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Better to be ready than sorry with ICD-10 planning

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July 11, 2012 | Steff Deschenes

Concern about the ICD-10 transition is warranted, but uncertainty about what lies ahead should not prevent your practice from making appropriate preparations. After all, the consequences of inaccurate or delayed billing could far outstrip the time and effort needed to get ready for the conversion.

Dan Rodrigues, CEO of Kareo.com, a web-based medical billing software company, explained that changes in technology are helping both doctors and patients cope with the impending changes. He encourages healthcare organizations to begin gradual training now to avoid cramming as the rollout of ICD-10 gets closer.

According to Rodrigues there are five preventative measures that health organizations can take today to save cash flow in the future. These steps will help minimize and avoid disruptions in cash flow due to delays in claims processing and payment from insurance plans.

1. Use 5010-compliant medical billing software. The first step to successful electronic claim submissions in accordance with ICD-10 is to make sure any and all claims being made today are transmitted to payers electronically using 5010-compliant medical billing software.

2. Begin tracking payer accuracy. If you begin tracking payer accuracy today, you can establish solid baselines to compare ICD-10 payment accuracy after the implementation. This will give you a comparison benchmark to understand more fully the overall impact of the coding change.

3. Take advantage of educational opportunities. Specialty associations, such as the AMA, MGMA and PAHCOM, routinely present webinars, white papers and other educational opportunities to inform healthcare organizations about ICD-10. Also, a good technology vendor will help its customers learn more about the transition.

4. Create a grid; Rewire your brain. It's a good idea to take your most common medical diagnoses and create a crosswalk grid with the ICD-9 and ICD-10 code(s). This will help begin to re-program your brain.

5. Identify a "point person." Forget that ICD-10 has been delayed. It should be treated as both a priority and an active project for health providers. Appoint a staff member to be the "point person" for your ICD-10 transition, and have that individual routinely give updates to the rest of the staff.

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