The ICD-10 2011 To-Do List

Save to myBoK

By Alan F. Dowling, MS, MCS, PhD, chief executive officer, and Theresa A. Wisdom, MBA, RHIA, senior projects officer

As the ICD-10 conversion deadline approaches, its implementation is likely to become a healthcare facility's most significant objective. It presents HIM professionals with an opportunity to demonstrate their expertise and assume a leadership role within their institutions as they lead this transition effectively.

A Solution-Centered Mind Set

ICD-10's granularity requires precise electronic clinical documentation for clinical decision making, which requires institutions examine their current ICD-9 implementation to understand the transition gap that exists in moving to ICD-10. Questions that you can ask yourself and your steering committees include:

- Are we working with our vendors to ensure that current application systems are leveraging the data sources that are currently in place?
- Are our products ICD-10 ready? Can the vendor prove it?
- Are vendor applications using recognized standards for the implementation and the output such as comprehensive medical summaries?
- Does the vendor have the capacity to assist us if and when needed?
- Can we implement ICD-10 in a test environment to resolve issues before go-live?
- What additional vendor costs will we incur?
- Do we have tested conversion and adoption procedures?
- Are all relevant staff trained appropriately?

By ensuring that system capabilities support ICD-10, HIM professionals can help obviate problems that would prove catastrophic if they surfaced close to the 2013 implementation deadline. Understanding the gap between the current state of ICD-9 and the desired future state using ICD-10 can enable HIM professionals to focus resources on key transition activities, ensure application software viability early on, reduce adoption and conversion costs, and add value to their organization's health information resources. HIM professionals can emerge as more valued leaders by ensuring their organizations succeed in this conversion.

"Three Short Years" describes the milestones in the ICD-10 implementation and highlights AHIMA survey results showing that many facilities are getting a late start in their conversion programs.

In "Budgeting for ICD-10," Tori Sullivan recommends careful financial planning, which includes understanding costs by category and stage.

Integrating process improvement, cost savings, and increased effectiveness can result from better disease management by payers and better understanding of healthcare outcomes. This will be especially true as ICD-10 claims data support a broad array of population health research that go beyond the administrative purposes of a new code set.

"Quality Check" underscores that providing a healthcare service is no longer enough to receive payment. Professionals interviewed in this article describe the types of quality measures and their increasing importance in quality improvement and reimbursement.

Communicating New Directions

HIM professionals have a long history of expertise in structured codes, quality, and outcome measures. Forward-thinking professionals today will capitalize on this expertise and ICD-10 implementation to continue to play a key role in the ethical use

and management of health information, health information exchange, EHR adoption, and meaningful use.

Article citation:

Dowling, Alan F.; Wisdom, Theresa A. "The ICD-10 2011 To-Do List" *Journal of AHIMA* 81, no.9 (September 2010): 21-.

Driving the Power of Knowledge