Managing change, from 5010 to ICD-10 and beyond

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“Change Management” might not be the first thing that comes to mind when you think of Availity; however, it’s part of our commitment to help our customers maintain healthy businesses. And that means we have a role in helping you navigate changes in the health care system that can affect your business’ performance.

ICD-10 is one of those changes, and the Oct. 1, 2014 mandate deadline is approaching more quickly than it may seem. We know you have your hands full with the coding, documentation and process changes that come with ICD-10. That’s why we’re doing our part to help you be as prepared as possible for processing claims without disruption. We’ll achieve that goal through training, testing and education, and also by leveraging lessons learned during 5010.

Sometimes experience is the best teacher. Here are a few lessons we learned from our 5010 conversion that can help ensure a smooth and coordinated ICD-10 conversion:

**Communication is key**
During 5010, we saw that where there was confusion, there was a lack of communication. Early and regular communication with your staff, vendors and health plans is essential to developing a strategic plan for implementation.

If you’re not already talking with your system vendors about testing, we recommend you do so now. Find out if and when software updates will be available for your practice management system and when your health plans will be ready to test ICD-10 transactions with you. Then, check back at regular intervals to keep your implementation plan current.

**Know your resources**
Clearinghouses were many providers’ first-line support during 5010 – identifying issues behind claim rejections and providing guidance on correcting claims – but clearinghouses won’t be able to provide that same level of guidance through ICD-10. While they can help, they can’t tell you which ICD-10 codes to use based on your clinical documentation.

In addition to working closely with your health plans and vendors, you may want to familiarize yourself with ICD-10 information available through the U.S. Centers for Medicare and Medicaid Services, professional associations and industry workgroups, such as the Workgroup for Electronic Data Interchange. And don’t forget free training options for you and your staff, such as the ICD-10 Webinar Series available through the Availity Learning Center.

**Remember the cause**
As you work through the many aspects of preparing for ICD-10, you might find yourself asking, “What’s the point?” It’s important to remember that there are substantial business improvement opportunities...
available to health care providers as a result of ICD-10, including more accurate claims and fewer denials/underpayments as the billing and reimbursement process becomes more efficient.

**Bringing it all together**
Adapting to change can be challenging, particularly when you are already facing accelerated regulatory requirements and financial burdens that detract from patient care. But whether its 5010, ICD-10, new Operating Rules or otherwise, the health care industry is taking important steps to advance the quality, efficiency and transparency of health care, and these changes benefit all health care stakeholders.

And as always, Availity is here as your trusted partner to help you succeed.