

Health Information Management Systems Society

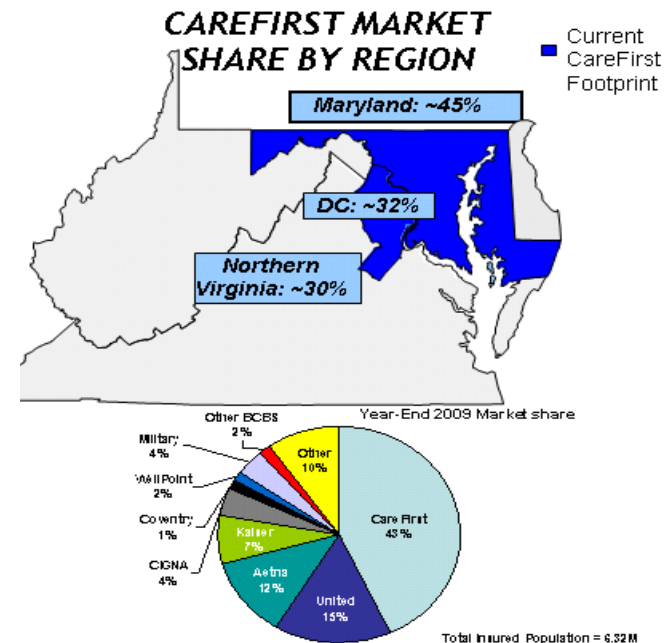
ICD-10 Panel Discussion

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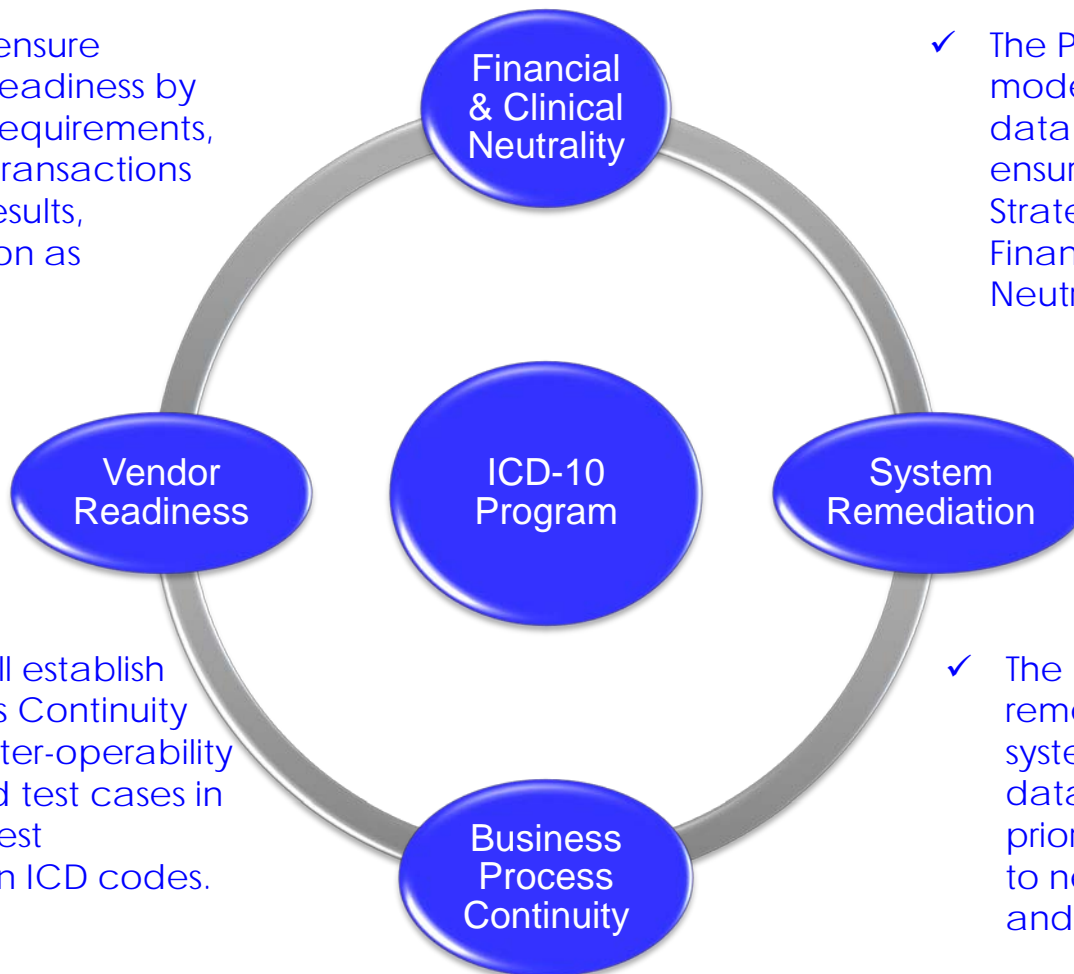
A regional affiliation of Blues plans with presence in Maryland, D.C., Northern Virginia, West Virginia and North Carolina:

- #1 Provider Network
- #1 Market Position
- 3.37 million members (Potential market of 6.3 million customers)
- Nearly 5,000 associates



- The approach is compliance only, with minimum investment and "no harm" to operations
- The overall implication of operational impacts are low and CareFirst is positioned to receive and store the data
- The Data Strategy will address longitudinal analysis and minimize impacts on key processes, e.g. PCMH
- Validate financial and clinical impact by undertaking a short consolidated effort with the CareFirst SSP

- ✓ The Program will ensure business partner readiness by communicating requirements, exchanging test transactions and monitoring results, planning mitigation as needed.



- ✓ The Program will model/map historical ICD9 data to ICD10, in order to ensure its Business Mapping Strategy will deliver Financial and Clinical Neutrality .

- ✓ The Program will establish Business Process Continuity by executing inter-operability and end-to-end test cases in areas with highest dependency on ICD codes.

- ✓ The Program will limit remediation efforts to those systems that utilize ICD data. Efforts will be prioritized based on impact to neutrality, requirements, and magnitude of effort.

QUESTION 1: What are your anticipated barriers for the upcoming 5010 / ICD-10 transition?

The CareFirst ICD-10 Program will span approximately three years in length. During this long duration, the following challenges are anticipated:

- Political
 - ▶ Health Care Reform

- Industry
 - ▶ Provider Readiness
 - ▶ Vendor Readiness

- Social
 - ▶ Resource Contention

- Technology
 - ▶ System Release Planning

- Legal
 - ▶ Platform Governing Bodies

QUESTION 1: What are your anticipated barriers for the upcoming 5010 / ICD-10 transition?

Across the industry, significant challenges during the 5010 transition are anticipated:

- There is no formal industry-wide contingency plan.
- The provider community may not be prepared for the transition.

CareFirst will promote success of education and training of providers and hospital leadership through:

1. Regular communication with providers through the use of webinars and workshops.
2. Coordination with medical associations such as the Maryland Hospital Association, the Health Services Cost Review Commission, and governance panels for NASCO, FEP, ITS.
3. Collaborative end to end testing to ensure business partner readiness.

QUESTION 3: Define the three practices you believe will assure a successful transition to 5010 and ICD-10?

To ensure a successful transition to ICD-10, CareFirst will:

1. Ensure interoperability through fully integrated end to end testing.
2. Establish an internal foundational operation for mapping 9 and 10 codes for a successful implementation.
3. Develop an outreach program to create awareness, provide training, and communicate the importance of readiness to both internal and external constituents.

QUESTION 3: Define the three practices you believe will assure a successful transition to 5010 and ICD-10?

- Work closely with submitters on testing / migration plans
 - ▶ Closely monitor receivables post 5010 implementation.
- Reinforce education, collaboration, coordination, and communication.
- Invoke contingency plans to minimize impacts to operations; do 'no harm.'
 - ▶ ONLY 60 days!

QUESTION 4: How are you providing education and training to staff regarding the impact of the upcoming 5010/ ICD-10?

1. Intranet Site

- ▶ Definition of ICD codes.
- ▶ Explanation of HIPAA mandate.
- ▶ How and why the codes are changing?
- ▶ CareFirst Program Structure and Strategy
- ▶ Recent News about ICD-10 and the CareFirst ICD-10 Program

2. Training

- ▶ Train the Trainer
- ▶ Web Based
- ▶ Classroom Based
- ▶ Hands-On

3. Interdepartmental Awareness Sessions

QUESTION 5: Please provide a brief readiness update for payers and hospitals.

Industry assessments reveal continued progress in payer ICD-10 readiness. As the 5010 initiative winds down, additional expert resources are being committed to the ICD-10 effort.

- A BCBSA ICD-10 implementation survey revealed similar findings for the participating Blues Plans. To elaborate, by the second quarter of 2011, 97 percent of Blues Plans had completed impact assessments and nearly 80 percent had completed an implementation strategy.

Currently there are no major impediments to the ICD-10 transition. However payers have voiced concerns about provider readiness.

According to the WEDI 2011 conference survey by Stanley Nachimson:

- ▶ Some progress is being made, but slippages are beginning to appear.
- ▶ 2012 will be a critical year.
- ▶ Health plans found much larger impact than anticipated because many systems are hard coded.
- ▶ Use of crosswalks as a processing or coding solution is beginning to decline.

QUESTION 6: Describe your personal experience regarding readiness and the impact of the ICD-10 / 5010 changes?

- I have recently decided that spa treatments provide great relief. Facials and full body massages are my escape.
- Caribbean cruises will be a regular occurrence throughout the life of the ICD-10 program. Thank goodness for NTD – Unplanned Purchases!
- I will undergo retail therapy as a preventative stress measure.

Questions?