

**Centers for Medicare & Medicaid Services
CMS ICD-10 Conversion Activities National Provider Teleconference,
Including a Lab Case Study
Moderator: Leah Nguyen
May 18, 2011
1:00 p.m. ET**

Part 1 of 4 Audio Recordings

Welcome and ICD-10 Overview

Operator: Welcome to the CMS ICD-10 Conversion Activities National Provider Teleconference - Including a Lab Case Study. All lines will remain in a listen-only mode until the question and answer session. Today's conference call is being recorded and transcribed. If anyone has any objections, you may disconnect at this time. Thank you for participating in today's call.

I will now turn the call over to Ms. Leah Nguyen. Ms. Nguyen, you may begin.

Introduction

Leah Nguyen: Thank you, Sara. Hello; I am Leah Nguyen from the Provider Communications Group here at CMS. I would like to welcome you to the CMS ICD-10 Conversion Activities National Provider Teleconference. Subject matter experts will discuss the ICD-10 conversion process currently taking place within CMS, including a case study from the CMS Coverage and Analysis Group and their transition to ICD-10 for the Lab National Coverage Determinations. A question and answer session will follow the presentation.

Before we get started, there are a few items that I need to cover. This call is being recorded and transcribed. An audio recording and written transcript will be posted to the CMS Sponsored ICD-10 Teleconferences section of the CMS ICD-10 website in approximately two weeks following this teleconference. The website address is www.cms.gov/icd10.

There is a slide presentation for this session. If you have not already done so, this handout may be downloaded now from the CMS ICD-10 website, located at www.cms.gov/icd10. At the left side of the web page, click on CMS Sponsored ICD-10 Teleconferences. Select the May 18th, 2011, call and scroll down the page to the Downloads section for the slide presentation.

And last, please be aware that continuing education credits may be awarded by the American Academy of Professional Coders or the American Health Information Management Association for participation in CMS National Provider Teleconferences. Please see slides 53, and 54, of the slide presentation for more information. If you have any questions regarding the awarding of credits for this teleconference, please contact that organization. We encourage you to retain your presentation materials and confirmation e-mails.

We have a lot to cover today, so without further delay, we will get started. At this time, I would like to introduce our speakers, who are subject matter experts on ICD-10. We are pleased to have with us: Pat Brooks, Senior Technical Advisor in the Center for Medicare, Hospital and Ambulatory Policy Group; Lisa Eggleston, Health Insurance Specialist in the Office of Clinical Standards and Quality, Coverage and Analysis Group; Joan Proctor, Health Insurance Specialist in the Center for Medicare, Chronic Care Policy Group; Robin Dowell, Nurse Consultant in the Office of Clinical Standards and Quality, Quality Measurement and Health Assessment Group; Sarah Shirey-Losso, Hospital Team Lead in the Center for Medicare, Provider Billing Group; and finally, Denise Buenning, Director in the Office of E-Health Standards and Services, Administrative Simplification Group.

And now it is my pleasure to turn the call over to our first speaker, Pat Brooks, from the Center for Medicare at CMS.

ICD-10 Implementation: Slides 3-19

Pat Brooks: Thank you. I'd like to begin by discussing some basic ICD-10 implementation issues. As you'll see in slide three, October 1st, 2013, is the

compliance date for the implementation of ICD-10-CM, and that's the diagnosis part of ICD-10, as well as ICD-10-PCS, which is the procedure part of ICD-10. On slide four, you will see that ICD-10-CM diagnoses will be used by all providers in every health care setting.

So, if you currently code and use ICD-9-CM diagnoses, you will be impacted by this, and you will begin to report ICD-10-CM diagnosis. ICD-10-PCS, the procedure part, will only be used for hospital claims for inpatient hospital procedures. ICD-10-PCS will not be used on physician claims, even for those physician claims which capture inpatient visits.

On slide five, you will see that the implementation of ICD-10 will have no impact at all on either CPT or HCPCS codes. Both CPT and HCPCS will continue to be used to – for physician and ambulatory services, including physician visits to inpatients.

On slide six, we describe that there is a single implementation date of October 1st 2013, for all users. It's the date of service for the ambulatory and physician reporting, so for ambulatory and physician services provided on or after October 1st, 2013, all of these will begin to use ICD-10-CM diagnosis codes to report and capture those services. The date of discharges will be used on hospital claims for inpatient settings. So, for inpatient discharges that occur on or after October 1st, 2013, you will use ICD-10-CM diagnosis and ICD-10-PCS procedure codes.

On slide seven, we want to stress the fact that ICD-9 codes will not be accepted for services provided on or after October 1st, 2013, and conversely, ICD-10 codes will not be accepted for services provided prior to October 1st, 2013.

On slide eight, we point out that ICD-10 codes are different from ICD-9. ICD-10 codes provide more detail in describing both diagnosis and procedures and there are more ICD-10 codes than we have currently with ICD-9-CM. ICD-10 codes are longer, and they also use alpha characters, so system changes are required before one can accommodate ICD-10 codes.

On slide nine, we show you that we post the complete current versions of both ICD-10-CM diagnoses and ICD-10-PCS, the procedures, on the CMS website, and we give you the link. If you go to that link on the left side of the page, you can click on the 2011 version of either of these coding systems. We also provide you a link to get information about the maintenance and updates of those coding systems, and both ICD-9-CM and ICD-10 are discussed at ICD-9-CM Coordination & Maintenance Committee.

On slide 10, we point out that we've developed tools to help the public in converting codes from ICD-9 to ICD-10 and these are called the General Equivalent Mappings or GEMs. These mappings go forwards for ICD-9 to ICD-10 and they go backwards from ICD-10 back to ICD-9. You can get complete information on those, user guides, and detailed information with code titles at the link that I've given you. We also provided a link to an ICD-10 conversion project, where we are converting the MS-DRGs from ICD-9 to ICD-10 and we've spoken about that in detail at previous calls.

Slide 11 points out that GEMs are not a substitute for learning how to code with ICD-10. You will need to learn how to use this new coding system if you use ICD-9 now. And frankly, for small conversion projects, it is going to be quicker and more accurate to simply pick up an ICD-10 code book anyway, instead of using the GEMs.

An addition issue that I'd like to point out is that we are beginning a period of a partial code freeze. The public has pointed out to us that annual updates to both ICD-9 and ICD-10 have made transition planning very difficult and so many in the public requested a code freeze.

Slide 13 describes the exact nature of that freeze. The last regular annual update to both ICD-9-CM and ICD-10 will be made on October 1st, 2011, so that next update, you'll see the last big update. On October 1st, 2012, we'll have only limited code updates to both ICD-9 and ICD-10, which will capture just new technology and new diseases. On October 1st, 2013, the day we implement ICD-10 for that date of services, there'll be only limited code updates to ICD-10 to capture new technologies and new diseases.

Slide 14 shows that there will be no updates to ICD-9-CM on October 1st, 2013, as it will no longer be the HIPAA standard. And then on October 1st, 2014, we will begin regular updates to ICD-10.

Slide 15, once again, shows you a website where you can get information on the Coordination & Maintenance Committee if you're interested in the upcoming maintenance of these coding systems. And then we provide additional information in the next few slides for CMS resources, including on 16, general information, the MS-DRG Conversion Project. And at the bottom of the slide, if you want to know about the 5010 conversion, you can follow that link.

On slide 17, we provide you links to get the latest information on ICD-10 and resources for providers, links to the ICD-10 teleconferences, such as the one we're having today, and you can also look at prior teleconferences and listen to those, along with the presentation materials. Slide 18 gives you resources that you might find useful if you want to train your own in-house staff. We've provided a lot of educational resources that you are encouraged and free to use.

And my last slide, slide 19, discusses two organizations that provide ICD-10 resources. So, if you're looking for software systems products, then you can look at the WEDI and HIMSS websites to see if perhaps they have listed resources that would be useful to you.

Thank you.

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