HIM Enjoying its ICD-10 Moment

Save to myBoK

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Remember the Y2K bug? Not so long ago, there was a widely spread concern that the change from the year 1999 to 2000 would play havoc with computer systems everywhere. Technology experts set about repairing programs; "preppers" recommended we all stock up on Spam and bottled water. And... nothing happened.

An even more prolonged period of anxiety gripped the healthcare community in the last few years as we ramped up to implementation of the ICD-10-CM/PCS coding system. Doomsayers predicted confusion, rejected claims, financial losses, panicked physicians, and general cataclysm. Toss in a can of Spam and you would have thought the end was truly near.

And... while some facilities experienced temporary glitches and delays, the transition went extremely well. It went so smoothly, in fact, that 30 days after implementation began Politico published a headline that read "CMS: ICD-10 Moving Along 'Like Butter.'"²

Months later, many organizations are now reporting successful ICD-10 transition stories. I am proud to say much of the success is due to the efforts of our members: planning, preparing, training, and communicating. HIM professionals were amazing in advocating, in getting up to speed, and in educating doctors and other staff.

We still have more to learn. We will continue to pay attention to areas where there's room for improvement, such as certain kinds of coding errors and documentation issues. And we will continue to look closely at changes in productivity and their implications. Most importantly, we must leverage and learn from the ICD-10 data to create a better healthcare system. This month, the *Journal* looks back on lessons learned from the transition and offers some tips for the way forward.

In "Analyzing Eight Months of ICD-10," Mary Butler talks to practitioners about how the steps they took to prepare for the transition have paid off, as well as how they plan to handle the post-implementation challenges ahead.

As providers look more closely at their coding processes, vendors have seen an increase in requests for coding audits. In "Coding Audits Evolve with ICD-10," a roundtable of representatives from four coding service companies share their updated policies and procedures as well as best practices for coding programs.

Finally, one of the promised benefits of ICD-10 was more specific and robust data that can be analyzed to improve care and cost. In "<u>Unlocking the Benefits of ICD-10 through Data Analytics</u>," Crystal Ewing describes how providers can leverage advanced statistical and predictive analytics, derived from the increased specificity and granularity of ICD-10 data, to better tell the patient's story.

The success of the ICD-10 transition demonstrates the HIM profession's resourcefulness and resilience. Enjoy your moment... and get ready for what's next.

Notes

- [1] Rothman, Lily. "Remember Y2K? Here's How We Prepped for the Non-Disaster." *Time*. December 31, 2014. http://time.com/3645828/y2k-look-back/.
- [2] Allen, Arthur. "Alexander promises prompt medical innovation bill." *Politico*. October 30, 2015. https://www.politico.com/tipsheets/morning-ehealth/2015/10/politicos-morning-ehealth-alexander-promises-prompt-medical-innovation-bill-211013.
- [3] Coalition for ICD-10. "Organizations from across the industry weigh in on their experiences with ICD-10." March 7, 2016. http://coalitionforicd10.org/organizations-from-across-the-industry-weigh-in-on-their-experiences-with-icd-10.

Article citation:

. "HIM Enjoying its ICD-10 Moment" Journal of AHIMA 87, no.6 (June 2016): 15.

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