Please no cameras or recorders during the class presentation. You will be asked to leave the room if request is not followed.
✓ Make sure to check in and out for each course - you must do this even if you are staying in the same room for multiple courses.

✓ Hand in your course ticket as you leave the class in order to receive credit. The ticket is the ONLY way to receive credit for this course.

✓ If you must leave the class for any amount of time keep in mind if you are out of the room for more than 10 minutes, you will not receive any CE credit.

✓ Please remember to complete the evaluation forms on the back of your course tickets.
✓ A special thank you goes to our industry partners: **Vision West, VSP Global, Allergan, Alcon, EyeMed Vision Care, Genzyme, Practice Concepts, Premier Merchant Services, Macular Health, Mercer, Vistakon, Wells Fargo Practice Finance, and X-Cel Contacts - a Walman Company** for their support of this conference.

✓ If you have a cell phone or pager, please turn it off. If you must take a call, do so outside the room.
This course material and information was developed independently of any assistance.

I have the following financial relationships to disclose:

- Zeiss Meditec – Consulting Fee/Consultant
- PEN Advisory Board – Stipend/Board Work
ICD10: The Future is Now
Aaron Lech, OD, FAAO
Room: Valencia V-VI

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Bridging the gap to somewhere

The Future is Now??

Dr. Aaron Lech, OD, FAAO
email: drlech@clearvue.org
At least we can understand why this is happening and some strong arguments for its inevitability.
Why?
60+ Years

- 1968 ICD-8
- 1977 ICD-9
- 1990 WHO ICD-10
- 1999 ICD-10
- 201X ICD-10 US?
Why

- Outdated: structure is at capacity
- Standardization
- New ICD-10 Procedure codes coming
Quality Problems

- Patient fractures wrist
  - Left wrist
    - A month later Right wrist
    - ICD-9 does not differentiate Right vs. Left
      - additional documentation - procedure code may
  - ICD-10 describes
    - Left vs. Right
    - Initial and subsequent encounter
      - Routine healing, delayed healing, malunion, etc.
It’s NOT optional…

Except for the US and Italy
HIT Impact
HIT

- Reporting:
  - Efficacy of therapy
  - Accurate service representation
  - Flexibility
  - Quality measures
  - Impact on future reimbursement
  - Qualified EHR
Current Status

- Delayed until October 1, 2015
- Original deadline was 2003 with HIPAA
What can we learn?

- UK - 1995
- Nordic Countries - 1994-97
- France - 1997
- Germany - 2000
- Canada - 2001
What can we learn?

❖ Coders: take more time to learn than you think.
❖ Doctors get involved early
❖ If you use coders chart specifics!
❖ You will be less productive so AUTOMATE and DELEGATE
❖ survey: 12 weeks to learn / 6 months to get comfortable
What is ICD-10

- Created by consulting physicians, coders and other ICD-9 users (insert payers here)
- Can track morbidity
- ~17,000 vs. 140,000 codes
ICD-9 vs. ICD-10

- 3-5 characters
- character 1 alpha or numeric
- characters 2-5 numeric
- decimal after 3rd character

- up to 7 characters
- character 1 alpha
- character 2 numeric
- characters 3-7 alpha or numeric
- alpha not case sensitive
- dummy “x”
ICD-9 vs. ICD-10

- 3-5 characters
- character 1 alpha or numeric
- characters 2-5 numeric
- decimal after 3rd character
- up to 7 characters
- character 1 alpha
- character 2 numeric
- characters 3-7 alpha or numeric
- alpha not case sensitive
- dummy “x”
ICD-9

Numeric or Alpha (E or V)  Numeric

category

category, anatomic site, severity
ICD-10
M1A.3120

Etiology (Renal Impairment)
Laterality (Left Shoulder)

Category (Chronic Gout)
Location (Shoulder)
Extension (Without tophus)
ICD-10

- Category = 1-3
- Subcategory = 4 and 5
- 6 laterality
The 7th Character’s Uses

- **“A”** Initial encounter – receiving active treatment
- **“D”** Subsequent encounter-use after Pt received active treatment
- **“S”** Sequelae-used for complications/conditions arise as result of injury
  - S only added to injury code, not sequela code
  - Sequela code first, followed by injury code
- **Superficial injury of abdomen:** S30.810A
Mapping

One-to-One Mapping

ICD-9-CM
733.6
(Tietze’s Syndrome)

ICD-10-CM
M94.0
(Tietze’s Syndrome)
More Mapping

One-to-Three Mapping

ICD-9-CM

649.51
{spotting complications during pregnancy}

ICD-10-CM

O26.851
{spotting complications during pregnancy, first trimester}

O26.852
{spotting complications during pregnancy, second trimester}

O26.853
{spotting complications during pregnancy, third trimester}
Even More Mapping

One-to-Sixteen Mapping

ICD-9-CM

962.9
(poisoning by hormones and synthetic substitutes)

ICD-10-CM

T38.801A  T38.901A
T38.802A  T38.902A
T38.803A  T38.903A
T38.804A  T38.904A
T38.891A  T38.991A
T38.892A  T38.992A
T38.893A  T38.993A
T38.894A  T38.994A
One-to-2,530 Mapping

ICD-9-CM

733.82
(other disorders of bone and cartilage, non-union of fracture)

ICD-10-CM
Format & Structure

- Alphabetic Index
- Tabular List
- Index of injuries
- Table of Drugs & Chemicals
- Understand new Abbreviations
- Placeholders
- Code Extensions
Tabular List: Relevant Chapters

- Chapter 7: Diseases of Eye & Adnexa (H00-H59)
- Chapter 18: Signs & Symptoms (R00-R99)
- Chapter 19: Injury, Poisonings, etc. (S00-T88)
- Chapter 4: Endocrine (E00-E90)
General Eyes

- H00-H05 Eyelid, lacrimal, orbit
- H10-11 Conjunctiva
- H15-H22 Sclera, cornea, iris, ciliary body
- H25-H28 Lens
- H30-H36 Choroid / retina
- H40-H42 Glaucoma
- H43-H44 Vitreous & globe
- H46-H47 Optic nerve & pathways
- H49-H52 Ocular muscles, accommodation, refraction
- H53-H54 Disorders of refraction, Visual disturbances, blindness
- H55-H57 Other disorders eye & adnexa
- H59 Intra-operative & post-procedural complications
Refractive

- Hypermetropia
  - H52.00 / -.01 (R) / -.02 (L) / -.03 (B)
- Myopia
  - H52.10 / -.11 (R) / -.12 (L) / -.13 (B)
- Astigmatism
  - Unspecified H52.201 (R) / -.202 (L) / -.203 (B) / -.209 unsp
  - Irregular H52.211 (R) / -.212 (L) / -.213 (B) / -.219 unsp
  - Regular H52.221 (R) / -.222 (L) / -.223 (B) / -.229 unsp
- Presbyopia
  - H52.4
- Hypermetropia
  - H52.00 / -.01 (R) / -.02 (L) / -.03 (B)

- Myopia
  - H52.10 / -.11 (R) / -.12 (L) / -.13 (B)

- Astigmatism
  - Unspecified H52.201 (R) / -.202 (L) / -.203 (B) / -.209 unsp
  - Irregular H52.211 (R) / -.212 (L) / -.213 (B) / -.219 unsp
  - Regular H52.221 (R) / -.222 (L) / -.223 (B) / -.229 unsp

- Presbyopia
  - H52.4
ICD-10

- Category = 1-3
- Subcategory = 4 and 5
- 6 laterality
Glaucoma Example

- Glaucoma staging
- 7th character for severity
  - 1 = mild stage
  - 2 = moderate stage
  - 3 = severe stage
  - 4 = indeterminate
  - 0 = unspecified
- Ex: low tension glaucoma
  - Glaucoma / low tension glaucoma / moderate R, severe L
  - H40.- / H40.12 / H40.1212 / H40.1223
The ICD-10 code online translator tool allows you to compare ICD-9 to ICD-10 codes. ICD-9 is being expanded from 17,000 to approximately 141,000 ICD-10 codes, and this online tool can help you map that expansion. (Note: this tool only converts ICD-10-CM codes, not ICD-10-PCS.)

Note: For a better explanation of the code format, please refer to our ICD-10 conversion and mapping tutorial. For help with mapping, consider our ICD-10 mapping services.

Option: ICD-9 to ICD-10
Option: ICD-10 to ICD-9

Enter Code: 375.15

Disclaimer: This tool is based on the General Equivalency Mapping (GEM) files published by CMS, and is not intended to be used as an ICD10 conversion, ICD-10 mapping, or an ICD-9 to ICD-10 crosswalk tool. Keep in mind that while many codes in ICD-9-CM map directly to codes in ICD-10, in some cases, a clinical analysis may be required to determine which code or codes should be selected for your mapping. Always review mapping results before applying them.

Add this ICD-10 code conversion widget to your site.

http://www.aapc.com/icd-10/codes/

Transition & Resources
**ICD-9 to ICD-10**

Enter Code: 375.15  

**ICD-9 375.15 > ICD-10**

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>HØ4.129</td>
<td>Dry eye syndrome of unspecified lacrimal gland</td>
</tr>
</tbody>
</table>

**Disclaimer:** This tool is based on the General Equivalency Mapping (GEM) files published by CMS, and is not intended to be used as an ICD10 conversion, ICD-10 mapping, or ICD-9 to ICD-10 crosswalk tool. Keep in mind that while many codes in ICD-9-CM map directly to codes in ICD-10, in some cases, a clinical analysis may be required to determine which code or codes should be selected for your mapping. Always review mapping results before applying them.
Items to Plan/Budget for

- Practice management system change / upgrade
- EHR implementation / upgrade
- All paper documents upgraded
- Consultation / training fees
- Staffing changes / upgrades (certifications?)
- Extra hours for staff training (including clinicians)
- Extra hours for implementation issues
$9,300 per doctor
ICD-10 Will Change Everything
Will You Be Ready?

Clinical Area
- **Patient Coverage:**
  Health plan policies, payment limitations, and new ABN forms are likely.
- **Superbills:**
  Revisions required and paper superbills may be impossible.
- **ABNs:**
  Health plans will revise all policies linked to LCDs or NCDs, etc., ABN forms must be reformatted and patients will require education.

Managers
- **New Policies and Procedures:**
  Any policy or procedure associated with a diagnosis code, disease management, tracking, or PQRI must be revised.
- **Vendor and Payer Contracts:**
  All contracts must be evaluated and updated.
- **Budgets:**
  Changes to software, training, new contracts, new paperwork will have to be paid for.
- **Training Plan:**
  Everyone in the practice will need training on the changes.

Physicians
- **Documentation:**
  The need for specificity dramatically increases by requiring laterality, stages of healing, weeks in pregnancy, episodes of care, and much more.
- **Code Training:**
  Codes increase from 17,000 to 140,000. Physicians must be trained.

Nurses
- **Forms:**
  Every order must be revised or recreated.
- **Documentation:**
  Must use increased specificity.
- **Prior Authorizations:**
  Policies may change, requiring training and updates.

Lab
- **Documentation:**
  Must use increased specificity.
- **Reporting:**
  Health plans will have new requirements for the ordering and reporting of services.

Billing
- **Policies and Procedures:**
  All payer reimbursement policies may be revised.
- **Training:**
  Billing department must be trained on new policies and procedures and the ICD-10-CM code set.

Coding
- **Code Set:**
  Codes will increase from 17,000 to 140,000. As a result, code books and styles will completely change.
- **Clinical Knowledge:**
  More detailed knowledge of anatomy and medical terminology will be required with increased specificity and more codes.
- **Concurrent Use:**
  Coders may need to use ICD-9-CM and ICD-10-CM concurrently for a period of time until all claims are resolved.

Front Desk
- **HIPAA:**
  Privacy policies must be revised and patients will need to sign the new forms.
- **Systems:**
  Updates to systems are likely required and may impact patient encounters.

ICD-10: Whether you just want the basics or need complete implementation training, AAPC has a solution to fit your needs.

www.aapc.com/icd-10
<table>
<thead>
<tr>
<th>Rank</th>
<th>ICD-9</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>36721</td>
<td>Regular Astigmatism</td>
</tr>
<tr>
<td>2</td>
<td>3671</td>
<td>Myopia</td>
</tr>
<tr>
<td>3</td>
<td>3674</td>
<td>Presbyopia</td>
</tr>
<tr>
<td>4</td>
<td>3670</td>
<td>Hypermetropia</td>
</tr>
<tr>
<td>5</td>
<td>36616</td>
<td>Senile nuclear sclerosis</td>
</tr>
<tr>
<td>6</td>
<td>36504</td>
<td>Ocular hypertension</td>
</tr>
<tr>
<td>7</td>
<td>36615</td>
<td>Cortical senile cataract</td>
</tr>
<tr>
<td>8</td>
<td>36511</td>
<td>Primary open angle glaucoma</td>
</tr>
<tr>
<td>9</td>
<td>37300</td>
<td>Blepharitis unspecified</td>
</tr>
<tr>
<td>10</td>
<td>2245</td>
<td>Benign neoplasm of retina</td>
</tr>
<tr>
<td>11</td>
<td>37200</td>
<td>Acute conjunctivitis unspecified</td>
</tr>
<tr>
<td>12</td>
<td>37272</td>
<td>Conjunctival hemorrhage</td>
</tr>
<tr>
<td>13</td>
<td>37311</td>
<td>Hordeolum externum</td>
</tr>
<tr>
<td>14</td>
<td>25000</td>
<td>Diabetes mellitus without complication type II</td>
</tr>
<tr>
<td>15</td>
<td>36614</td>
<td>Posterior subcapsular polar senile cataract</td>
</tr>
<tr>
<td>16</td>
<td>37515</td>
<td>Tear film insufficiency unspecified</td>
</tr>
<tr>
<td>17</td>
<td>36250</td>
<td>Macular degeneration (senile) of retina</td>
</tr>
<tr>
<td>18</td>
<td>36257</td>
<td>Drusen (degenerative) of retina</td>
</tr>
<tr>
<td>19</td>
<td>36500</td>
<td>Preglaucoma unspecified</td>
</tr>
<tr>
<td>20</td>
<td>36502</td>
<td>Anatomical narrow angle borderline</td>
</tr>
<tr>
<td>21</td>
<td>36510</td>
<td>Open-angle glaucoma unspecified</td>
</tr>
<tr>
<td>22</td>
<td>37210</td>
<td>Chronic conjunctivitis unspecified</td>
</tr>
</tbody>
</table>
“Nothing is so painful to the human mind as a great and sudden change.”

–Mary Shelley