



100 Days to ICD-10 Implementation

COUNTDOWN TO ICD-10: THE CLOCK IS RUNNING!

The Compliance deadline for ICD-10 implementation is less than 4 months away. As the Healthcare Industry enters the final phase of implementation and prepares for the “Big Change” of ICD-10, MDHHS is also in preparation for a successful ICD-10 transition for providers. The entire industry has been preparing for the coding change with an imminent implementation date of **October 1st, 2015**.

ICD-10 LATEST NEWS

CMS releases Two New ICD-10 Videos:

CMS has released two animated shorts that explain key ICD-10 concepts:

1. “[Introduction to ICD-10 Coding](#)” gives an overview of ICD-10 features and explains the benefits of the new code set to patients and to the health care community.
2. “[ICD-10 Coding and Diabetes](#)” uses diabetes as an example to show how the code set captures important clinical details.
3. For other helpful CMS ICD-10 Resources, visit CMS’s [Website](#) @ <http://www.cms.gov/Medicare/Coding/ICD10/ProviderResources.html>

WHAT CAN YOUR ORGANIZATION DO TO PREPARE FOR ICD-10?

1. **Participate in Provider Testing with MDHHS NOW:** *It is the only way to test your systems and know if your claims will adjudicate.* Go to the MDHHS [Website](#) at www.michigan.gov/5010icd10 - Select the ICD-10 Button and click Testing within MDCH Links for the following testing opportunities:
 - a. B2B Testing
 - b. Outpatient Scenario-Based Testing
 - c. Inpatient APR-DRG Comparative Testing

2. Attend one of MDHHS's Provider Outreach ICD-10 Virtual Seminars:
NEW SESSIONS added Summer 2015 due to Increased Provider Interest!

- Thursday, July 16, 2015 @ 10am
- Thursday, August 13, 2015 @ 2 pm
- Thursday, September 17, 2015 @ 10am



- Register Early on our Website:
 - www.michigan.gov/medicaidproviders
 - Click Medicaid Provider Training Sessions in "Hot Topics"
- Agenda includes ICD-10 Basic Overview:
 - History, Changes, Provider Impacts and Provider Readiness Tools
 - Provider Specific Impacts to include updates from Provider Consultants
 - **Dental, Transportation, Professional Facilities, DME and Nursing Facilities**
 - MDHHS Testing Updates: Jim Kunz, MDHHS Testing Manager
 - MDHHS Policy Updates: Carmen Starkweather, MDHHS Policy Manager, **September Session Only**
 - MDHHS Hospital Rates Updates – Steve Ireland, Hospital Rate Review Manager, **August and September Sessions Only**

3. Visit MDHHS ICD-10 [Website](#) regularly for ICD-10 Resources:

- ICD-10 Webcasts:
 - [Provider Outreach Development Course](#)
 - [Clinical Documentation](#) and [More](#)
- [ICD-10 FAQs](#) and Helpful ICD-10 Resource Documents
- General Equivalence Maps (GEMs): [GEM Viewer](#)
- Other Helpful Links

4. Review Resources on [ICD-10 Coalition for ICD-10 Website](#) @ <http://coalitionforicd10.org/icd-10-resources-for-physicians/>



The Coalition for ICD-10 is a broad-based healthcare industry advocacy group — hospitals, health plans, hospital and physician office coding experts, vendors, and the health information technology (HIT) community— united in support of the U.S. adoption of the ICD-10 coding standard. The Coalition for ICD-10 promotes the critical importance of ICD-10 for improving quality measurement, public health surveillance, clinical research, and healthcare payment through research, education, advocacy, and mobilization.

5. Visit our [Website](#) regularly for ICD-10 Resources:

- ICD-10 Webcasts:
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ICD-10 TIPS & TOOLS FOR THE MONTH

1. Review CMS's [Implementation Guideline](#) to ensure your organization is on task for a successful ICD-10 Implementation @ <https://implementicd10.noblis.org/>
2. Download the ICD-10 Official Draft Coding Set from CMS's Website
 - a. www.cms.gov/icd10
3. Review the Top Codes in your Practice and Map them in a GEMs:
 - a. MDHHS Gem Viewer @ www.michigan.gov/5010icd10 > click ICD-10 > Click Gems Viewer in Hot Topics. Map in reverse in order to validate code.
 - b. Confirm code at the highest level of specificity on [CMS's 2016 GEMs](#) at www.cms.gov/icd10

ICD-10 CODING TIPS FOR THE MONTH



Documentation Tips

1. **ICD-10 CM Clinical Documentation of Diabetes:** Documentation for Diabetes need to include:
 - a. **Type and Cause of Diabetes:**
 - i. Type 1 or Type 2
 - ii. Due to drugs or chemicals
 - iii. Due to underlying conditions
 - iv. Other specified diabetes
 - b. **Body System Complications related to Diabetes:**
 - i. Kidney
 - ii. Neurological
 - c. **Combination codes include Diabetes and the manifestation.**
 - d. **Specific complications:**
 - i. Chronic Kidney Disease
 - ii. Foot Ulcer
 - iii. Hypoglycemia without coma
2. **ICD-10 CM Clinical Documentation of OB/Pregnancy**
 - a. Documentation of conditions/complications of pregnancy will need to specify the trimester in which that condition occurred. Some codes but not all specify trimester.
 - i. ICD-9-CM documentation required “episode of care” (delivered, ante-partum, post-partum) instead of trimester, childbirth, puerperium.
 - b. If the condition develops prior to admission, the trimester at the time of admission is assigned.
 - c. If the patient is hospitalized during one trimester and a condition/complication develops during the same hospitalization but in a subsequent trimester, the code for the trimester in which the complication develops is assigned.
 - d. The provider's documentation of “weeks” may be used to assign the appropriate ICD-10 code for trimester.
 - e. Definition of trimesters:
 - i. First trimester = less than 14 weeks, 0 days
 - ii. Second trimester = 14 weeks, 0 days to less than 28 weeks, 0 days
 - iii. Third trimester = 28 weeks until delivery
 - f. Note: Gestational diabetes needs specification of diet controlled or insulin controlled. If both diet and insulin controlled, the ICD-10-CM code for insulin controlled will be assigned.

FOUR THINGS PROVIDERS MAY ACTUALLY LIKE ABOUT ICD-10

1. More Specific Codes in ICD-10

- Medical necessity will be easily communicated through the use of ICD-10. There are five times more codes available to document a patient's assessment in ICD-10, resulting in less need for "unspecified" or not elsewhere classified (NES) or "not otherwise specified" (NOS). Unspecified codes are still available in ICD-10, however, should only be used when documentation is not available to support the highly specific code.
- Laterality (left and right designation) alone accounts for more than one-third of the increased codes in ICD-10.

2. Finding a Possible Diagnosis Gets Easier

- In ICD-10, you may find it easier to research unusual diagnoses, signs, and symptoms. Currently, in ICD-09, if you cannot find a diagnosis, you must think of something similar and begin the search again. Additionally, you are likely to use more non-specific codes. With the 10th edition, very few possible diagnoses are left unlisted.
- Searching for little-used diagnoses, whether by searching in a written procedure manual or searching in an electronic health record database, is a standard practice for most physicians and coders. However, as comprehensive as ICD-10 is, it is still possible to utilize a basic list of codes on a Superbill. Office Billers/Coders should convert the office's most widely used ICD-09 codes to ICD-10 in a GEMs Viewer in order to determine how extensive it is. This exercise is a great activity for staff to become acclimated to the new coding system.

3. Improved Description of the Extent of Diagnoses

- Providers will be able to easily capture the breadth and depth of a patient's diagnoses with the increased specificity and granularity of ICD-10:
 - For example, asthma with chronic obstructive pulmonary disease is code J44.9 in ICD-10. Mapping backwards to ICD-09 in the same code will more than likely result in the diagnosis code 493.20 -- chronic obstructive asthma, unspecified.
 - In ICD-10, there now is an ability to report Asthma as mild, moderate or severe. Additionally, sinusitis should be specified as acute or recurrent with a notation of sinus(es) involved (frontal, maxillary, etc.).
 - Diabetes with retinopathy should be further clarified as proliferative or non-proliferative and with or without macular degeneration. If it is proliferative, documentation should further specify mild, moderate or severe.

3. Code Assignment is Easier

- The increased specificity and reduced ambiguity of ICD-10 may actually make codes easier to assign correctly.
- Complete and concise Clinical Documentation should be captured in the patient's assessment resulting in fewer coding errors and fewer unpaid claims.
- With the need to enhance documentation in order to achieve the full benefit of ICD-10, more specific codes should decrease the volume of payer requests for additional supporting documents.

ICD-10 QUESTIONS OR NEED HELP?

Contact us by email: MDHHS ICD-10 Provider Outreach:

- ICD-10 Awareness and Training Team: MDCH-ICD-10@michigan.gov
- MDHHS Provider Testing: MDCH-B2B-Testing@michigan.gov

