



ICD-10

Official CMS Industry Resources for the ICD-10 Transition
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Small Hospitals ICD-10 Transition Checklist

The following is a checklist of ICD-10 tasks, including estimated timeframes for each task. Depending on your organization, many of these tasks can be performed on a compressed timeline or performed at the same time as other tasks.

This checklist is designed to provide a viable path forward for organizations just beginning to prepare for ICD-10. CMS encourages those who are ahead of this schedule to continue their progress forward.



Planning, Communication, and Assessment Actions to Take Immediately

To prepare for testing, make sure you have completed the following activities. If you have already completed these tasks, review the information to make sure you did not overlook an important step.

- Review ICD-10 resources** from CMS, trade associations, payers, and vendors
- Inform your staff/colleagues** of upcoming changes (1 month)
- Create an **ICD-10 project team** (1 month)
- Identify **how ICD-10 will affect your organization** (3 months)
 - How will ICD-10 affect your people and processes? To find out, ask all staff members how/where they use/see ICD-9
 - Include ICD-10 as you plan for projects like meaningful use of electronic health records
- Develop and complete an **ICD-10 project plan** for your organization (1 month)
 - Identify each task, including deadline and who is responsible
 - Develop plan for communicating with staff and business partners about ICD-10
- Estimate and **secure budget** (potential costs include updates to practice management systems, new coding guides and superbills, staff training) (2 months)
- Ask your payers and vendors – software/systems, clearinghouses, billing services – about ICD-10 readiness; review vendor contracts/proposals** (2 months)
 - Ask about systems changes, a timeline, costs, and testing plans
 - Ask when they will start testing, how long they will need, and how you and other clients will be involved
 - Select/retain vendor(s)

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- Review **changes in documentation requirements** and educate staff by looking at frequently used ICD-9 codes and new ICD-10 codes (ongoing)



Transition and Testing

March 2013 to September 2014

- March 1, 2013 – December 31, 2013:** Conduct **high-level training on ICD-10** for clinicians and coders to prepare for testing (e.g., clinical documentation, software updates) (ongoing)
- April 1, 2013:** Start testing ICD-10 codes and systems with your practice's coding, billing, and clinical staff (9 months)
 - Use ICD-10 codes for diagnoses your practice sees most often
 - Use ICD-10 codes for inpatient hospital procedures
 - Test data and reports for accuracy
- Monitor vendor and payer preparedness, identify and address gaps (ongoing)
- October 1, 2013:** Begin testing claims and other transactions using ICD-10 codes with business trading partners such as payers, clearinghouses, and billing services (10 months minimum)
- January 1, 2014 – April 1, 2014:** Review coder and clinician preparation; begin detailed ICD-10 coding training (6-9 months)
- Work with vendors to complete transition to production-ready ICD-10 systems



Complete Transition/Full Compliance

October 1, 2014

- Complete ICD-10 transition for full compliance
 - ICD-9 codes continue to be used for services provided *before* October 1, 2014
 - ICD-10 diagnosis and inpatient procedure codes required for services provided *on or after* October 1, 2014
 - Monitor systems and correct errors if needed

CMS consulted resources from the American Medical Association (AMA), the American Health Information Management Association (AHIMA), the North Carolina Healthcare Information & Communications Alliance (NCHICA) and the Workgroup for Electronic Data Interchange (WEDI) in developing this timeline.



JANUARY 2013

