

ICD-10 NEWSLETTER

Volume 1, Issue 1

August 2015

Greetings physicians. This newsletter is intended to keep you informed of the migration to ICD-10 on **Oct. 1, 2015**. Each update will include information under the following sections:

- Training & Education Update
- IT Update
- Resources

Doctors Hospital at Renaissance Health System is requesting that you, our medical staff, help us to ensure our mutual success in transitioning to ICD-10. We encourage you to take advantage of the training that has been set up for you and the resources that are available.

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What does the ICD-10 conversion mean to physicians and providers?

- All physicians, hospitals, and health plans must transition to the use of ICD-10 codes for clinical diagnosis and procedure information on October 1, 2015.
- ICD-10 will support a physician's strong reputation by clearly communicating medical necessity and patient acuity in data used to determine quality measures.
- The foundation of implementing ICD-10 begins with a greater level of specificity being documented in the medical record.

Training & Education Update

The DHR ICD-10 Steering Committee, which includes various directors, administrators, and physicians, has chosen top vendors for your training needs. This includes: The Advisory Board and AHIMA.

The Advisory Board is a global research, technology and consulting firm partnering with more than 5,000 organizations across health care and higher education. We have enlisted them for physician specialty training in a classroom setting and their ‘Revenue Optimization Compass’ solution which will provide analytics to identify opportunities to improve clinical documentation and maximize revenue.

AHIMA offers documentation training modules accessible from your PC or mobile device. The short training modules (3-5 mins.) are specialty-specific, allow for CME credits, and will be available in September. In addition, an AHIMA mobile app will be available for quick access to documentation points. More info on AHIMA will be announced soon.



“Ready or not,
ICD-10 is here.”

Training Schedule - The Advisory Board

DATE / SPECIALTY				
Location: Edinburg Conference Center—Executive Board Room				
Time	Tuesday Aug 25, 2015	Wednesday Aug 26, 2015	Thursday Aug 27, 2015	Friday Aug 28, 2015
7:00 AM - 8:00 AM	Urology Nephrology	Psychiatry	Podiatry	General/Breast Surgery
9:30 AM - 10:30 AM	N/A	N/A	N/A	Allergy/Immunology
10:00 AM - 11:00 AM	Neurology/ Neurosurgery	Obstetrics / Gynecology	Orthopedics/ Orthopedic Surgery	N/A
11:00 AM - 12:00 PM	N/A	Pediatrics	N/A	General/Breast Surgery
12:30 PM - 1:30 PM	Critical Care/ Pulmonary	Cardiology	Rad/Interventional Radiology	N/A
5:30 PM - 6:30 PM	Ophthalmology	Family Medicine	Internal Medicine/ Geriatrics	N/A

Webinars & Handouts

Pediatric CDI Webinars—Available Now!!!

Available now is a two-part webinar series that provides targeted clinical documentation improvement training for DHR’s pediatricians. These webinars provide guidance on documentation requirements necessary to more accurately and completely describe the acuity, severity of illness and risk of mortality of pediatric patients.

You can download the webinars by clicking on the links below:

[Pediatric CDI Training Part 1](#) - 16 minutes and 12 seconds

[Pediatric CDI Training Part 2](#) - 11 minutes and 53 seconds

For PDF versions of the presentations, click on the link below:

[Pediatric CDI Training Part 1 and 2](#)

More specialty webinars to come soon!!!

Please refer to the Physician Resources page on the DHR website for handouts from The Advisory Board. “Why Words Matter” presents the importance of documentation, the basics, and the concepts that drive the

documentation requirements in a specific area, such as- breast surgery, cardiology, family practice, general surgery, oncology, internal medicine, and many more.

Please refer to the link below for instant access to these handouts.

<http://www.dhr-rgv.com/About-Us/Physician-Resources.aspx>

“ICD 10 implementation is set to begin on Oct. 1st, and it is imperative that physician practices take steps beforehand to be ready.” - AMA President Steven J. Stack, MD

Additional Classes Available Free for PHO members/staff or 50% discount

Name	Date	Time	Location	Cost	Registration
Teaching your Providers ICD-10 Lunch & Learn	Aug. 18th	12-1:30 p.m.	ECCR	Free	Martha 956-362-7181
ICD-10 Coding Workshop	Aug. 20th	9 -4:00 p.m.	ECCR	\$149.50 (1/2 price)	PMI 800-259-5562
ICD-10 Coding for the General Pediatrician Lunch & Learn	Sept. 24th	12-1:30 p.m.	ECCR	Free	Martha 956-362-7181
ICD-10 CM: The Next Level PMI Course	Sept. 24th	9 -4:00 p.m.	ECCR	Free	PMI 800-259-5562
ICD-10 Coding for the Gastroenterology Lunch & Learn	Sept. 29th	12-1:30 p.m.	ECCR	\$149.50 (1/2 price)	Martha 956-362-7181

IT Update

Diagnosis Assistant - Coming soon in Cerner!

- ◆ A tool intended to provide physicians a way to clinically choose an appropriate ICD-10-CM diagnosis without having to scan down a list of potentially thousands of terms.
- ◆ Provides a wizard to assist in diagnosis selection.
- ◆ Diagnosis Assistant will be available in Consolidated Problems on the patient summary Mpage, Diagnosis/Problems tab, PowerOrders (for ambulatory setting), and PowerNote.

How it works:

- ◆ An icon is displayed next to diagnoses in the list.
- ◆ The **Unspecified** icon () is displayed next to the diagnosis that has not been specified. The **Specified** icon () is displayed next to the diagnosis that has been specific or was already specific.
- ◆ Diagnosis Assistant can be accessed by clicking on the **Specified** or **Unspecified** icons. Appropriate responses can then be chosen to specify the diagnoses.

Resources

CMS ICD-10

<https://www.cms.gov/Medicare/Coding/ICD10/index.html?redirect=/icd10>

CMS Road to 10: The Small Physician Practice's Route to ICD-10

<http://www.roadto10.org/>

Physicians Practice ICD-10 eBook

<http://dc.cn.ubm-us.com/i/530145-pulse-icd-10-ebook-2016>

The Advisory Board's ICD-10 Preparation Page

[Click here](#)

Tip of the Month

*** Key Documentation Concepts ***

- 1) Conflicting, incomplete, or ambiguous documentation will lead to a query.
- 2) Document the significance of lab and testing results.
- 3) Always specify a diagnosis if known, suspected, probable, and if it's being worked and/or treated.
- 4) Linking signs and symptoms to diagnosis may increase severity of illness and risk of mortality (The terms "probable", "likely", or "suspected" are all acceptable in the inpatient record.
- 5) In the ambulatory setting, documentation regarding patient condition should be to the highest level know, treated, or evaluated.
- 6) Abnormal findings (laboratory, x-ray, pathology, and other diagnostic test results) cannot be coded and reported unless the clinical significance is identified by the treating provider.

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