Editorial

The Transition to the International Classification of Diseases-10 for Physician Services

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The International Classification of Diseases (ICD), which dates from the 1800s, is an internationally agreed-upon system of diagnoses and procedures that is periodically updated to incorporate changes in medical practice. In the United States, we currently use the ICD, Ninth Revision (ICD-9), that was adopted in the 1970s. However, the rest of the world has transitioned to the latest version, ICD-10, and US providers and institutions have been mandated by the government to adopt ICD-10 by October 1, 2014.

The tenth revision was developed to accommodate our increased understanding of diseases and new procedures and to improve disease tracking and trending. As shown in the Table, the number of diagnostic and procedure codes has been expanded greatly. The ICD-9 system uses a 5-digit code (xxx.xx), while the ICD-10 system uses a 7-digit code (xxx.xxxx). The ICD-10 diagnosis-code system has greater specificity than the ICD-9 and includes acuity, causal agents, laterality, and specific disease or disorder sites. US physicians use Current Procedural Terminology (CPT) codes to describe procedures. With ICD-10, US physicians will continue to report visits and inpatient procedures with CPT codes, but they will report diagnoses and outpatient procedures with ICD-10.

The Ochsner Health System has committed significant resources to assist in our transition to ICD-10. For physician services, our electronic medical records program (Epic) has a diagnostic calculator compatible with ICD-10 to assist physicians in selecting appropriate diagnoses. Physicians received training on the diagnosis calculator, as well as

specialty-specific ICD-10 training. Educational activities such as Lunch and Learn sessions and Ochsner Learning Network web-based educational assignments were also developed to help our clinicians. In April 2014, we began dual coding ICD-9 and ICD-10 and initiated payer testing for reimbursement.

For physician services, ICD-10 will be implemented in both the inpatient and outpatient settings. Outpatient coding will be accomplished using Epic in a manner similar to our current selection of a diagnosis for the visit. If a more specific code is required, the provider will receive Epic prompts to select an appropriate choice. Codes for inpatient physician services will continue to be initiated by our professional coders who have trained on the new systems. During and after the dual coding phase (March 31 to September 30, 2014), physicians will have access to diagnosis SmartPhrases to aid in ICD-10 documentation. Physicians also will receive queries in their Epic In Basket if additional documentation for hospital inpatient charts is required. Ochsner's Clinical Documentation Improvement team will generate these queries in the same manner in which they currently generate hospital inpatient documentation queries. Hospital inpatient coders will be responsible for assigning ICD-10 codes for hospital claims.

With the preparation and resources planned, we are confident that Ochsner will successfully transition to ICD-10, just as we have succeeded in our previous challenges. If you have questions or suggestions, please contact Dr David Beck or other members of the ICD-10 team.

Table. Comparison of ICD-9 and ICD-10

Type of Code	Number of Codes in ICD-9	Number of Codes in ICD-10
Diagnosis	14,000	68,000
Procedure	4,000	87,000

ICD, International Classification of Diseases.