

Welcome

ICD-10 “Road to Ten”: ICD-10 Implementation Guidance



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On Behalf of CMS
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Agenda

- Where physician practices need to be with ICD-10 implementation today
- How to test
- An Ohio Medicaid ICD-10 implementation update
- Testing opportunities with Ohio Medicaid
- Information from the Ohio State Medical Association on ICD-10 resources and training



I068 Other rheumatic aortic valve diseases
I069 Rheumatic aortic valve disease, unspecified
I070 Rheumatic tricuspid stenosis
I071 Rheumatic tricuspid insufficiency
I072 Rheumatic tricuspid stenosis and insufficiency
I078 Other rheumatic tricuspid valve diseases
I079 Rheumatic tricuspid valve disease, unspecified



ICD-10

Official CMS Industry Resources for the ICD-10 Transition
www.cms.gov/ICD10



ICD 10: The Road Forward

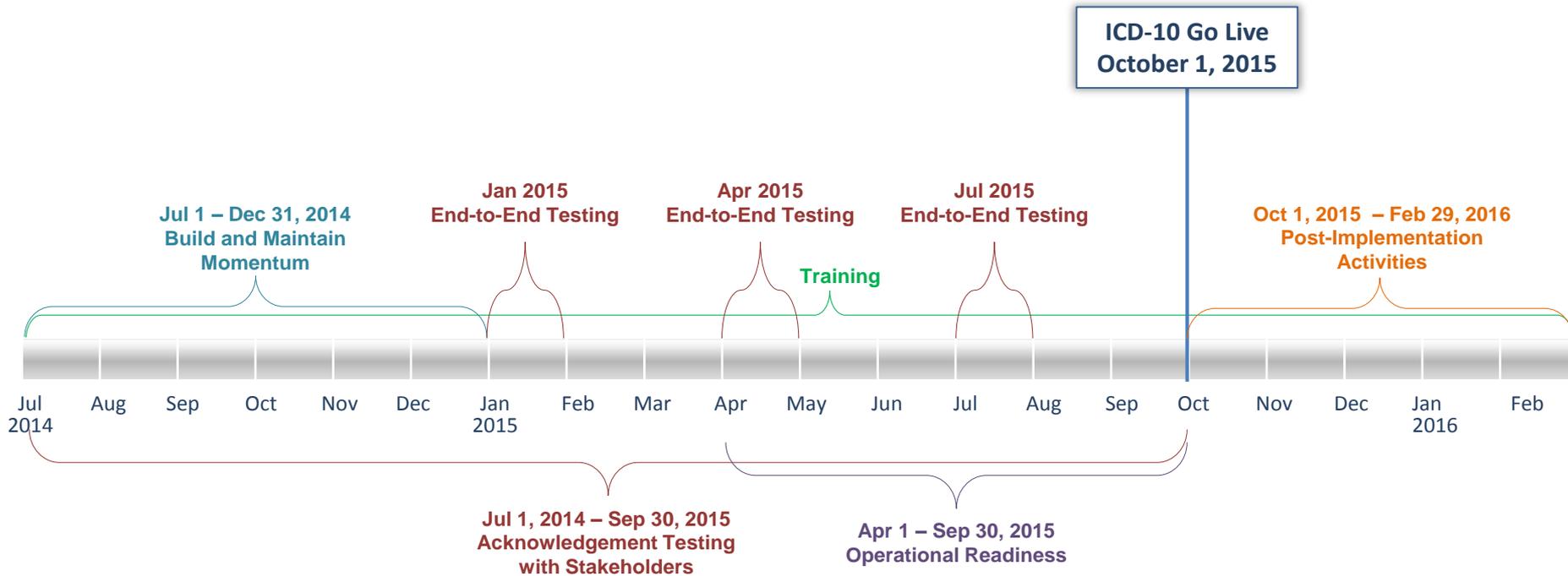


Final Rule Issued

- On July 31st, 2014, The U.S. Department of Health and Human Services (HHS) issued a rule finalizing Oct. 1, 2015 as the new compliance date.



Now is the Time to Prepare Compliance Date – Oct. 1, 2015



“Road to 10” Physician Portal

<http://www.roadto10.org>

In collaboration with physicians, CMS developed www.roadto10.org, a no cost tool:

- Designed from a physician perspective
 - ✓ Specialty specific
- Customizable, actionable, bite-sized, short cuts
- Answers the key questions:
 - ✓ What is ICD-10
 - ✓ How do I get started
 - ✓ What is the path to success
 - ✓ What questions to ask
 - ✓ What resources and tools are available

- The *Road to 10* Action Plan contains a checklist of items to consider when planning the transition to ICD-10, organized into 5 key steps:

- 1 Plan Your Journey
- 2 Train Your Team
- 3 Update Your Processes
- 4 Engage Your Vendors & Payers
- 5 Test Your Systems and Processes

VISIT [HTTP:// WWW.ROADTO10.ORG](http://www.roadto10.org) TODAY TO GET STARTED



Road to 10: Plan Your Journey

Customize Your Action Plan

Get Started

Tell us a little about your practice, so we can create an Action Plan for you.

My Specialty (Pick one)

Click to select your specialty



Family Practice



Pediatrics



OB/GYN



Cardiology



Orthopedics



Internal Medicine



Other Specialty

My Practice Size (Pick one)

Click the size of your practice so we can better understand your needs.

1-2 Physicians

3-6 Physicians

Over 6 Physicians

My Technology & Staffing Partners (Choose all that apply)

Click the technology and services your practice utilizes to generate a readiness checklist for each vendor.

Electronic Health Records



CMS ICD-10

Official CMS Industry Resources for the ICD-10 Transition

www.cms.gov/ICD10

Road to 10: Action Plan

Action Plan

Click "Explore Section" within the five sections of your Action Plan below to review the tools provided and action steps defined for you.

Click "Download Action Plan" to download a PDF copy of your personalized action plan to use in your practice.

DOWNLOAD ACTION PLAN

 Edit Practice Details

Plan Your Journey

Explore Section >

Train Your Team

Explore Section >

Update Your Processes

Explore Section >

Engage Your Vendors and Payers

Explore Section >

Test Your Systems and Processes

Explore Section >



Road to 10: Action Plan

Check the box when you have completed each step.

Understand the Impact

- REVIEW** the roadmap, action steps, checklists, and other materials included with your action plan to understand where you are in your journey and what you need to do next.
- ISOLATE** where diagnosis codes are used in your practice today. Ask your team how and where they use/see ICD-9 codes. Use the Diagnosis Code Impact Inventory Template included with your action plan to catalog the processes, forms, and information systems which rely on ICD-9 diagnosis codes.
[Download Your Process and System Inventory Template](#)
- PINPOINT** the ICD-9 codes you most frequently use by reviewing superbills, encounter forms, practice management system reports, and the Common Codes in your action plan.
- UTILIZE** the list of your most frequent ICD-9 codes to help identify the ICD-10 codes relevant to your practice. Make special note of those conditions where the available number of diagnosis codes in ICD-10 is noticeably larger. The following sources of information will assist you in identifying the most pertinent ICD-10 codes:
- Tabular form of the 2014 release of ICD-10-CM codes and descriptions published by the National Center for Health Statistics (NCHS) - ftp://ftp.cdc.gov/pub/Health_Statistics/NCHS/Publications/ICD10CM/2014/ICD10CM_FY2014_Full_PDF.zip file then unzip and save the PDF document named "ICD10CM_FY2014_Full_PDF_Tabular" to your local device
 - Online ICD-10-CM search tools/applications
 - Hard copy or electronic publications of 2014 ICD-10-CM code books
 - Common Codes from your action plan
 - 2014 General Equivalence Mappings (GEMs) Diagnosis Codes and Guide from CMS - <http://cms.gov/Medicare/Coding/ICD10/2014-ICD-10-CM-and-GEMs.html>
 - Crosswalks from your system vendors and largest payers

Note - Your practice should natively code in ICD-10. Only use crosswalks and mappings as a point of reference. By natively coding in ICD-10, your practice will be in a better position to select specific codes reflecting patient complexity of care.

Identify the Team



CMS ICD-10

Official CMS Industry Resources for the ICD-10 Transition
www.cms.gov/ICD10

Road to 10: Train Your Team

Common Codes for Your Specialty

We have identified an illustrative sample of high impact diagnosis codes

Primer for Clinical Documentation

This document introduces ICD-10 clinical documentation changes for common conditions associated with your area of practice. It highlights the

Clinical Scenarios

We have created sample, outpatient focused scenarios to illustrate specific ICD-10 clinical documentation considerations. These examples underscore the importance of including the proper level of detail needed to support the selection of the most appropriate ICD-10 diagnosis codes based on a patient's circumstance.

Training and Education Resources

In order to be ready for the transition, your practice must receive appropriate education on the changes that occur with ICD-10. There are three major areas of training your practice should receive.

[VIEW ICD-10
TRAINING AND EDUCATION
RESOURCES](#)



Road to 10: Update Your Processes

Improve Clinical Documentation

- OBTAIN** the following information from your clearinghouse, billing service, or system for the most recent twelve (12) month period:
 - Your claim rejections and denials by ICD-9 diagnosis code and payer.
 - The most common unspecified ICD-9 codes you submit by payer.
- PINPOINT** the ICD-9 codes with the highest rate of rejections and denials, by claim count and dollar volume, for each of your largest payers:
 - Categorize the primary reasons for the denials and rejections.
 - Note changes you can make to your documentation and billing processes to address the fundamental causes for the denials

Revise Paper Forms and Templates

- MODIFY** link to
- IDENTIFY** reduce patient
- GAIN**
- INCORPORATE** ICD-10 codes into paper forms and tools which reference diagnosis codes:
 - Pre-admission/Pre-certification
 - Referral
 - Authorization
 - Orders
 - Superbills/Patient Encounters
 - Inpatient and Outpatient Scheduling
 - Quality Reporting
 - Public Health Reporting

Modify Policies and Procedures

- ADD** steps to determine if a patient is eligible for dual/supplemental coverage for special clinical programs which are condition/diagnosis based:
 - End Stage Renal Disease (ESRD)
 - Black Lung Disease
 - Other Conditions
- IDENTIFY** your most common services that may trigger reviews or denials related to medical necessity. Adopt procedures to isolate the ICD-10 diagnosis codes needed to make a coverage determination for these common services prior to claims submission.
- TRACK** patient complaints, payment delays, denials, and increases in authorization volume for at least three (3) months beginning on 10/1/2014. By logging this information, your practice will be in a better position to spot and address problems more quickly.



Road to 10: Engage Your Vendors and Payers

Ensure that your EHR and practice management systems are ready

Check the box when you have completed each step.

Technology Vendors

Electronic Health Record (EHR) and Practice Management (PM) systems are impacted by the ICD-10 transition and need to be updated. In addition, other technologies used by your practice such as coding, reporting, and decision support tools may need to be updated. If your practice uses these systems, you will need to coordinate with your technology vendors regarding these updates. Also, there are specific activities your practice may need to complete to implement these updates.

Here you can enter all the vendors you will need to engage. Check the appropriate box when you have contacted or responded to each vendor to keep track of your progress.

Contacted	Responded	Vendor Name	Contact Name
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

[Download Technology Vendor Assessment in the Template Library at www.roadto10.org](http://www.roadto10.org)

The following checklist will help guide you as you engage your technology vendors and payers to complete these activities:

- Contact** your technology vendors to determine if their solutions are impacted by ICD-10. Understand their plans for compliance. Download a copy of the Technology Vendor Assessment in the Template Library at www.roadto10.org. Email a copy of the assessment to each vendor. Ask them to complete the assessment and return it to you promptly.
- Evaluate** your technology vendor contracts to understand the type of ICD-10 expenses that may be separate from regular fees. Clarify with each vendor the additional ICD-10 technology expenses for which you need to allocate funds.
- Review** the completed Technology Assessments returned to you by each vendor. For each vendor, discuss the questions you have regarding their responses.

Questions for Technology Vendor		
Question	Vendor Response	
Application		
1. Which of your applications are impacted by ICD-10?		
2. Are your applications remediated and are the ICD-10 updates generally available?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
3. Is there a separate fee for your ICD-10 updates?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
4. Will your systems use date of service to determine the codes to use (ICD-9 or ICD-10)?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
5. Will your systems support dual coding of services rendered before 10/3/2014?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
6. Are there 3 rd party embedded products in your software which need to be updated for ICD-10?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
7. Is additional infrastructure (hardware, servers, etc.) potentially needed to accommodate your ICD-10 updates and store ICD-10 codes?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
Code Set Updates		
1. How frequently will ICD-10 diagnosis code updates be applied to your applications?		
2. How long do you plan to support ICD-9 diagnosis code reference files?		
Interfaces		
1. Have your HIPAA transaction sets been updated to address ICD-10?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
2. What other interface changes will be included with your ICD-10 software updates?		
Reporting		
1. Which of your reports are impacted by ICD-10?		
2. How will reports which are dependent upon diagnosis code categories be handled?		
3. How will longitudinal and historical reporting be updated to accommodate ICD-10?		
4. How will quality and public health reports be updated to accommodate ICD-10?		
5. Do any of your solutions require crosswalks from ICD-9 to ICD-10?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Comments:
6. Which crosswalks are you providing and can they be customized?		
Configuration		



Road to 10: Test Your Systems and Processes

Prepare Test Cases

Real world test cases need to be assembled before you start testing. The following checklist provides you with suggestions on how to prepare these test cases.

STEPS TO PREPARE TEST CASES

Perform Internal Testing

Internal testing helps to validate that your key systems can search on, accept, store, process, send, and receive ICD-10 diagnosis codes.

STEPS TO PERFORM INTERNAL TESTING

Conduct External Testing

External testing with vendors and payers will help you validate that transactions containing ICD-10 diagnosis codes can be sent and received successfully.

STEPS TO CONDUCT EXTERNAL TESTING

Practice and Validate

Practice and validation involves the internal simulation of native ICD-10 coding on select encounters.

STEPS TO PERFORM PRACTICE AND VALIDATION



Road to 10: Test Your Systems and Processes

Prepare Test Cases

- Find Encounters that Represent Test Scenarios
 - Use real claims data, if possible; if not, as close to real data as possible and a mix of your overall patient demographic.
 - Consider many payers are asking for test files coded in both ICD-9 and ICD-10. This may require a re-coding or confirmation of the original ICD-9 data.
- Prepare Test Cases
 - Natively code in ICD-10. Only use crosswalks and mappings as a point of reference. By natively coding in ICD-10, your practice will be in a better position to select specific codes reflecting patient complexity of care.



Road to 10: Test Your Systems and Processes

Perform Internal Testing

- Test systems that store, process, send, receive, or report diagnosis code information:
 - Perform eligibility & benefits verification
 - Process a referral
 - Request authorization using ICD-10 codes
 - Schedule an office visit
 - Submit quality data using ICD-10 codes
 - Code an encounter
 - Generate and process a claim
 - Perform a claim status inquiry
 - Reconcile and post a payment
 - Run frequently used reports
- Document test results and retest as needed.



Road to 10: Test Your Systems and Processes

Perform External Testing

- Prioritize the stakeholders with whom you need to perform external testing.
- Submit test data to your clearinghouse, billing service and/or payer(s).
- Review test results for the data you submitted to your clearinghouse, billing service, and/or payer(s).
- Update your processes to address issues uncovered during testing.



Road to 10: Test Your Systems and Processes

Practice and Validate

- Practice and validation involves the internal simulation of native ICD-10 coding on select encounters for a period of time before the compliance date.
- Although you will not bill using ICD-10 codes until the compliance date, practicing can help increase your proficiency with ICD-10 coding and verify your clinical documentation contains sufficient detail to support ICD-10 code selection.
- PRACTICE AND TEST





□ **Update on Ohio Medicaid's ICD-10 Implementation**

- Ohio Medicaid has completed implementation of ICD-10 in MITS and is ready for the 10/1/15 compliance date
- Rules and policies have been updated to use the appropriate ICD-10 terminology and/or codes and will be effective on 10/1/15
- Per federal regulations, all providers that use ICD-9 today will be required to use ICD-10 starting 10/1/15
- Testing has started and will continue through this summer
 - For Medicaid managed care plan testing, please contact the specific plan that you work with

Ohio Medicaid - Billing TIPS

1. Claims submitted to Ohio Medicaid for all healthcare services on or after Thursday, October 1, 2015 must use ICD-10.
2. There is no transition period; 10/1/15 is a hard date for compliance. The compliance date is based on:
 - Date of service for outpatient and professional services,
 - Date of discharge for inpatient hospital services,
 - Note that ICD-9 codes will continue to be used on claims with dates of service or discharge **prior to** 10/1/15.
3. Providers cannot bill ICD-9 and 10 codes on the same claim; only one code set per claim can be accepted.

Ohio Medicaid - Billing TIPS (Continued)

4. Paid claims that need adjusted will follow the same compliance date guidelines as stated above. When adjusting a paid claim, use the code set that was effective on the date of service
5. For prior authorization, anticipated dates of service prior to 10/01/2015, please submit PA requests with ICD-9 codes. On or after 10/01/2015 please submit PA request with ICD-10 codes
 - Cancel the PA if the anticipated date of service ICD code no longer matches what must be used for that date of service
 - PA requests will be accepted with ICD-10 codes prior to 10/01/2015 for services that will be provided after 10/01/2015
6. Finally, claims submitted by your practices that do not use ICD-10 codes for dates of service on or after 10/1/15 will deny and may impact timely Medicaid payment to your practice.

Ohio Medicaid – An Important Change

Claims with a delivery procedure code (ICD-10 and CPT) will require an ICD-10 diagnosis code that indicates the week of gestation. This will impact inpatient, outpatient, and professional claims.

ICD-10 Diagnosis Codes							
Z3A.00	not specified	Z3A.16	16 weeks gestation of pregnancy	Z3A.26	26 Weeks gestation of pregnancy	Z3A.36	36 Weeks gestation of pregnancy
Z3A.01	Less than 8 weeks gestation of pregnancy	Z3A.17	17 weeks gestation of pregnancy	Z3A.27	27 Weeks gestation of pregnancy	Z3A.37	37 Weeks gestation of pregnancy
Z3A.08	8 weeks gestation of pregnancy	Z3A.18	18 weeks gestation of pregnancy	Z3A.28	28 Weeks gestation of pregnancy	Z3A.38	38 Weeks gestation of pregnancy
Z3A.09	9 weeks gestation of pregnancy	Z3A.19	19 weeks gestation of pregnancy	Z3A.29	29 Weeks gestation of pregnancy	Z3A.39	39 Weeks gestation of pregnancy
Z3A.10	10 weeks gestation of pregnancy	Z3A.20	20 weeks gestation of pregnancy	Z3A.30	30 Weeks gestation of pregnancy	Z3A.40	40 Weeks gestation of pregnancy
Z3A.11	11 weeks gestation of pregnancy	Z3A.21	21 weeks gestation of pregnancy	Z3A.31	31 Weeks gestation of pregnancy	Z3A.41	41 Weeks gestation of pregnancy
Z3A.12	12 weeks gestation of pregnancy	Z3A.22	22 Weeks gestation of pregnancy	Z3A.32	32 Weeks gestation of pregnancy	Z3A.42	42 Weeks gestation of pregnancy
Z3A.13	13 weeks gestation of pregnancy	Z3A.23	23 Weeks gestation of pregnancy	Z3A.33	33 Weeks gestation of pregnancy	Z3A.49	Greater than 42 weeks gestation of pregnancy
Z3A.14	14 weeks gestation of pregnancy	Z3A.24	24 Weeks gestation of pregnancy	Z3A.34	34 Weeks gestation of pregnancy		
Z3A.15	15 weeks gestation of pregnancy	Z3A.25	25 Weeks gestation of pregnancy	Z3A.35	35 Weeks gestation of pregnancy		

What Can Ohio Medicaid Providers Do to Prepare for ICD-10?

1. Educate your staff and yourself about ICD-10

- Determine staff training needs and participate in training from a reputable organization
- Practice coding in ICD-10
 - Code claims using a current medical record
- Pay attention to communications from CMS, ODM, Medicaid managed care plans, provider associations such as OSMA, billing & EHR vendors, clearinghouses, and trading partners
- Take advantage of free training resources such as those offered and shared today by CMS and OSMA

Ohio Medicaid – Preparation

2. Assess and remediate

- Conduct an ICD-10 needs assessment- where is ICD-9 used in your practice today
 - Billing software
 - Clearinghouses and trading partners
 - Electronic health records
 - Reports and medical records
- Update your policies, procedures, reports, and systems
 - Review your medical records and documentation– may need to expand for ICD-10
 - Code a current medical record in ICD-10
 - Review your ‘superbill’– may need to update for ICD-10

Ohio Medicaid – Preparation

3. Test

- Test internally
- Test with your vendors (billing, EHRs, etc.), Medicaid managed care plans, clearinghouses, & trading partners
- Verify that your vendors, clearinghouses, and trading partners are testing with Ohio Medicaid
- If you submit claims through the MITS web portal, consider testing temporarily through one of Medicaid's trading partners
- Participate in the CMS-sponsored testing tool, CollabT

Ohio Medicaid – Preparation

4. Stay up-to-date on Ohio Medicaid's ICD-10 communications

- Visit our ICD-10 webpage
www.medicaid.ohio.gov/PROVIDERS/Billing/ICD10.aspx
 - ICD-10 TIPS - billing guidelines
 - Provider Q&A
 - Testing information
 - Regulations
 - Resources
- Read MITS web portal and fee-for-service remittance advice banner messages
- Work with each Medicaid managed care plan (MCP); each MCP has their own ICD-10 webpage
- Pay attention to message from your trading partners, vendors, and provider associations such as OSMA

Ohio Medicaid – CollabT

- **Collaborative Testing (CollabT) Tool**
 - CMS’s contractor Noblis, subcontracted with Edifecs to develop a testing tool for State Medicaid Agencies and their providers
 - The web-based tool provides the opportunity to practice ICD-10 coding with real medical records and provides instantaneous feedback so coders can learn from their mistakes
 - There is no cost for providers to practice ICD-10 coding in CollabT tool
 - To participate, please visit:
<http://medicaid.ohio.gov/Portals/0/Providers/Billing/ICD10/Updates/CollabT-415.pdf>

Ohio Medicaid – Q&A

Q1: Will ICD-10-PCS replace CPT?

A1: No. ICD-10 -PCS will be used to report hospital inpatient procedures only. The Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) will continue to be used to report services and procedures in outpatient and professional settings. However, all claims (inpatient, outpatient, and professional) will require an ICD-10 diagnosis.

**More Ohio Medicaid ICD-10 FAQs and billing guidance is located on Ohio Medicaid's ICD-10 webpage at www.medicaid.ohio.gov/PROVIDERS/Billing/ICD10.aspx. See Provider Q&A and ICD-10 TIPS.



Department of Medicaid

John R. Kasich, Governor

John B. McCarthy, Director

TENTH REVISION
ICD-10
INTERNATIONAL CLASSIFICATION OF DISEASES

ICD-10 is a new code set for reporting
medical diagnoses & inpatient procedures.

Thank you

ICD10questions@medicaid.ohio.gov

Ohio State Medical Association Mission Statement

The Ohio State Medical Association is dedicated to empowering physicians, residents and medical students to advocate on behalf of their patients and profession.

Ohio State Medical Association

Advocacy – representing physicians in front of the legislature, regulatory boards, and government and private payers

Member Services – communications and education to assist in running your practice and discounts on professional development

Member Discounts – access to exceptional practice management-related products and services through the OSMA Preferred Partner Program

Ohio State Medical Association Member Benefits

- Information and Publications
- OSMA Community
- Education
- Payer Assistance
- Preferred Partner Program

OSMA VITALS Follow us on:    
Your monthly resource for a healthy practice

Welcome to the third issue of **OSMA Vitals**, a practice management newsletter prepared exclusively for our valued physician and associate members.

As a member of the Ohio State Medical Association (OSMA), you'll receive this monthly newsletter to keep you up to date on important information, events and deadlines that are relevant to you and vital to your practice. If you do not wish to receive OSMA Vitals the second week of each month, click [here](#) to opt out of this monthly email. (Note: By clicking unsubscribe, you will be removed from all OSMA emails).

IMPORTANT DATES & DEADLINES

- April 1: Deadline to switch to new CMS 1500 form. [More info](#)
- April 8: Windows XP Sunset. [More info](#)
- May 1: Enrollment begins for Medicaid Managed Care: My Ohio. [More info](#)
- June 24: OSMA Medicaid and Medicare Updates begin. [More info](#)

VITAL RESOURCES

HIT Solutions  **HIT Solutions: Windows XP Sunset**
OHIO STATE MEDICAL ASSOCIATION Effective April 8, 2014, Microsoft will no longer support the Windows XP operating system. As a result, technical assistance and automatic updates for Windows XP will no longer be available to those still using Windows XP technology. This raises three issues for medical practices – compliance, security, and operations. [Click here for more information.](#)

 **CMS 1500 Form**
To prepare for the transition to ICD-10, the Centers for Medicare and Medicaid Services (CMS) has updated the 1500 claim form to accept the new code set. This form will accommodate ICD-9 and ICD-10 codes, but the person completing the form must indicate the code set used. Click [here](#) for more information or [here](#) to view the form.

 **Partner Tip: Meaningful Use Stage 2: Is Your Practice Ready?**
Is your practice ready for the new core measures and higher reporting thresholds of Stage 2 Meaningful Use? [Athenahealth](#), an OSMA Preferred Partner, is offering a complimentary webinar on Wednesday, April 16 at 12:15 p.m. designed to help practices form a plan and take action. Meaningful Use Stage 2: Is Your Practice Ready will address how measures differ from those in Stage 1 and how to best prepare for Stage 2 by examining Stage 1 performance. [Register today to learn](#)

Ohio State Medical Association Education

www.osma.org/education

- ICD-10 Coding Courses – Summer 2015
- Medicare & Medicaid Updates – June through Aug. 2015
- Payer & Reimbursement Updates – Oct. 2015
- Website resources –
<https://www.osma.org/Resources/ICD-10-Implementation>

Education Resources

www.osma.org



The screenshot shows the Ohio State Medical Association website. The navigation bar includes links for Top, Home, Search, Social, Contact, Join/Renew, and Member Log In. The main menu features About, My OSMA, Advocacy, Education, Public Affairs, and Resources. The Resources dropdown menu is open, listing various topics. A red arrow points to the Resources menu item, and another red arrow points to the ICD-10 Implementation item in the dropdown.

- ICD-10 Implementation
- Ebola Virus Disease
- Health Information Technology
- Legal Standards and Guidelines
- Medical Board Licensing and Discipline
- MyCare Ohio
- Prescription Drug Abuse
- Public Health
- Reimbursement and Payer Assistance
- Classified Ads

2015 Medicaid & Medicare Updates

Join us to hear valuable information and recent updates on Ohio's Medicare and Medicaid program changes. Don't miss out on this once a year series!

ICD-10 Implementation

Ebola Virus Disease

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ICD-10 Implementation

It's official: October 1, 2015 is the new ICD-10 compliance date!

With the transition to ICD-10, current code sets will undergo a significant restructuring. Practices may need to code from different chapters since ICD-10 codes convey more specific information, such as which side of the patient's body is involved, whether this was the first or a subsequent encounter, complications, whether healing is progressing as expected, and more. The OSMA strongly encourages members and their staff to use the additional time wisely for education, training and testing.

Training / Education

For upcoming ICD-10 classes, visit the OSMA's [Current Courses webpage](#). Also, click on the red "Education & Training" tab on the righthand side of this page for more education and training options.

Implementation Readiness

According to the American Health Information Association (AHIMA), here are important issues to address to be sure your practice will be ready for ICD-10:

- Upgrade or replace your practice's IT systems to accommodate the new code set. For more information, download this whitepaper: [Preparing and Implementing a Comprehensive](#)

ICD-10

Education &
Training

Communication &
News

Useful Links

[ICD-10 Implementation](#)[Ebola Virus Disease](#)[Health Information Technology](#)[Legal Standards and Guidelines](#)[Medical Board Licensing and Discipline](#)[MyCare Ohio](#)[Prescription Drug Abuse](#)[Public Health](#)[Reimbursement and Payer Assistance](#)[Classified Ads](#)

Education and Training

For upcoming ICD-10 classes, visit the OSMA's [Current Courses webpage](#).

CMS ICD-10: The Road Forward Webinar

In Jan. 2015, the OSMA partnered with Ohio Medicaid and the Centers for Medicare & Medicaid to provide a webinar on ICD-10 implementation. The PowerPoint slides from this presentation are now available for download.

[CMS ICD-10: The Road Forward Webinar Slides >>](#)

ICD-10 Documentation Essentials

Appropriate physician documentation and use of ICD-10 codes is critical to successful ICD-10 implementation. To help with this transition, the OSMA has developed resources focused on the documentation needed for ICD-10. **These resources are for OSMA members and their staff at no charge.**

- [ICD-10-CM Documentation Essentials: Any Specialty](#)
- [ICD-10-CM Documentation Essentials: General Surgery](#)
- [ICD-10-CM Documentation Essentials: Hematology/Oncology](#)
- [ICD-10-CM Documentation Essentials: OB/GYN](#)
- [ICD-10-CM Documentation Essentials: Orthopedics](#)
- [ICD-10-CM Documentation Essentials: Pediatrics](#)

ICD-10

Education &
TrainingCommunication &
News

Useful Links

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Classified Ads

Useful Links

- [Talking with your vendors about ICD-10](#)
- [HIMSS ICD-10 Playbook](#)
- [AAPC Code Translator](#)
- [ICD-10 Reference Guides \(by Specialty\)](#)

AAPC has created these coding resources to help you make the transition to the new system. These complimentary sheets can be downloaded and make great desk references.

Payer Links

- [CMS Road to 10](#)
- [Ohio Medicaid ICD-10](#)
- [Aetna ICD-10 FAQ](#)
- [Anthem Blue Cross and Blue Shield ICD-10 Updates](#)
- [Cigna ICD-10 Compliance](#)
- [Humana - prepare now for ICD-10 transition](#)
- [United Healthcare ICD-10](#)

ICD-10

Education & Training

Communication & News

Useful Links





The OSMA partners with organizations that are willing to provide members exceptional service, discounts, and/or preferred terms and conditions. Partners include:

- Accu Medical Waste Service
- athenahealth
- CompManagement, Inc.
- The Doctors Company
- EasyIT
- PQRSwizard
- Provista
- Transworld
- Ready 10

Are you ready for ICD-10?

Ready10™

Presented By



With Ready10™ we can help you Get Ready and Be Ready for ICD-10

HEALTHCARE'S ONLY COMPLETE ICD-10 SOLUTION

We've always made a point to seek out partners that are committed to our high standards and share our values. As a trusted partner, you are as well aware as we are that a successful ICD-10 transition is critical to the financial viability of your clients' practices.

Large or small, physician practices have unique ICD-10 needs. Ready10™ was created to address those needs, and remains healthcare's premier physician practice-focused ICD-10 solution. To make it even easier to reach your physicians, we have developed Ready10™ so that you can take the lead in preparing physician practices for the imminent transition.

As you already know, Ready10™ is the easiest, most efficient way for physician practices to prepare for ICD-10. It's the only single-source solution that delivers everything they need to know and everything they need to do to successfully manage their transition to ICD-10 – and ensure that their reimbursements continue.

Ready10™ Delivers

Ready10™ simplifies the complicated aspects of ICD-10 and delivers step-by-step guidance through every phase of transition. In fact, after the initial setup, spending as little as 15 minutes per day with this simple-to-use, yet incredibly powerful solution can help your practice manage their transition to ICD-10 with ease.

Want us to guide you through the process step by step?

Your choice is Ready10™ Pro.

Want to Do-It-Yourself with the help of some very powerful tools?

Your choice is Ready10™ Basic.



FOR MORE INFORMATION VISIT US: OSMA.cptcdpros.com

Ready10™ Pro Starting at \$1995*



In just 5 hours, our experts will have your members on track to take on the ICD-10 transition. Here's how ...

TRAINING + SET-UP

- 5 hours of consulting with an ICD-10 expert including:
 - Getting you started creating your personalized transition plan.
 - Conversion of the Top 20 codes for your specialty.
 - Expert review of 50 charts to show you how to use the results.
 - Showing you how to get your entire practice fully engaged.
 - How to determine if your vendors and payers are really ready.

IMPLEMENTATION + MANAGEMENT

- The Ready10™ web-based, virtual consultant will allow you to:
 - Quickly convert all your codes with Ready10™ Translator.
 - Implement and maintain a complete ICD-10 transition plan.
 - Automatically assign tasks, milestones and deadlines.
 - Receive automated code conversions and chart review results.
 - Also get post-transition guidance, revenue tracking and analysis.

Ready10™ Basic Starting at \$499*

Our All-in-One, Web-Based, Do-It-Yourself Software Bundle ...

1. Ready10™ *Project Management* component for managing every aspect of your ICD-10 transition including project planning, budgets, surveys and impact assessments, automatic status updates for assigned tasks, milestones and deadlines, automated chart reviews, automated code conversions and much, much more!
2. Ready10™ *Translator* component for easily converting billing codes from ICD-9 to ICD-10 in half the time of other methods.

* PLUS \$99 per additional billable provider (one provider license and five users included)

Questions about Ready10? Contact Samantha Ray at sray@osma.org





Questions and Discussion