ICD-10 Preparedness for Non-Acute Care Settings

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by Melanie Endicott

There's a tremendous amount of buzz in the healthcare industry about preparing hospitals and physicians for ICD-10-CM/PCS (ICD-10) implementation. But what should other care settings—such as long term care, home health, and hospice—be doing to prepare?

Identifying Staff Training Needs

As in all healthcare settings, all members of the healthcare team—from administration to nursing to HIM—must be aware that ICD-10 is coming and be prepared for the impact that this change will have on their job role. Segmenting out these job roles into various levels of training is one method to determine the appropriate level of training. For instance, those individuals that are responsible for assigning codes must have in-depth training on ICD-10. For staff that do not assign codes, but must be able to comprehend them, slightly lower level of training will be necessary.

Forming a Training Plan

Here's an example plan for preparing coders (and others users of coded data) for ICD-10 implementation:

1. **Overview of ICD-10-CM** – this training should include the structure and format of ICD-10-CM, review of the general and chapter-specific guidelines, and practice with code application
2. **Setting-specific ICD-10-CM training** – the coder should practice applying ICD-10-CM codes to relevant cases (long term care, home health, and/or hospice) while referencing all applicable guidelines
3. **Practice, practice, practice** – in the months leading up to October 1, 2014, the coders should be routinely practicing applying ICD-10-CM codes to cases

What's New in ICD-10-CM?

There are some nuances to coding for these non-acute care settings in ICD-10-CM. For those working in long term care settings, *AHA Coding Clinic* published a section on long term care coding issues for ICD-10-CM in the fourth quarter 2012 issue (found on pages 90-98). This resource provides helpful information such as the types of diagnoses to be assigned during the patient's stay, and answers to specific coding scenarios.

One of the key areas that coders from non-acute care settings should be aware of is that there are no "aftercare of injury" codes in ICD-10-CM. For these cases, the original injury is coded with the application of a seventh character to indicate that this is a subsequent encounter. The following scenario illustrates how this coding changes from ICD-9-CM to ICD-10-CM:

Patient was transferred to long term care following a type 1 open traumatic fracture of the left radial styloid process.

ICD-9-CM code – V54.12, Aftercare for healing traumatic fracture of lower arm

ICD-10-CM code – S52.512E, Displaced fracture of left radial styloid process, subsequent encounter for open fracture type I or II with routine healing

Detailed documentation is necessary in order to assign the specific fracture code. A review of current documentation for these types of aftercare cases may identify the need for additional training for clinicians on the essential documentation for ICD-10-CM.

To learn more about ICD-10 implementation specific to non-acute care settings, view AHIMA's Role-based Model for ICD-10 Implementation, available online in the AHIMA Body of Knowledge.

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