Get Ready for ICD-10

As a reminder, in January 2009, the U.S. Department of Health and Human Services issued a final rule mandating that all HIPAA-covered entities use the new ICD-10-CM code set for all diagnosis reporting and the ICD-10-PCS code set for inpatient procedure reporting on claims with dates of service or dates of discharge on or after October 1, 2013. BCBSRI has begun its efforts to comply with this mandate and expects that providers will be ready to submit the new ICD-10-CM/PCS codes on October 1, 2013. The mandate applies to both electronic and paper submissions of your claims.

In January 2011, BCBSRI developed a landing page on the BCBSRI.com Provider home page dedicated to ICD-10. We encourage you to visit this page for important information on this federal mandate. This page contains links to a variety of useful resources including:

- Our quarterly provider readiness surveys
- Articles on ICD-10 from Provider Update
- FAQs
- A copy of our monthly webinar presentation
- Our ICD-10 Provider Readiness Implementation Tasks and Recommended Timeline
- Other industry websites with pages dedicated to ICD-10, including Centers for Medicare and Medicaid Services, Workgroup for Electronic Data Interchange, Blue Cross and Blue Shield Association, American Medical Association, American Health Information Management Association, and American Academy of Professional Coders

Our quarterly readiness surveys are usually available for about six weeks. We encourage you to take the survey each quarter so that we can measure progress over time. In addition, we use the feedback from these surveys to better understand your needs and how we can work together towards ICD-10 compliance, as well as tailor future communications and provider resources. The results from the first quarter 2011 survey were published in the June 2011 issue of Provider Update (and are also posted to our ICD-10 landing page).

To assist providers in planning and preparing for ICD-10, BCBSRI compiled an ICD-10 Provider Readiness Implementation Tasks and Recommended Timeline to provide direction based on industry recommendations. In a previous Provider Update article from May 2011 (also posted to our ICD-10 landing page), BCBSRI focused on the tasks that were slated for the first and second quarters of 2011. To recap this article, your discovery phase activities should be completed by this point in the implementation process. The discovery phase includes tasks such as identifying current systems, reports, and business processes that involve ICD-9 today, reviewing vendor contract language and contacting vendors, and analyzing revenue and the impact on productivity. Providers may consider cross-training their staff on ICD-10 coding and revenue cycles due to anticipated reimbursement implications. They may also consider applying for additional lines of credit to prepare for the unknown.

At this point in the implementation process, we are focusing on the recommended tasks to be completed in the third and fourth quarters of this year. From now until the end of September, providers should be focused on the planning phase, which includes the development of an implementation plan, the identification of assumptions and risks to compliance, and a review of encounter forms and other forms. For example, a review of encounter forms may prove that this type of form is no longer viable with ICD-10. Additionally, coders will want to review the data captured by providers in medical notes to ensure they are capturing the data required to code the claim correctly. As part of developing an implementation plan, providers should document the tasks, resources, and timelines of the projects and get everyone in their organization to buy into the plan. Also, the assumptions and risks should be documented in the plan. Along with these activities, providers should contact their clearinghouses, billing services, and payers to share and discuss their implementation plans in order to coordinate a smooth transition.
During the fourth quarter of 2011, high-level training for key staff such as physicians, billers, and coders should take place. (It is recommended that additional in-depth training take place less than six months prior to the implementation date.) In addition, it is recommended that providers begin internal testing in December 2011 and allow a full year for this testing to occur. Please refer to the *ICD-10 Provider Readiness Implementation Tasks and Recommended Timeline* posted on BCBSRI.com for additional details on the discovery, planning, training, testing, and implementation phases. This timeline is based on industry recommendations compiled by BCBSRI for your convenience.