

ArcBITS Newsletter

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ArcSys Hot Tip

Do you lose your connection to the server after a period of inactivity? This is usually a result your pc going into hibernate mode. When it does this, the disk drive is stopped, the computer goes to sleep, and the network connection is closed. To remedy, go into the Control Panel, look for Power Options, look for Put Computer to Sleep, and set the option to Never.

ICD-10 Readiness

Just like you are dreading your next birthday, you can equally dread the October 1, 2014 ICD-10 deadline. Time is getting short.

Step 1: If you haven't made arrangements to transition to Red Planet, then you best get signed up. Waiting until September may not be the best option if everyone else is thinking the same. Plan on 2 months to be up and running.

Step 2: Check with your claims processing clearing house to see if they have a test plan in place to accept electronic claims with ICD-10 codes.

Step 3: Run the Red Planet Diagnosis Utilization report for each provider. This shows the doctor the most frequently used ICD-9 code and how it maps to the ICD-10. This way the provider can see the terminology that is employed.

ICD-10 and Labcorp

ArcSys is currently going through the ICD-10 certification process with Labcorp. One of the tests that was required by their process was to submit an order with 120 ICD-10 diagnosis codes.

Accordingly, we prepared the requisite file, submitted it to their test engine, and then received notification that four of the diagnosis codes were invalid. Needless to say, this caused

Step 4: Look at existing in-house reports that focus on ICD-9 and decide if they are to be continued.

Step 5: If you utilize charge slips with diagnosis codes, decide which codes should be retained.

Step 6: If you utilize pull down lists for diagnoses in the EMR system, decide which codes should be retained by looking at the utilization report mentioned in step 3.

Step 7: Pick a date when all the providers will switch to use ICD-10.

Step 8: All claims (paper and electronic) will continue to be submitted with the ICD-9 code mapped from the ICD-10.

Step 9: When an insurance company gives the green light that they are ready to accept ICD-10, a switch in the Insurance Master screen will be set.

some concern on our part as well as the Labcorp testing people. Who was right, we wondered? The table we had used to build our data files had changed and we were submitting expired ICD-10 codes.

Lesson learned: ICD-10 is as fluid as ICD-9 was and doing table updates will be a must in the future. It makes one wonder, however, about the future insurance claim edit checks that everyone will encounter.





ICD-10 Diagnosis Utilization

This is an example of the diagnosis utilization report that shows by frequency of use the ICD-9 codes and how they map to ICD-10.

DX...	DESCRIPTION.....	FIRST...	LAST....	FREQ.	MAP.....	
715.96	OSTEOARTHRISIS UNSPECIFIED WHETHER GENERALIZED OR LOCALIZED INVOLVING LOWER LEG	01/02/13	01/20/14	4570	M17.9	osteoarthritis of knee, unspecified
719.46	PAIN IN JOINT INVOLVING LOWER LEG	01/02/13	01/24/14	3672	M25.569 M25.561 M25.562	pain in unspecified knee pain in right knee pain in left knee
715.16	OSTEOARTHRISIS LOCALIZED PRIMARY INVOLVING LOWER LEG	01/02/13	01/24/14	2736	M17.10 M17.0 M17.11 M17.12	unilateral primary osteoarthritis, unspecified knee bilateral primary osteoarthritis of knee unilateral primary osteoarthritis, right knee unilateral primary osteoarthritis, left knee

The ICD-9 data is on the left side of the report. The ICD-10 code and description are on the right. The First and Last column show when the ICD-9 code was used within the reporting period. The Freq column shows the number of occurrences. The entry at the top is the most frequent used.

One of the things to note is that there was no specification of "right" or left" in the ICD-9 world. You will notice that 719.46 maps to M25.569. Additionally, Red Planet advises that the more likely proper code would be M25.561 (the one means right) or M25.562 (yes, the two means left).

ICD-10 Documentation Autocoding

One feature that is available to assist in documentation is a software tool created within Red Planet that allows a visit note to be read by the computer and then a list of recommended ICD-10 codes is presented. The list is based on a frequency of word usage and is compared with the information that is gleaned from the utilization report as shown above. Shown here is the body of a note along with the proposed ICD-10 codes.

Jolynn is here for follow up of the left knee. The synovial fluid analysis does not show any significant abnormality, and of note no crystal are seen. The patient still has a persistent effusion. I've re-reviewed her arthroscopic photographs of the left knee. They show the meniscal tearing. The joint surface is relatively intact. I am surprised that she has this persistent swelling. The patient has an allergy to all non-steroidal antiinflammatories. I've suggested aspiration again and now treatment with Synvisc to see if that will be of benefit and also adding a Prednisone taper.

The left knee is prepared and draped in standard sterile fashion. 1% Lidocaine at the skin. We aspirated 45 cc of clear yellow synovial fluid, no blood staining at all. It was well tolerated by the patient. We then injected Synvisc and a small quantity of Lidocaine, all well tolerated by the patient. We will give her a Prednisone taper and see her back in three weeks.

S83.222D	10.21	peripheral tear of medial meniscus, current injury, left knee, subsequent encounter
S83.242D	9.73	other tear of medial meniscus, current injury, left knee, subsequent encounter
M17.12	9.67	unilateral primary osteoarthritis, left knee
S83.262D	8.71	peripheral tear of lateral meniscus, current injury, left knee, subsequent encounter

The numbers in the left column are the ICD-10. The numbers in the second column are an internal "ranking" generated by Red Planet. The "D" codes identified in the first column are subsequent encounters.