessment to the clinical documentation and therapy notes will enhance the accuracy of your claims and ensure timely payments."