



meridianSPECIALTY System
AmerisourceBergen

ICD-10 FAQs

Q: Why do we need to convert from ICD-9 to ICD-10?

A: The U.S. is the only country still using ICD-9 codes. The mandated change to ICD-10 will bring the U.S. up to speed with the rest of the world regarding medical codes - the WHO (World Health Organization) issued the ICD-10 coding system in 1998. ICD-9 lacks specificity, and as a result does not allow for an accurate description of diagnoses and inpatient procedures. It is also limited to a maximum of 24,000 codes which no longer reflect the new services and technology in CMS payment systems or the knowledge related to current disease processes.

Moving to ICD-10 increases the number of available codes to more than 155,000 and will allow room for incorporating emerging diagnoses and procedures. The more granular ICD-10 codes in conjunction with the digital clinical information incentivized by meaningful use stimulus dollars will also allow for a more outcomes-based payment paradigm and effectiveness comparisons.

Please visit [http://cms.gov/Medicare/Coding/ICD10/Downloads/ICD10_Introduction_060413\[1\].pdf](http://cms.gov/Medicare/Coding/ICD10/Downloads/ICD10_Introduction_060413[1].pdf) for more information regarding the requirements of converting from ICD-9 to ICD-10.

Q: Will customers have to purchase any additional hardware or software?

A: Software: No. Hardware: For certain practices that have hardware solutions that are near end-of-life, some upgrades may be required.

Q: Will the upgrades made to accommodate ICD-10 cost extra or be included in customer support fees?

A: Any software upgrades are included as part of your maintenance fees. Hardware upgrades are the responsibility of your practice.

Q: Is there going to be external testing available for customers?

A: We are assessing external testing requirements and possible deployment approaches. We are actively seeking testing input and workflow scenarios from current clients as we move towards ICD-10 readiness.

Q: Do customers have to do any testing with their EMR and PM Interface?

A: Yes, it is expected. Testing criteria to be determined.

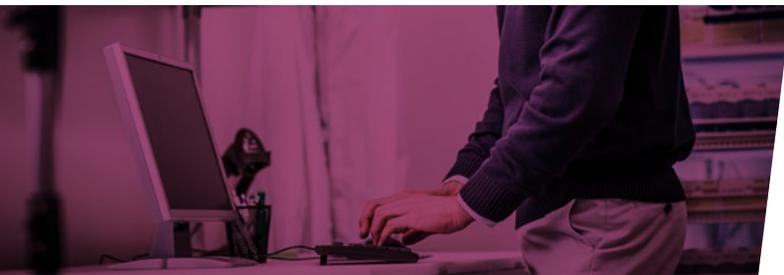
Q: Do customers have to do any testing with their EMR and Lab ordering Interface?

A: Yes, it is expected. Testing criteria to be determined.

Q: What do I need to do as a Healthcare Provider?

A: The name of the game is plan ahead of time. A summary of the tasks you will need to undertake are listed below. More specific information regarding these tasks can be found here:

- Identify your current systems and processes that use ICD-9 codes
- Talk with your practice management system vendor about accommodations for ICD-10 codes
- Discuss implementation plans with all of your clearinghouses, billing services and payers to allow for a smooth transition



- Talk with your payers regarding how ICD-10 implementation might affect your contracts
- Identify potential changes to work flow and business processes
- Assess training needs for your staff
- Budget for time and costs related to ICD-10 implementation, including expenses for system changes, resource materials and training
- Conduct test transactions using ICD-10 codes with payers and clearinghouses

Additional suggestions for a smooth transition:

- Create a project team with a clear leader to oversee the planning and implementation; the leader should work with the team to create a project plan, determine goals and timelines, assign tasks, assess the impact of the implementation on all business processes and train staff members
- Include a clinician on the project team
- Discuss the transition status and timelines regularly at staff meetings
- Determine whether or not all of the internal systems and infrastructure are affected; if yes, is there a cost to upgrade? Is the current hardware sufficient or does it need to be replaced?
- Pay special attention to your clinical documentation process and how the transition could affect whether or not claims are paid due to limited specificity when coding
- Determine training needs, the level of training needed and when it should take place
- Create a budget
- Test processes with all health plans, not just Medicare
- Plan for the potential need to use both ICD-9 and ICD-10 codes for a period of time in case not everyone involved in your business processes is ready by that deadline
- Set up meetings with health plans to review how reimbursement will be impacted
- Create a test strategy for each vendor

For more information, please call 877-570-8721, email info@intrinsic.com or contact your ION Solutions strategic account manager.