

HIM's To-Do List: Taking Account of the HIM-related Initiatives Under Way

Save to myBoK

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The healthcare industry has a number of major long-term goals associated with federal legislation and regulations, some of which are still awaiting detail or are challenged by an economy that limits resources. Nonetheless, all have deadlines, and with fall in the air, now is a good time to take account and review next steps.

HIPAA Transaction Update and ICD-10

The year began with the publication of the final rules for upgrading the HIPAA transaction standards and the adoption and implementation of ICD-10-CM/PCS.

The compliance date for the transaction system upgrades for the Accredited Standards Committee X12 and the National Council for Prescription Drug Programs (NCPDP) standards is January 1, 2012, except for Medicaid pharmacy subrogation programs. However, the Department of Health and Human Services (HHS) suggests that the transaction upgrades, which include upgrading internal application programs as well as the HIPAA electronic data interchange standards, should be ready for testing by January 1, 2011. Likewise, health plans need to test sending data among themselves since they exchange claims data for coordination of benefits.

While most of the X12 or NCPDP changes have nothing to do with the classification systems, the transaction standards must be upgraded in order to carry the contemporary ICD-10-CM/PCS codes. Furthermore, many IT professionals argued for years that they had to have the HIPAA upgrade well under way before they could begin to address ICD-10-CM/PCS.

Writing in past *Journals*, HIM experts have recommended that organizations address the analysis and planning for both conversion of the transactions and coding transformation as soon as possible. That means that organizations should either be completing the initial analysis now or have such a project well under way. Likewise, vendors should have confirmed their intentions and schedules to meet organizational goals and compliance objectives.

Besides these two transformations, healthcare organizations will be faced with other changes.

The changes associated with the annual Medicare and Medicaid programs will continue each October and January. A potential exception are coding changes associated with ICD-9-CM and ICD-10-CM/PCS.

The latter two classification systems are kept up to date by the National Center for Health Statistics and the Centers for Medicare and Medicaid Services (CMS). This month the ICD-9-CM Coordination and Maintenance Committee will address “freezing” these classifications in advance of ICD-10-CM/PCS implementation.

AHIMA and several other organizations propose that the code sets be frozen from the point of upgrading on October 1, 2012, until October 1, 2014, with a few exceptions. There also is discussion of ending the freeze in April 2014, which would make it easier for system updates and coder training.

ARRA

Many in the industry had barely absorbed the ICD-10 and HIPAA transaction news when February brought the American Recovery and Reinvestment Act (ARRA), which includes the Health Information Technology for Economic and Clinical Health Act. The legislation promotes the adoption of electronic health records (EHRs) and electronic health information exchange (HIE) with a target goal of 2015.

Section IV of ARRA provides incentives for interim steps in the adoption of EHRs through Medicare and Medicaid incentive payments beginning in 2011. To gain these incentive payments, a provider organization must meet “meaningful use” criteria that have yet to be determined. CMS must also publish a rule related to meaningful use and the incentive system by December 31, 2009. Each provider organization must determine where its EHR plan fits relative to the criteria and what steps it must take to meet the criteria.

It is unclear if an organization can qualify within FY2011 or CY2011. Organizations will have to determine how best to incorporate all of the requirements and potential incentive payments or potential loans that may be available under ARRA.

This month will also be pivotal in the quest for healthcare reform. The US may see some form of reform legislation if Congress stays on the course set by the majority and president. Just what that means is difficult to predict. However, healthcare providers and health plan leaders have made a commitment to the president and Congress that they will reduce healthcare administrative costs.

Adoption of EHRs, updating HIPAA standards, and implementation of ICD-10-CM/PCS will achieve administrative savings, but not alone, and perhaps not to the extent needed. Additional savings will have to come from work redesign and documentation improvement—more tasks that call for HIM input, influence, and work.

ARRA also provides funding for broadband installation in communities that lack high-speed Internet access. Healthcare providers should be joining with others in the government, banking, and retail sectors to ensure that the community can submit a proposal for such an implementation. Healthcare providers can demonstrate a need since HIE will depend on such access.

ARRA also provides funds for grants to community clinics and Indian health services, as well as work force grants. Organizations should be on the look out for these monies and how they and their communities might benefit. There is no schedule of what monies will be released, when, and in what fashion, so interested groups need to be alert.

HIM Education

The classification changes and EHR and HIE adoptions call for significant changes in HIM curriculum and the need to learn and teach these new systems. Some of today’s students may lead the changes of tomorrow, and AHIMA is working hard to ensure that ARRA funds work force development and educational programs in the form of program development, student and faculty development, and other programs that might be funded through the Departments of Labor, Education, and HHS.

There is a lot to do and a lot to plan for. AHIMA has initiated some additional resources for the HIM profession including an ICD-10 Web site, www.ahima.org/icd10, and ARRA Web site, www.ahima.org/arra [web page no longer available]. Check these sites as well as the *Journal* and other association media for ongoing updates.

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