ICD-10: Not a Destination, But a Change Management Journey [Sponsored Article]

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While the ICD-10-CM/PCS implementation date is now behind us, the ICD-10 change management journey is far from over. Clinicians, executives, and managers must continue to support cultural alignment, collaborative communication, and performance improvement to realize the full promise of ICD-10.

This paper looks at steps ICD-10 transition leaders can take to ensure that ICD-10 implementation leads to lasting organizational transformation using a tested change management process.

Cultural Alignment for Sustainable Change

Make sure that you, the change architect, have expressed a commitment to long-term cultural transformation brought about through the ICD-10 transition. Convey the necessity and urgency of transformation while linking any necessary alterations to the organization's existing culture. Be explicit. Define what and when changes should occur while clearly articulating the role each individual will play.

Don't be afraid of repetition. Repeatedly voicing goals and expectations will help staff to hear and understand the change message. The industry is ever changing, with ICD-10 and value-based purchasing being the significant drivers of the healthcare transformation. Even though process improvement modifications may have been implemented under ICD-10, it's never too late to reiterate the rationale and objectives:

- Staff will become problem solvers and use critical-thinking skills
- Fundamental knowledge of health sciences will be more essential than ever
- Communication channels will open between staff who may never have engaged with each other before

Make sure that everyone in your organization understands what the landscape under ICD-10 will look like and what will constitute success.

In the process, you may need to disarm some well-intentioned guardians of the status quo, while mobilizing ICD-10 change agents—self-starting problem solvers—who are able to step away from the status quo because they believe in ICD-10's potential results and outcomes. It also means empowering ICD-10 change agents with the credibility and influence to enhance the implementation and impact of ICD-10.

Unfortunately, healthcare organizations tend to overuse or misuse these enthusiasts. The result: They oftentimes morph into overburdened change curmudgeons who either back off from intense participation or quit in frustration and anger.

Leadership is the solution. Clinical, administrative, and financial leaders must set the change agenda and goals, taking full responsibility for the transition to ICD-10 and associated initiatives. Their messages to team members should resemble something like this:

"We value and reward those who embrace and participate in the change agenda for ICD-10 implementation and other initiatives—from value-based reimbursement and population health management, to patient engagement and performance improvement. Our organization must transform itself into a patient-centric business, and it is through a fully engaged staff that this will be successful."

Also, take time to evaluate your organization's environment by posing the following questions:

Tale nt: Does the organization have an adequate number of staff with the knowledge, skill, expertise and attitude to function as change agents to sustain organizational expectations after ICD-10 implementation?

Resources: Has the organization provided its change agents with adequate time, funding and support to ease the challenges of implementation of ICD-10 and beyond? Has it developed systems of reward, recognition, and financial incentives that will help participants feel respected, acknowledged and valued?

Recruitment: Has the organization created a program through which it can rely on veteran staff to recruit, mentor, and coach new champions for future change management projects?

Managing Post ICD-10 Implementation Issues

Never lose sight of project management essentials. Follow your ICD-10 planning schedule to check progress on established implementation milestones and meet incremental deliverable dates that extend beyond October 1, 2015. Assign responsibility to an ICD-10 transition team for the post-transition monitoring and measuring of success.

Anticipate challenges and quickly identify potential barriers and pitfalls related to policy, infrastructure, technology, staffing, or resources. Staff will become problem solvers and use critical-thinking skills, and fundamental knowledge of health sciences will be more essential than ever. Make sure that everyone can pose and answer the following questions related to barriers:

- What is the nature and scope of the barrier?
- What is its potential impact—on policy, people, systems, patients, and providers?
- How can ICD-10 implementation team members or leadership remove or mitigate the impact of the barrier?
- Who will lead the effort to remove the barrier and report back to the implementation team?
- What will it take—in financial and human resources—to remove the barrier?

Also request that ICD-10 transition team members submit regular reports to leadership that document action plans, milestones, and due dates, as well as progress made on assignments. Regular monitoring will increase the likelihood of a successful ROI and prove that process and performance improvement is sustainable. Because organizations find it tough to sustain change momentum for more than 18 months, it is vital to celebrate milestones and achievements. If organizations do not show appreciation and recognition, participants, including change agents, lose interest and the project goes stale. Just as important, the organization misses an opportunity to identify implementation trouble spots.

The best approach is to reward change agents and participants through every available means of providing accolades. Some organizations turn to special commemorative events, such as lunches, dinners, picnics, or outings, while others showcase project leaders within publications and on social media and web sites.

Going Forward

As you move ahead, be on the lookout for new and emerging change agents. These individuals can participate in upcoming task forces and increasingly effect management initiatives in care delivery, payment, or technology. Also engage some of the organization's culture keepers who willingly jump on the change bandwagon once executive management removes risks and barriers.

Conclusion

Implementing healthcare change often fails because executives lack skill, knowledge, or experience in change management. By understanding your organization's culture and how people interact within it, you can make long-term sustainable change a reality in order to reap the full benefits of ICD-10, react quickly to a changing reimbursement environment, and keep the organization a viable entity.

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