

ICD-10

One CIO's Perspective

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Approach to Discussion

- My thoughts for my organization
- Not claiming real expertise
- Plans and questions will be presented
- Informal Discussion

Outline

- What is Harvard University Health Services?
- Expected Areas of Efforts and Questions

ICD-10 Expectations

- **January 1, 2012**

On January 1, 2012, standards for electronic health care transactions change from Version 4010/4010A1 to Version 5010.

- **October 1, 2013**

“ICD-10 codes must be used on all HIPAA transactions, including outpatient claims with dates of service, and inpatient claims with dates of discharge on and after October 1, 2013. Otherwise, your claims and other transactions may be rejected, and you will need to resubmit them with the ICD-10 codes. This could result in delays and may impact your reimbursements, so it is important to start now to prepare for the changeover to ICD-10 codes.”

Harvard University Health Services

- Over 100 years old
- Mostly for employees, students, and retirees
- Mostly a staff model HMO
- Main site in Harvard Square and three satellites
- About 200,000 visits per year
- Licensed as a clinic
- 10 bed infirmary
- Various Services

HUHS Services Offered

- Primary care
- Pediatrics
- Dental Clinic
- Mental Health
- 24 * 7 After Hours Urgent Care
- Extensive outreach programs
- Radiology
- Pharmacy
- Care Coordination
- Various medical and surgical specialties

HUHS Specialties

- Acupuncture
- Allergy
- Dermatology
- Diabetologist
- Endocrinology
- Gastroenterology
- Neurology
- Nutrition
- Rheumatology

Specialties

- Obstetrics and Gynecology
- Ophthalmology and Optometry
- Orthopedics
- Otolaryngology and Audiology
- Physical Therapy
- Podiatry
- Travel Clinic
- Urology

Services lacking

- Only students can stay overnight
- No general anesthesia
- Relationship with outside practices for certain specialty care

IS at HUHS

- Purchased “EMR” in 1987
- After company folded, continued further development
- Deal with developers (Point and Click Solutions). We no longer own software. Now in use in 140 universities around country. (College health focused).
- Billing function supported by Athena Health

HUHS data flow

1. Clinicians document (with codes) in Point and Click Solutions
2. Reviewed by billers and coders
3. Validated by Athena Health system
4. Transmitted by Athena Health to wherever it needs to go.

ECHART, MARY

DOB: 1/1/1860

Pt #: N614 964 8

[COMMON](#) [OTHER](#) [BREAST](#) [CARDIOVASCULAR](#) [ENDOCRINE](#) [ENT](#) [GI](#) [GYN](#) [HEM/ONC](#) [IMMUNIZATIONS](#) [INFECTIOUS DISEASE](#) [MH](#) [MUSCULOSKELETAL](#)
[NEUROLOGY](#) [OPHTHALMOLOGY](#) [RESPIRATORY](#) [SKIN](#) [UROLOGY](#) [BSHS](#) [RECENT](#) [Find...](#)

COMMON Diagnoses:

- | | | |
|-------------------------------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> ABNORMAL CERVICAL PAP | <input type="checkbox"/> GASTROENTERITIS | <input type="checkbox"/> RHINITIS,ALLERGIC |
| <input type="checkbox"/> ALCOHOL ABUSE (NONDEPENDENT) | <input type="checkbox"/> HYPERCHOLESTEROLEMIA | <input type="checkbox"/> RHINITIS,CHRONIC |
| <input type="checkbox"/> ANTICOAGULATION DUE TO COUMADIN/WARFARIN | <input type="checkbox"/> HYPERLIPIDEMIA | <input type="checkbox"/> SCREENING FOR SEXUALLY TRANSMITTED DISEASE |
| <input type="checkbox"/> ANTICOAGULATION INTRINSIC (NOT COUMADIN) | <input type="checkbox"/> HYPERTENSION | <input type="checkbox"/> SINUSITIS |
| <input type="checkbox"/> ATRIAL FIBRILLATION | <input type="checkbox"/> HYPERTHYROIDISM | <input type="checkbox"/> SMOKER |
| <input type="checkbox"/> CERUMENOSIS | <input type="checkbox"/> HYPOTHYROIDISM | <input type="checkbox"/> SMOKING CESSATION |
| <input type="checkbox"/> CHEST PAIN | <input type="checkbox"/> IMPOTENCE | <input type="checkbox"/> SORE THROAT |
| <input type="checkbox"/> CONGESTIVE HEART FAILURE | <input type="checkbox"/> Influenza like illness (ILI) | <input type="checkbox"/> SPORTS CLEARANCE |
| <input type="checkbox"/> CONSTIPATION | <input type="checkbox"/> IRRITABLE BOWEL SYNDROME | <input type="checkbox"/> THROMBOPHLEBITIS |
| <input type="checkbox"/> CORONARY ARTERY DISEASE | <input type="checkbox"/> MENOPAUSE, SYMPTOMATIC | <input type="checkbox"/> UPPER RESPIRATORY INFECTION |
| <input type="checkbox"/> COUGH | <input checked="" type="checkbox"/> OBESITY | <input type="checkbox"/> URINARY TRACT INFECTION |
| <input type="checkbox"/> DIABETES MELLITUS, TYPE I | <input type="checkbox"/> OTITIS MEDIA | <input type="checkbox"/> VAGINITIS |
| <input type="checkbox"/> DIABETES MELLITUS, TYPE I UNCONTROLLED | <input type="checkbox"/> PALPITATIONS | <input type="checkbox"/> VIRAL ILLNESS,ACUTE |
| <input checked="" type="checkbox"/> DIABETES MELLITUS, TYPE II | <input type="checkbox"/> PERIPHERAL VASCULAR INSUFFICIENCY | |
| <input type="checkbox"/> DIABETES MELLITUS, TYPE II UNCONTROLLED | <input type="checkbox"/> PHARYNGITIS | |
| <input type="checkbox"/> DYSMENORRHEA | <input type="checkbox"/> PHARYNGITIS,STREPTOCOCCAL | |
| <input type="checkbox"/> DYSURIA | <input type="checkbox"/> PHYSICAL EXAM, ROUTINE ADULT | |
| <input type="checkbox"/> ESOPHAGEAL REFLUX | <input type="checkbox"/> POST SURGICAL PAIN | |
| <input type="checkbox"/> GASTRITIS | <input type="checkbox"/> PROSTATIC HYPERTROPHY | |

Additional Diagnoses: [Find...](#)Selected Diagnoses: [Sort...](#)1. DIABETES MELLITUS, TYPE II [Promote to Problem List](#)

OK

Cancel

Clinician Documentation

OpenChart v10.2 - Select Diagnosis

Name:

diabet

Search

ICD	Diagnosis
648.00	DIABETES IN PREGNANCY
253.5	DIABETES INSIPIDUS
250.00	DIABETES MELLITUS
790.29	DIABETES MELLITUS, BORDERLINE
250.01	DIABETES MELLITUS, TYPE I
250.03	DIABETES MELLITUS, TYPE I UNCONTROLLED
250.00	DIABETES MELLITUS, TYPE II
250.02	DIABETES MELLITUS, TYPE II UNCONTROLLED
250.03	DIABETES UNCOMPLICATED TYPE I UNCONTROLLED
250.02	DIABETES UNCOMPLICATED TYPE II UNCONTROLLED
250.01	DIABETES UNCOMPLICATED TYPE I UNCONTROLLED

Use the asterisk (*) as a wildcard character
(e.g. *finger matches items that contain the term finger).

OK

Cancel

Diagnosis Name	ICD	Picklist
DIABETES MELLITUS, TYPE I	250.01	Yes
DIABETES MELLITUS, TYPE I UNCONTROLLED	250.03	Yes
DIABETES MELLITUS, TYPE II	250.00	Yes
DIABETES MELLITUS, TYPE II UNCONTROLLED	250.02	Yes
DIABETES UNCOM		Yes
DIABETES UNCOM		Yes
DIABETES W/ COF		Yes
DIABETES W/ COF		Yes
DIABETES W/ KID		Yes
DIABETES W/ KID		Yes
DIABETES W/ OPF		Yes
DIABETES W/ OPF		Yes
DIABETES W/ OPF		Yes
DIABETES W/ RET		Yes
DIABETES W/ RET		Yes
DIABETES W/HYPI		
DIABETES W/KETC		
DIABETES W/OPT		
DIABETES W/OTH		
DIABETES W/OTH		
DIABETES W/REN		
DIABETES W/REN		
DIABETES W/REN		
DIABETES W/REN		
DIABETES W/UNS		
DIABETES W/UNS		
DIABETES WITH F		
DIABETES WITH C		
DIABETES WITH F		
DIABETES, CHEMI		

OpenChartAdmin v9.2 - Edit Diagnosis ✕

****Name**

DIABETES MELLITUS, TYPE II

****ICD** ICD Warning

250.00

ICD Description

DIAB W/O COMP TYPE II;UNS NOT STATED UNCNTRL

Promote to Problem List

Do not automatically promote to problem list

Promote as a coded problem

Problem

Diabetes Type 2 🔍

Promote as free text problem

Free text problem

What makes HUHS different?

- 100% of our providers document in the Point and Click EMR
- Providers do the initial coding with downstream follow on support
- Mostly a capitated system
- Ambulatory care
- Athena Health will ensure claims are compliant and working

Known Required Actions

- Editing of our Dx dictionary to include ICD-10
- Ability of pick lists to switch over to ICD-10
- Update feed from EMR to Billing system
- Training for billers and coders
- Educating clinicians

Updating Dx Dictionary

- Are we going to populate all of the ICD-10 codes automatically?
- How effective will the GEM mapping be?
- If we eventually will need to migrate to SNOWMED, should we consider migrating now and map to ICD-10 for billing? Are there commercial terminology dictionaries worth considering (Point and Click question)?

Pick List Updates

- How much work will it be to modify the pick lists?
- How big will our pick lists get, and at some point, will they be unworkable?
- Will we get a new way for providers to look up codes?
- Will the system be able to prompt clinicians for greater specificity as needed?

System Intelligence

- Will the system be able to discourage clinicians from using overlapping diagnoses?
- Will the system prompt clinicians to use combination diagnoses?

Current Questions

- How much lead time do we need to be ready?
- Will accuracy increase or decrease under the new system?
- Will we fall behind in some of our billing?
- How compliant is good enough?

Conclusion

- A great deal needs to be done for ICD-10 compliance.
- HUHS vendors Point and Click Solutions and Athena Health are key to HUHS strategy.
- We will attempt to minimize disruption for providers, but it will be a significant change.
- Our coders and billers have a huge undertaking in front of them.
- Training will be critical.