

# Home Health Coding and OASIS Expert

## ICD-10: Full Steam Ahead for ICD-10

### Take a 3-pronged approach to gearing up for transition day.

The Oct. 1 ICD-10 implementation date has passed another hurdle. Are your plans on track?

Physician group lobbying attempts did not succeed in adding a two-year ICD-10 delay to the federal spending plan passed Dec. 15. Barring any other unforeseen changes, that means come Oct. 1, your agency needs to be fully geared-up for ICD-10.

But you'll need to start using ICD-10 codes sooner than that. Home health agencies will need to begin dual coding beginning Aug. 3rd, says **Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C, HCS-O**, consultant and principal of **Selman-Holman & Associates** and **CoDR** **Coding Done Right** in Denton, Texas. As of that date, you'll report ICD-9 codes on the RAP and ICD-10 codes for the end of episode, she says. And hospice benefit periods will also need special attention during this time.

Ideally, at this point, your agency should have an implementation plan in place that addresses all departments and processes affected by the new code set. You should have a thorough understanding of what you'll need to be ready both internally and with any outside vendors.

But even if your plan isn't fully fleshed out, you still have time to plan a successful transition. Home health agencies have been dealing with all kinds of changes including updates to the face-to-face regulations as well as implementing the OASIS-C1/ICD-9, so it's likely that there are many agencies that really haven't done too much to prepare fully for ICD-10, says **Alex Morganti**, Team Coordinator and Primary ICD-10 Transition Coach for **A.D. Maxim Consulting** in Troy, Mich.

Agencies should be doing three things to establish their ICD-10 changeover process, Morganti says:

#### 1. Create a transition team.

"This may sound obvious to some, but it's vitally important that you formally designate a team leader and department representatives at the very beginning of the preparation process," Morganti says. "There need to be people who are officially responsible to help ensure timelines and goals are met, and it's best to choose people who are charismatic, think in terms of the 'big picture,' and embrace change."

To stay on track, create a calendar solely devoted to the ICD-10 Transition Project and mark in mandatory weekly meetings, Morganti suggests. "Constant, regular updates will be crucial to making sure needs and goals are being met."

#### 2. Run an impact assessment.

"Keep in mind that whatever/whoever is affected or involved with ICD-9 coding now will need to be updated to accommodate ICD-10," Morganti reminds.

**Do this:** Make a list of every person, document, and workflow that involves ICD-9, whether directly or indirectly, Morganti suggests. Involve all staff in comprising this list to avoid overlooking anything. "This process will not only ensure everything is accounted for, but it will help you accurately create a schedule for when changes or updates need to be implemented."

#### 3. Contact your vendors.

Call your clearinghouse, outsourced coding company, software provider, and other vendors to find out what their own

timelines are for becoming ICD-10 ready, Morganti says. "The mandate to switch to ICD-10 affects them as well, and they are not receiving any government assistance either. Unfortunately, their readiness directly impacts your ability to prepare."

**Don't miss:** "Some payors will be offering acknowledgment testing (simply confirming claims are received) and/or full end-to-end testing (indicating whether a claim will be paid or not)," Morganti says. "However, if your software vendor has not updated your system for ICD-10, then you will not be able to participate in external testing."

### **Next Steps**

Now is also the time to begin thorough ICD-10 training for coders and clinicians. You'll also need to provide some level of training to other staff impacted by the change.

And, as spring approaches, you'll want to review your implementation plan to see whether you need to make any course corrections. Double-check that staff have received appropriate training and provide any additional training needed. And verify that your vendors are prepared and that your systems will be ready come Oct. 1.