

AMAZING  
THINGS  
ARE  
HAPPENING  
HERE

## ICD-10 Revenue Cycle & Operational Readiness

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10 days to go to October 1<sup>st</sup>, 2015

# Agenda

- New and Updated Operating Guidance
  - Soarian Scheduling Updates
  - ICDx
  - More split billing
  - Recurring services registration
  - RQi
  - Clinic coding & billing
- WIP Reduction Activities
- ICD-10 Support Center
- Reminders
- Appendices
  - Industry & Payer Readiness
  - Implementation guidance for financial clearance
  - Implementation guidance for code conversion activities
  - Medicare part B coding & billing guidance
  - Updates and Pre-implementation readiness tasks using NYP applications

# ICD-10 Updates for Soarian Scheduling

The screenshot displays the Cerner Soarian interface for scheduling appointments. At the top, the user is identified as Carl Campbell, and the patient is SANDIEGO, CARMEN A., with a date of birth of 01/03/1933. The interface shows a calendar for 2015 with the date 09/17/2015 selected. The 'Book View' section shows a grid for the patient, and the 'Appointment Data' section is active. In the 'Appointment Data' section, the 'Diagnoses' field is highlighted with a red arrow. A red text box explains that diagnosis codes are entered into this field and that the search button (a left-pointing arrow) should be used for ICD-10 codes prior to October 1st.

**Diagnosis Codes are entered into this field.  
To use the lookup function, or to enter ICD-10  
codes prior to October 1st, use the <- search button.**

# ICD-10 Updates for Soarian Scheduling

Use the ICD Revision dropdown to choose the desired ICD version. Prior to October 1st, this field will default to ICD-9. After October 1st, this field will default to ICD-10

**Find Diagnoses -- Webpage Dialog**

Find Diagnoses

ICD Revision 09

ID

Name

Find Clear

Search Results

Select and Find More

Previously Selected

OK Cancel Help

2015

Jan	Feb	Mar	Apr	May	Jun
30	31	1	2	3	4
6	7	8	9	10	11
13	14	15	16	17	18
20	21	22	23	24	25
27	28	29	30	1	2

09/17/2015

Search Criteria

Department

Location

Resource

Activity Set

Activities Resources

Find Update

Save Save as Request Print Help

# ICD-10 Updates for Soarian Scheduling

The screenshot shows the Cerner Soarian scheduling interface. A 'Find Diagnoses' dialog box is open, displaying search criteria and search results. The search criteria include ICD Revision 10 and the search term 'PAIN'. The search results list various ICD-10 codes and their descriptions, with 'R07.9 Chest pain, unspecified' selected. A red text overlay provides instructions: 'Use the code or description to find and select the code(s) needed. Then click the OK button.'

**Find Diagnoses -- Webpage Dialog**

Find Diagnoses

ICD Revision: 10

ID

Name: PAIN

Find Clear

**Search Results** [Next](#)

Code	Description	Count
I70.321	Atherosclerotic type bypass of the extrem w rest pain, right leg	10
I70.329	Atherosclerotic type bypass of the extrem w rest pain, unsp extrem	10
G50.1	Atypical facial pain	10
G89.0	Central pain syndrome	10
R07.1	Chest pain on breathing	10
<input checked="" type="checkbox"/> R07.9	Chest pain, unspecified	10
G89.21	Chronic pain due to trauma	10
G89.4	Chronic pain syndrome	10
G89.22	Chronic post-thoracotomy pain	10

Select and Find More

**Use the code or description to find and select the code(s) needed. Then click the OK button.**

Previously Selected

OK Cancel Help

# ICDx

## Current State of Readiness

- In production and oriented to ICD-10 concepts across all notes and both campuses (excl. ambulatory care network)
- Progressive messaging system upon note save and based on use/lack of use.
- Voluntarily activated at any time using F7 key.
- User guide for providers available through ICD-10 Support Center
- Monitoring tools to determine efficacy

## ICDx Widget Overview

The screenshot displays the ICDx Widget Overview interface. At the top, three tabs are visible: "Problem View (current screen)", "Timeline View", and "My Frequent Diagnoses". Below the tabs, the main content area is divided into sections: "Acute Problems", "Chronic Problems", "Prior Problems", and "Family History". Each section contains a list of medical conditions with checkboxes and ICD-10 codes. A red box highlights the "INSERT INTO NOTE" button at the top left. A red box highlights the "Add New Problem" button on the right side of the "Chronic Problems" section. A red box highlights the "Display Filters" button at the bottom of the widget. A red arrow points to the "Display Filters" button with the label "Display Filters". A red arrow points to the "Add New Problem" button with the label "Add New Problem". A red arrow points to the "ICDx User Preferences" button at the bottom left of the widget. A red arrow points to the "Diagnosis Categories" label on the left side of the widget. A red arrow points to the "Problem View (current screen)" tab. A red arrow points to the "Timeline View" tab. A red arrow points to the "My Frequent Diagnoses" tab.

Problem View (current screen)    Timeline View    My Frequent Diagnoses

INSERT INTO NOTE

**Acute Problems**

- Other and unspecified noninfectious gastroenteritis and colitis
- Subacute myeloid leukemia in remission 205.21
- Multiple open pelvic fractures without disruption of pelvic circle 808.54

**Chronic Problems**

- Dehydration 276.51
- Fissure in skin of foot 709.8
- Multiple open pelvic fractures without disruption of pelvic circle 808.54

**Prior Problems**

**Family History**

Diagnosis Categories

Display Filters

ICDx User Preferences

Add New Problem

# Implementation Guidance: More split billing

- **Scenario:** Inpatient rehab for Medicaid requires separate claims be sent for pre-October 1 days and post-October 1 days.
- **Impact:** Inpatient encounters with days after October 1, 2015 may remain unbilled remain unbilled until ICD-10 codes are assigned to the stay
- **Solution:** Dual code identified cases in both ICD-9 and ICD-10.
- **Monitoring:** Identify in-house rehab patients as of 9/30/2015

- Payers following Medicaid guidelines
  - Healthfirst

# Implementation Guidance: RQi edit correction

- Currently there are 9 different rules in RQi that are driven by ICD-9 codes. These rules will be adjusted to include ICD-10:
  - Accident record for Labor Assessment
  - Accident Record Missing (Dx code 800-848)
  - Accident Record Missing (Dx code 850-854)
  - Accident Record Missing (Dx code 860-887)
  - Accident Record Missing (Dx code 900-910)
  - Sliding Scale Missing (B.M.T.)
  - Medicare as Primary can not have an ICD-9 (DX) code that starts with a V
- Currently we are testing one rule in RQi:
  - Invalid Dx code - ICD-10 codes must start with an alpha not numeric
- WIP errors will be monitored after ICD-10 go live to see if any new RQi rules need to be created.



# Implementation Guidance: Recurring service registration

## Adding New Eagle Visit Records to an existing registration

- Requires Eagle recurring visit maintenance (RLM) or some equivalent menu access for staff
- Requires a valid and appropriate ICD-10 diagnosis code to be assigned to the first visit record on or after October 1, 2015
- May convert existing ICD-9 diagnosis code(s) to a clinically equivalent ICD-10 code for an existing patient being seen in October for the same condition under the current plan of care

**OR**

## Create a New Recurring Registration

- It is recommended that site(s) voluntarily terminate the existing registration with a date of 9/30/15.
- New registration and subsequent visits requires a valid and appropriate ICD-10 diagnosis code(s)
- May convert existing ICD-9 diagnosis code(s) to a clinically equivalent ICD-10 code for an existing patient being seen in October for the same condition under the current plan of care
- Previously booked and pre-registered visits may require re-association to new registration identifier in applicable scheduling and/or registration system.
- Previously written orders and plans of care may require reassignment to new registration identifiers and/or conversion of ICD-9 diagnosis codes

# Implementation Guidance: Clinic Billing

- **Scenario:** A Medicare patient comes to a clinic for a visit in September. Ancillary services are ordered that occur in October. The clinic is billed out under ICD-9 but the ancillaries will need to get billed under ICD-10.
- **Impact:** Encounters with ancillary services posted with dates of service of October 1, 2015 and after will remain unbilled until ICD-10 codes are assigned to the clinic encounter.
- **Solution:** Turn dual coding on in production for both Epic:Eagle (East Campus) and Allscripts SCM: Eagle (Superbill West Campus)
- **Reporting & Monitoring:** Identify September 2015 Medicare clinic visits with ICD-9 codes only for potential conversion

# WIP Reduction - Current State

## Goals

- Simplify the process. Eliminating ICD-9 based WIP allows sites and staff to concentrate on ICD-10 WIP
- Create a financial buffer. Accelerating cash reduces risk of payer readiness after October 1.

### Bi-Campus Age Categories (DOS) <sup>1</sup>

		(0-13 days)	(14-29 days)	(30-59 days)	(60-179 days)	180-365 days	366+ days	Grand Total	
As of 9.05.2015	Total # cases	2,306	4,687	3,813	5,932	2,467	792	19,997	cases: 227 Balance : \$112,645
	Total \$ balance	\$69,060,679	\$29,051,859	\$13,725,177	\$18,127,172	\$5,923,482	\$4,298,887	\$140,187,256	
As of 9.12.2015	Total # cases	2,295	4,881	3,640	6,120	2,531	757	20,224	cases: 2586 Balance : 41,665,131
	Total \$ balance	\$67,897,481	\$32,324,296	\$13,581,543	\$15,641,552	\$6,613,776	\$4,241,254	\$140,299,901	
As of 9.21.2015	Total # cases	1,250	4,768	3,225	5,371	2,238	786	17,638	
	Total \$ balance	\$30,880,644	\$27,464,739	\$14,637,190	\$14,282,374	\$6,650,428	\$4,719,396	\$98,634,770	

#### Under 30 days

Total # cases	6,018
Total \$ balance	\$58,345,383

#### 30 days and over

Total # cases	11,710
Total \$ balance	\$40,289,388

<sup>1</sup>Source: Aeos. Includes: Allen, ACN, Cornell Hospital, Lower Manhattan Hospital, Milstein, MSCHONY, Payne Whitney Manhattan, Payne Whitney Westchester.

## WIP Clean Up – Julio's team

Week worked	Accounts Closed		Accounts Fixed	
	Accts	Acct Balance	Accts	Acct Balance
8/10	794	\$ 197,733.27		
8/17	293	\$ 278,187.01		
8/17	518	\$ 693,431.23		
8/24	717	\$ 810,632.24		
9/7	1013	\$ 525,444.04	193	\$ 745,361.85
9/14	108	\$ 64,918.36	1599	\$ 1,265,991.34
	<b>3443</b>	<b>\$ 2,570,346.15</b>	<b>1792</b>	<b>\$ 2,011,353.19</b>

# ICD-10 Support Center

- ICD-10 Support Center will be available beginning **September 28, 2015** to assist with operational inquiries related to ICD-10 implementation and coordinating with the IT Help desk for ICD-10 technical related issues.

## Telephone Hotline

646-'NYP'-9210 (646-697-9210)

## Email

[icd-10help@nyp.org](mailto:icd-10help@nyp.org)

## Website

[ICD-10 AnTENna](#)

# ICD-10 Support Center- Current Status

## Logistics

**Rooms-*Secured*** ( Rm 325:10 PCs, Rm 365: 5PCs)  
**Voip Phones-*Secured*** (Rm 325:7, Rm 365:5)  
**Phone line-*Secured*** (646-697-9210)  
Assess Application Usability *Pending*  
Assess Command Center PCs *Completed*  
Expand [ICD-10Help@nyp.org](mailto:ICD-10Help@nyp.org) Listserv *Completed*

## Reporting/Monitoring

Reports Requested from Eagle/RH  
WIP Monitoring Tool Identified  
Mechanism for Monitoring High Risk Edits Identified  
Reporting Assignments Identified  
Report Schedule Pending  
Claims Tracker Developed

## Service Desk Interface

Service Now Training Completed  
After-Hours Protocol Shared with Help Desk  
V-mail to E-mail Feature provided by Help Desk  
Service Desk Adding Temps for Support  
Service Desk Developing ICD-10 Flag  
Service Desk Admins identified Application Owners

## Issues Management

Issues Tracker Developed  
Reconciliation and Assessment Process *Pending*  
Process for resolving and closing issues Identified  
On-site Assignments *Pending*  
Trainings Scheduled for basic troubleshooting  
Outlook Form *Developed*

# ICD-10 Support Center- Calendar of Key Dates

SEPT.	20	21 Training -Structure/Schedule -Team Communication -Issues Management/Workflows -Scripts Fielding Phone Calls	22 Training -Code Conversion Tools -Navigating Core Applications -Navigating ICD-10 AnTENna -Guidance Document Review -CMS Resources (Road-to-ICD10)	23	24 Training -Reporting -Reconciliations -Forms/Reports to be converted -Daily Updates/ Org Wide	25	26
	27	28 SUPPORT CENTER GO LIVE 9AM-5PM	29 Support Center Hours 9AM-5PM	30 Support Center Hours 9AM-5PM	1 ICD-10 GO LIVE 6AM-10PM	2 Support Center Hours 6AM-10PM	3 Support Center Hours 8AM-4PM
OCT.	4 Support Center Hours 8AM-4PM	5 Support Center Hours 6AM-10PM	6 IP CLAIMS DROP 6AM-10PM	7 Support Center Hours 6AM-10PM	8 Support Center Hours 6AM-10PM	9 Support Center Hours 6AM-10PM	10 Support Center Hours 8AM-4PM
	11 Support Center Hours 8AM-4PM	12 OP CLAIMS DROP 6AM-10PM	13 Support Center Hours 6AM-10PM	14 Support Center Hours 6AM-10PM	15 Support Center Hours 6AM-10PM	16 Support Center Hours 6AM-10PM	17 RECURRING SERVICES (SEPT D.O.S) CLAIMS DROP 8AM-4PM

- Support Center Activities:
  - Issues Management
  - Onsite Assistance
  - Transition Monitoring/Reporting
  - Documentation Assistance
  - Code Conversion

# ICD-10 AnTENna

- Website url: <http://nyplearningcenter.org/apps/eLearning/cms/icd10/>
- Home page link will include updates based on daily calls.
- Support Center link located in upper right hand corner of page will include operating guidance, training aids, and issues log

The image displays two screenshots of the ICD-10 AnTENna website. The left screenshot shows the homepage with a navigation bar, a header image of healthcare silhouettes, and a main article titled "ICD-10 Project releases operating guidance for transition period code conversion activities". The right screenshot shows the "Support Center" page with a navigation bar, a header image of healthcare silhouettes, and a "Support Center" section with links to "Calendar of Support Center Operating Hours", "Implementation Guidance", "Technology Aids", "Provider Reference", "Organizational Updates", and "Implementation Issues". There are also "ICD-10 Widgets" sections on both pages, including a "COUNTDOWN TO ICD-10" widget and an "NYP Code Converter" widget.



# Reminders

- Forward reports, forms, documents and other items requiring code conversion to **Christine Valentin** at [valenti@nyp.org](mailto:valenti@nyp.org).
- Focus pre-implementation readiness on **WIP reduction activities** and **communicating with physicians** and other clinical providers about operational guidance and how it may impact orders, patient look ups, etc.
- Remind providers of the documentation assistance tools available to them in SCM (ICDx), EPIC (Diagnosis Calculator), and Crown (???)
- Have staff watch ICD-10 organizational awareness video, “ICD-10: A New Language for Healthcare” on their transcripts in the NYP Learning Center.
- ICD-10 is date of service/date of discharge sensitive.
- DO NOT enter decimal points when entering ICD-10 codes in Eagle
- E-mail inquiries to [ICD-10Help@nyp.org](mailto:ICD-10Help@nyp.org).

# Appendices

- Medicare & Medicaid readiness & billing guidance
- Contracted payer authorization requirements
- Implementation Guidance for Financial Clearance
- Implementation Guidance for Code Conversion
- Implementation guidance for Medicare part B coding & billing
- Updates and Pre-implementation readiness tasks using NYP applications
  - Soarian Scheduling
  - OR Manager
  - Eagle Gold & Mainframe
  - Sunrise Record Manager (SRM)
  - Crown & Imagecast
  - **Sunrise Clinical Manager (SCM) - Updated**

# Industry and payer readiness

- Medicare readiness
  - Three end-to-end testing periods covering 2700 providers and clearinghouses and 67,000 claims produced 87% - 88% acceptance rate with less than 2% of claims being rejected due to invalid ICD-10 submissions. Other errors related to byproduct of testing environment, invalid submission of ICD-9 codes, and negative testing.
  - All National & Local Coverage Determinations updated to accommodate ICD-10 codes
  - Medicare inpatients with part B coverage only and whose admission spans the September/October timeframe must be split billed.
- Medicaid readiness
  - If the claim is for Clinic APG Episode of Care or CHHA Episodic services with multiple dates of service where the through date is on or after October 1, 2015, the claim must be coded as ICD-10 for **all dates of service** - even if the episode started before October 1, 2015. If the provider chooses to split an APG claim, the ICD-10 claim could fail with edit 2081 - All APG Lines Paid Zero
  - Non-DRG claims (except for psychiatric claims, discussed in FAQ ICD13) need to be split billed. Claims with dates of service prior to 10/1/2015 must contain ICD-9 codes and claims for dates of service on or after 10/1/2015 must contain ICD-10 codes. If the non DRG claim will be interim billed with no discharge date and the end date of service is on or after October 1, 2015, the coding must be ICD-10.
  - An Inpatient claim for Psychiatric services should be coded according to the discharge date. If the discharge date is on or after October 1, 2015, the diagnosis and procedure codes must be ICD-10, regardless of the date of admission.
  - Medicaid plans in California, Louisiana, Maryland, and Montana have received approval from CMS to use an ICD-10 to ICD-9 crosswalk to process claims for an undetermined amount of time until such states technologies and processing systems are fully compliant.

# Payer Authorization Requirements

Plan	Accepting Preauths in ICD 10 Starting	Preauths for Admission/Amb Surg >=10.1.2015 –Coding for Auth Required	Preauths for Admission/Amb Surg < 10.1.2015 & Unknown Discharge Date—Coding for Auth Required	Long Term OP—Coding for Auth Required for Auths called in before 10-1-2015 for services occurring both before and after 10-1-2015
1199	7.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Aetna	7.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Affinity	9.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Amerigroup	6.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Amidacare	6.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Cigna	7.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Elderplan	10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015
Emblem	10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015
Empire	6.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Fidelis	Pending	Pending	Pending	Pending
HealthFirst	9.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Hudson MVP	7.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Magnacare	9.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode
Multiplan	Repricer Ready to Accept though plans may not be	Repricer Ready to Accept though plans may not be	Repricer Ready to Accept though plans may not be	Repricer Ready to Accept though plans may not be
United	10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015	ICD9 codes for auth if request made before 10.1.2015, IC10 if made on or after 10.1.2015
VNSNY Choice	8.1.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD9 codes for auth if service will occur before before 10.1.2015, IC10 if services occur on or after 10.1.2015. For extended services
Wellcare	7.15.2015	ICD10	ICD 9 auth Valid for entire Stay	ICD 9 auth Valid for entire service episode

# Operating Guidance: Financial Clearance

Type	Scheduled/ Unscheduled	Requirement for Financial Clearance Activities	
		On or after October 1st	Prior to October 1st
<b>Inpatient</b>	Scheduled (Elective)	ICD-10 diagnosis code	For Admissions between <b>September 23, 2015 and September 30, 2015</b> departments are expected to secure <b>both</b> an ICD-9 and ICD-10 diagnosis codes.
<b>Inpatient</b>	Unscheduled (Emergent)	ICD-10 diagnosis code	For Admissions between <b>September 23, 2015 and September 30, 2015</b> departments are expected to secure <b>both</b> an ICD-9 and ICD-10 diagnosis codes.
<b>Ambulatory Surgery</b>	Scheduled (Elective)	ICD-10 diagnosis code	For Ambulatory surgery procedures performed on <b>September 30, 2015</b> departments are expected to secure <b>both</b> an ICD-9 and ICD-10 diagnosis codes.
<b>Ambulatory Surgery</b>	Unscheduled (Emergent)	ICD-10 diagnosis code	For Ambulatory surgery procedures performed on <b>September 30, 2015</b> departments are expected to secure <b>both</b> an ICD-9 and ICD-10 diagnosis codes.
<b>Hospital Based Clinics</b>	Schedule (Elective)	As applicable, ICD-10 diagnosis code	Clinic Visits Prior to <b>October 1st</b> will require ICD9 coding. (Diagnosis codes will be assigned at the time service)
<b>Therapeutic Referred Ambulatory (e.g. – Physical/occupational therapy, chemotherapy, behavioral health, etc)</b>	Scheduled (Elective)	ICD-10 diagnosis code	Appointments which have been scheduled prior to <b>October 1, 2015</b> and service to be provided on or after October 1, 2015 shall require an ICD-10 code for financial clearance activities.
<b>Diagnostic Referred Ambulatory aka DRA (e.g. – laboratory, radiology, etc)</b>	Scheduled (Elective)	ICD-10 diagnosis code	Appointments which have been scheduled prior to <b>October 1, 2015</b> and service to be provided on or after October 1, 2015 shall require an ICD-10 code for financial clearance activities.
<b>Emergency Services</b>	Urgent and emergent services provided in any NYP Emergency Department are typically excluded from financial clearance activities. Such services that result in ambulatory surgery and/or inpatient admission shall follow guidelines mentioned above.		

# Implementation Guidance: Code Conversion

- **Devices that are generally eligible for code conversion activities typically include:**
  - Reports
  - Data extracts
  - Clinical orders and plans of care
  - Referrals and appointments for clinical services
  - Technology application-specific tables, dictionaries, or functionality that is designed to represent or use a specific sub-set of the overall ICD-9 and ICD-10 code set.
  - Forms, documents, and other data capture vehicles that currently include ICD-9 diagnosis codes
- **Steps in the code conversion process**
  - Presentation of the device and diagnostic element(s) to be converted.
  - Diagnostic elements converted to ICD-10 equivalents.
  - Conversion presented to business/operational/clinical owner for review and approval.
  - Approved conversion presented to technical owner for update or replacement.
  - Device tested (as applicable) with new ICD-10 elements.
  - Device placed into production.
- **Caveats, exceptions, and assumptions**
  - Code criteria shall be presented in an acceptable format for conversion (e.g. – spreadsheet).
  - Business owner and/or ITS point of contact are responsible to validate the efficacy of the deliverable's content prior to submission. Invalid code criteria **shall not** be converted.
  - Code criteria defined by external agencies **shall not** be converted by PMO.
  - Device owner is responsible for approving the code conversion prior to re-programming.
  - It is at the IT point of contact's discretion as to how to best update converted devices.
  - Business owner is responsible for the redesign of forms, documents, and other "hard" data capture vehicles for which replacement ICD-10 codes have been provided.
  - Effective October 1, patients presenting with referrals containing ICD-9 and/or narrative diagnoses may be scanned and e-mailed to the ICD-10 Support Center for conversion.

# Code Conversion Tool

- Located on ICD-10 AnTENna website
- GEMs based code conversion tool
- Code lookup by **ICD-9 code** (include or exclude decimal) **description**
- **Coding of encounters continues to be based on the documentation provided in the patient's medical record.**

**NYP** Terminology Services

**Translate**

From:

dehydration

ICD9 MED Name	ICD9	Match Direction	ICD10	ICD10 MED Name
Dehydration	27651	9<<->>10	E860	Dehydration
Other transitory neonatal electrolyte disturbances	7755	9<<->>10	P741	Dehydration of newborn

This translation tool is based on data contained in the Medical Entities Dictionary (the MED). For questions or comments please contact [dab7001@NYP.org](mailto:dab7001@NYP.org).

**NYP** Terminology Services

**Translate**

From:

78650

ICD9 MED Name	ICD9	Match Direction	ICD10	ICD10 MED Name
Chest pain, unspecified	78650	9<<->>10	R079	Chest pain, unspecified

This translation tool is based on data contained in the Medical Entities Dictionary (the MED). For questions or comments please contact [dab7001@NYP.org](mailto:dab7001@NYP.org).

## Implementation Guidance: Medicare Part B coding & billing

Facilities supplying inpatient services to patients admitted prior to and discharged after October 1, 2015 and who are only covered for Medicare part B benefits shall be required to submit two separate claims for such covered services. The first claim submission shall include all Medicare part B covered services from the date of admission through September 30, 2015 and be coded using ICD-9 diagnosis and/or procedure codes. The second claim submission shall include all Medicare part B covered services from October 1, 2015 through the date of discharge and be coded using ICD-10 diagnosis and/or procedure codes .

It is recommended that such potential encounters be identified prior to or at the time of service with a corresponding report from the applicable scheduling and/or registration system so as to create a work driver for the Health Information Management Department from which they may be able to dual code these cases.



# Core Technology Updates – Soarian Scheduling

- Those recurring services areas that employ an interface between Soarian Scheduling and Eagle and that shall require new registrations in Eagle may require previously booked appointments for October 1, 2015 and forward to be “re-associated” with the new registration serial number.

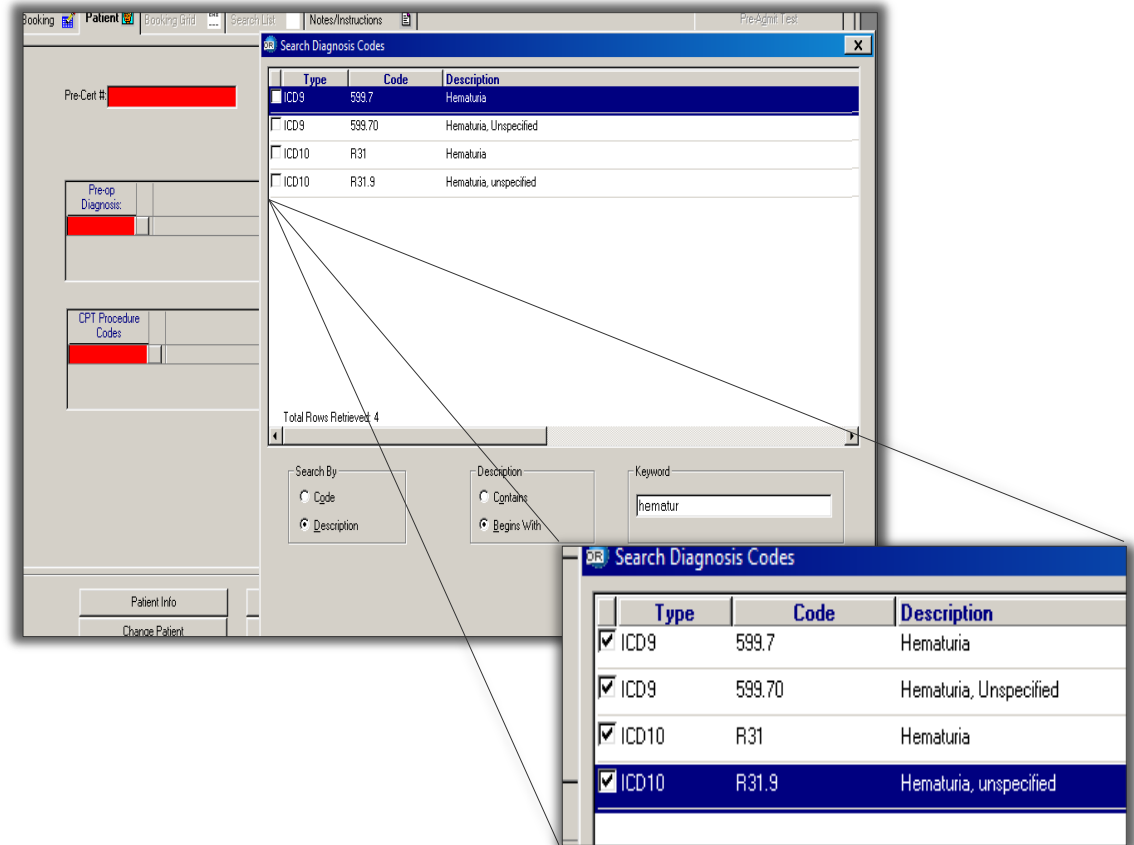
The screenshot displays the Siemens Soarian Scheduling interface. At the top, the patient information for 'PATIENTPORTAL, DAD' is shown, including their address (425 E. NEW YORK, NY 10016) and primary identifier (01011955). The interface is divided into several sections:

- Calendar View:** A monthly calendar for 2015 is visible on the left, with the 1st of October highlighted.
- Search Criteria:** A section on the left allows filtering by Department, Location, Resource, and Activity.
- Appointment Data:** A section on the left provides details for the selected appointment, including Category, Patient Class, Order Physician, and Diagnoses.
- Save Appointment -- Webpage Dialog:** A central dialog box is open, showing the appointment details for 08/18/2015 at 10:30 AM. It includes a table for selecting appointments for visit association and a table for selecting visits to associate with the selected appointments.

Visit Date	PIC	Age	Type	Adm Doctor	Visit #	FIC	Service	Entity	Clinic Code
05/14/2014	O	5	I		41341140	J		NYPWC	AGE219
04/24/2014	I	I			101064738	J	MED	NYPWC	
04/17/2014	O	5	I		413411328	J		NYPWC	AGE219
04/15/2014	O	5	I		41341142	J		NYPWC	AGE920
04/09/2014	O	5	I		413411328	J		NYPWC	AGE219
03/28/2014	O	5	I		41341141	J		NYPWC	AGE219
09/16/2013	I	I			101036233	B	MED	NYPWC	
09/11/2013	I	I			101035542	J	MED	NYPWC	
08/30/2013	I	I			101034131	J	MED	NYPWC	
08/28/2013	I	I			101033842	J	MED	NYPWC	
03/11/2013	O	5	I		41176975	J		NYPWC	AGE#11

# Core Technology Updates – OR Manager

- Dual code selection functionality available in production environment.
- Dual code interface to Eagle pre-registration/reservation screens in test.
- Previously booked surgeries for October 1, 2015 and forward are being converted by the Project Management Office and will be provided to respective Admitting departments for update and financial clearance activities.
- Memo and training aid distributed to Cornell FPO instructing dual code selection effective September 14, 2015.



# Eagle User Screen Updates: Pre-Admission Screen

## Eagle Gold

**NewYork-Presbyterian**  
The University Hospital of Columbia and Cornell

**Pre-Admissions Maintenance**

**Validation Messages**

- Admitting Physician is a required field on this screen.
- Admission Type is a required field on this screen.
- Location is a required field on this screen.
- Patient Medicaid Number invalid: CHECK DIGIT VALIDATION ERROR.

**UPDATE**

City: Brooklyn  
County: Kings (KING)  
State: New Yo (NY)  
Zip Code: 11232  
Home Phone: 212-585-6437  
Work Phone: 718-789-1234  
Employ Status: Faculty Employed (F)

**Expected Admission**

- Admission Date: 01/23/15
- Admission Time: HH:MMX
- Admission Type: No Selection
- Admission Status: No Selection
- Admit Source: Dpo (DPO)

**Reservation**

Reserved By: \_\_\_\_\_  
Phone: AAA-XXX-NNNN  
Reservation Date: 01/23/15

**Insurance**

**Primary Coverage**

- Financial Class: SLF
- Plan Code: Self Pay

**Secondary Coverage**

Financial Class: \_\_\_\_\_  
Plan Code: \_\_\_\_\_  
Medicaid Number: A299999Y

**Diagnosis**

ICD-9 Code: \_\_\_\_\_  
ICD-10 Code: \_\_\_\_\_  
IDC Version: 9  
Description: \_\_\_\_\_

**Procedure**

ICD-9 Code: \_\_\_\_\_  
ICD-10 Code: \_\_\_\_\_  
IDC Version: 9  
Description: \_\_\_\_\_

**Notes**

Note 1: \_\_\_\_\_  
Note 2: \_\_\_\_\_

**Facility Defined**

Suffix: \_\_\_\_\_  
Adv Dir: No Selection

**OPTIONS**

- Collapse all sections
- Expand all sections
- Next record
- Previous record
- Create new record
- Copy this record
- Delete this record
- Restore
- Select another record
- Cancel
- Exit this function

Messages displayed

## Eagle Mainframe

NEW YORK HOSPITAL TEST      PRE-ADMIT1 SIAPAMIENTRYFP

PA-R#: 174019      NAME: HOM, SUSAN ANNA      SEX/DOB: F\_10/23/1930 84  
RSV-DT: 03/03/10      ADDR: 334 E 38TH ST      2: 2TH FLOOR ROOM 20000  
ZIP-CD: 11232      CITY: BROOKLYN      COUNTY: KING      STATE: NY      MARTL: M  
MOTHER: UNKNOW      SS#:      MCAID#: AZ99999Y      CHART#: 123  
M.P.I.:-      H-PHON: 212-585-6437      B-PHON: 718-789-1234      LANG: EN  
= PAT#: 123      ===== UPDATE =====

ADMPHY: AAA123 HOM SUSAN DR      PRIOR- HSP:  
REFPHY: AAA123 HOM SUSAN DR      ADMDATE: MM/DD/YY      DSCDATE: MM/DD/YY  
EXPECTED -      SERIAL#: 500015531      EMP-STS: F      PVT/SVC:  
ADMDT: 03/03/15 TUE MAR 3 2015      PRM F/C: T08      SEC F/C: SLF  
TIME: 11:33A      ADMTSRC: AAN AISHEL AVRAHAM RESIDENTIA  
SERV:      ACMD:      ADMTYPE: 33 ELECTIVE  
P-R-D:      SUP-SVC:      RMILOC: AG

DIAG: Other specified protozoal inte      ICD VERSION: 0  
PROC: Fluoroscopy of Left Lung      ICD VERSION: 0      ADMITTED:  
ICD9 DIAG:      PROC 9:      ICD10 DIAG: A078      PROC 10: BB13ZZZ

RSV-BY:      RSV-TEL#: AAA-XXX-MNNN

NOTES1:  
NOTES2:  
SUFFIX :      ADV DIR:

Patient Name <HOM SUSSANMASUSIQQ> replaced by PMF field

&ADVANCE      &ALLMSG      &END      &NEW      &COPY      &REVERSE  
&CANCEL      &RESTORE      &DELETE      &LIST      ACTION ==>

# Eagle User Screen Updates: Admission Screen

## Eagle Gold

NewYork-Presbyterian  
The University Hospital of Columbia and Cornell

About eagleGold  
Notes Emulator Trace

**Inpatient Admission**

**Preliminary Validation Messages** Ignore Exit

- ADMIT TYPE must be entered
- NURSING STATION or LOCATION CODE must be entered

Patient Data

Patient#	6019107	Name	Test, Accumatch	Sex	F	DOB	10/23/1965
Tele#	212-585-6437	Address	333 E 38th St	Financial Class			
Previous Admission							

Medicare Eligible: None (D) Code: [ ]

Mother/Newborn: No Selection Name: [ ]

Opt Out Options: No Selection

**Diagnosis / Procedure**

ICD-9 Code: [ ] Description: [ ] ICD-10 Code: [ ] Description: [ ]

**ROOM / SERVICE**

Nursing Station: [ ] Room: [ ] Bed: [ ] Location: [ ] Hospital Service Class: [ ] Accommodation Type: [ ] Supplementary Services: [ ]

**User Defined**

Ebola As: No Selection

Appar: [ ] Type: No Selection

Weight: [ ]

Adv Dir: No Selection

Pri: No Selection

Mlerr: No Selection

Nhs: No Selection

**Prior Stay**

Prior Hospital: [ ]

Prior Admitting Date: [ ]

Prior Discharge Date: [ ]

Options: Collapse all sections, Expand all sections, Cancel

Messages displayed

NEW YORK HOSPITAL TEST 06/02/15 12:52pm

## Eagle Mainframe

NEW YORK HOSPITAL TEST INPATIENT ADMISSION

PAT#: 6013675 NAME: TEST, AISHA SEX/DOB: F\_10/11/1970 SLF

TEL#: 212-555-1212 ADDR: 123 WEST 7TH STREET PREVADM: 08/01/10 08/24/10

=====

ADMIT DATE: 06/02/15 TIME: 12:24P SERIAL NUMBER: NEW

ADMIT TYPE: SOURCE:

ACCID NF or WC: A=ACCIDENT N=NO-FAULT W=WORKERS COMP

LOCATION: NRSNG STN: ROOM #: BED ID: PHONE:

HOSP SERV: ACMD TYPE: SUPPL SVC: PVT ROOM DIFF:

PVT or SVC: P=pat req/H=hosp conv/M=med nec

ADMIT PHYS: NAME: MOTHER or NEWBORN:

REFER PHYS: NAME: MEDICARE ELIG: C

PCP PHYS: NAME:

ICD9 DIAG: TEXT: ADV DIR:

ICD10 DIAG: TEXT:

ICD9 PROC: TEXT: EXPT L-O-S:

ICD10 PROC: TEXT: PRI:

OPT-OUT: TYPE: WEIGHT:

APGAR: \* PRIORITY HOSP ADM: 08/01/10 DSC: 08/24/10

PRIOR HOSP: \* EBOLA AS MNLERR: NHS:

# Eagle User Screen Updates: Admission Maintenance Screen

## Eagle Gold

NewYork-Presbyterian  
The University Hospital of Columbia and Cornell

Validation Messages  
Admission Source Invalid

Admission Maintenance

eagleGold

Admit # 123 45 Name Hom, Susan Anna Sex F Age 77  
Phone # 212-585-6437 Address 334 E 38th St Birth Date 10/23/1930  
Fn Class SLF SLF Location C 4023 01 W90 Status IA

Service  
Admission  
Service Class PSY  
Accommodation CA  
Description Care And Treatment  
Private Room Differential No Selection

Medical  
Admitting Physician  
Code C00123 Name Hom,Susan  
Referring Physician  
Code C00123 Name Hom,Susan  
Attending Physician  
Code C00123 Name Hom,Susan

Current  
Service Class PSY  
Accommodation CA  
Description Care And Treatment  
Private Room Differential No Selection  
Private or Service No Selection

Facility-Defined  
Ebola As No Selection  
Apgar No Selection  
Type No Selection  
Weight  
Adv Dir \*None (N)  
Pri No Selection  
Mterr No Selection  
Nfs No Selection  
Gne/Ime No Selection

Diagnosis  
ICD-9 Code  
Description Psy  
ICD-10 Code  
Description

Assessment Transmission Date  
Rehab CMG Number

Options  
Collapse all sections  
Expand all sections  
Refresh  
Send ADMF Interface  
Cancel

Go Cancel

Messages displayed NEW YORK HOSPITAL TEST 06/02/15 02:06pm

## Eagle Mainframe

NEW YORK HOSPITAL TEST ADMISSION MAINTENANCE

ADM#: 123 95 NAME: HOM, SUSAN ANNA SEX/DOB: F 10/23/1930 82  
TEL#: 212-585-6437 ADDR: 334 E 38TH ST LOCN: AG 1517 A B15  
===== PRM-SEC F/C: T08 SLF STS: IA  
ADMIT DATE: 07/23/13 TUE JUL 23 2013 DISCHARGE DATE: 08/01/13 THU AUG 1 2013  
TIME: 01:00PM SERIAL#: 200008322 TIME: 02:27PM L-O-S: 9  
TYPE: 11 EMERGENCY TYPE: HOM ROUTINE/HOME

SOURCE: LOCATION:  
ADMIT SRVC: HOS ACCOM: AA HOSPICE SEMI PRIVATE PRD:  
ADMIT PHYS: AAA123 NAME: HOM SUSAN DR

ICD9 DIAG: TEXT: PCR#:  
ICD10 DIAG: TEXT:

REFER PHYS: NAME: OPT-OUT:  
ATTND PHYS: AAA123 NAME: HOM SUSAN DR EFFECT DT: 07/23/13  
PCP PHYS: A02288 NAME: HOM SUSAN

PRIOR HOSP: \* ADM: 07/23/13 DSC: 07/23/13 CMG#: CMGDT:  
CURR SRVC: HOS ACCOM: AA HOSPICE SEMI PRIVATE PRD:  
MOTH/NWBRN: ACTN-ADM#: PVT/SVC:  
EBOLA AS READ SC: <S=YES/N=NO> PRI:  
ADV DIR: R DNR ORDER: N GME/IME:  
APGAR: TYPE: WEIGHT: NHS: MNLERR:

&RESTORE &CANCEL &ADMFORCE &ALLMSG &END  
ACTION====>

# Eagle User Screen Updates: Outpatient Visit Screen

## Eagle Gold (New)

NewYork-Presbyterian  
The University Hospital of Columbia and Cornell

Native Emulator Trace eagleGold

**Outpatient Registration**  
OHS MAINT FLOW

Options:  
 Collapse all sections  
 Expand all sections  
 Refresh  
 Disassociate Visit from Appointment  
 Delete this Visit  
 Copy  
 Previous screen  
 Next screen  
 Select another record  
 Select another patient  
 Cancel this Function

Patient Data | Patient # 123 | Name Horn, Sussan Ma Susiq Q | Sex F | Born 10/23/1965 | Age 48

ICD-9  ICD-10  Both

ICD Keyword Search  
 Diagnosis  Admitting Diagnosis  
 Procedure  E Code

Keywords

1: 411.1  Diagnosis - ICD9  
 Intermed Coronary Synd

2:  No Selection

3:  No Selection

4:  No Selection

5:  No Selection

6:  No Selection

7:  No Selection

Visit Type  
Code

Closure Status: Active (A)

Charge Code

Operating Time

Anesthesia: No Selection

Ready NEW YORK HOSPITAL TEST 02/18/14 06:52pm

## Eagle Mainframe

Eagle  
File Edit Connection Setup View Help

08/21/15 03:09PM NEW YORK HOSPITAL PRODUCTION OPD VISIT MAINT/DPC

PAT#: [REDACTED] NAME: [REDACTED] SEX/DOB: F 08/11/1990 25  
 SERIAL#: [REDACTED] SUFFIX: [REDACTED] CLINIC ID: ACST3C ACHEMO : CHEMO/TRANSFUSION/  
 === VISIT DATE: 08/09/15 === TIME: 12:30P =====  
 OR\_TM: 0230 ANEST: [REDACTED] TVP: ACA0 CHG: 1217VIST CL: C CLOSED

**ICD DIAG/PROC - FND: D/P-VSN:**

TP CODE	VSN	DESCRIPTION	DIAGS/PROCS	TP CODE	VSN	DESCRIPTION	DIAGS/PROCS
1	D 153.9	9	ALIGNANT NEO COLON NOS	2			
3				4			
5				6			
7				8			
9				10			
11				12			
13				14			
15				16			
17				18			
19				20			
21				22			
23				24			
25				26			

Commands: RESTORE / ALLMSG  
 &CANCEL &END &VCFLIST &VISDEL &VFC &PREV  
 &PATSEL &REGLIST &RVLIST &VISLIST ACTION ==>

MA 24/066

24.66 | 2E | Connected | tn3270://emenseagle.nyp.org

# Core Technology Updates – Sunrise Record Manager (SRM)

- Eagle Interface
- Coding Pathway Selection
  - Smart Date - SRM will automatically recognize the Discharge Date for patient and will automatically choose whether to use ICD9 or ICD10 coding
  - Manual - If there is a payer that is not ready for ICD10 yet, coders can choose this special station to code cases in ICD9 even if the date is after 10/1/2015
  - Dual Code - Already in use, but coders can still choose this station after 10/1/2015

The screenshot displays the SRM interface for an inpatient patient. The top section shows the patient's name (SRM TEST), MRN (00000003A), SSN (325645214), and birthdate (01/12/1939). The 'Current Billing Status' field is highlighted in yellow. Below this, the 'Discharged' date is shown as 10/03/2015. The 'Coding and Reimbursement System' window is open, showing the 'ICD-10 Patient Information' section with a 'Choose one:' dropdown menu. The 'Patient Disposition' section lists three options: 1. Home, Self Care (UB-01), 2. Short Term Hospital (UB-02), and 3. SNF (UB-03). A red arrow points from the 'ICD10' radio button in the top section to the 'Choose one:' dropdown in the bottom section.



# Core Technology Updates – Crown & ImageCast

- Radiology orders interfacing ICD-9 and ICD-10 Codes to ImageCast
- All orders for appointments post October 1, 2015 without ICD-10 codes being converted by Project Management Office (PMO) for referral to Southerland for financial clearance activities.

## Crown

Adult Patient View

Name	ICD-9	ICD-10	Managed By	Last Assessed
Chronic				
Adenoid hypertrophy	474.12	J35.2		26Jul2012 HADD
<b>Knee pain, bilateral</b>	<b>719.46</b>	<b>M25.561</b>		08Sep2015 Annis
Obstructive sleep apnea...	327.23	G47.33		26Jul2012 HADD
Smoking	786.09	R06.83		13Sep2012 HAD
Tonsillar and adenoid...	474.10	J35.3		13Sep2012 HAD

**Knee pain, bilateral 719.46 M25.561**

## ImageCast

Exam Inquiry -- Webpage Dialog

Accession Number Search: [ ] Exam Status: S Report Status: Pending Creation

Visit Number: [ ] / Visit Patient Location: REFRAD

Order Number: TW764596380 Order Date: 09/08/2015 9:38 AM EDT Order Code: [ ]

Org: CHONY Exam: DXKNEERST Modifiers: CRWN [ ] [ ]

Description: DIAGNOSTIC KNEE RIGHT COMPLETE WITH OBLIQ

Scheduled Date: 09/08/2015 12:00 AM EDT

Scheduled By: Allscripts, Interface Manually, on 09/08/2015 at 9:39 AM EDT

Exam Duration: 15 Resource: CH3XRM1 Transport: [ ]

Patient Status: O - Outpatient Patient Location: REFRAD Patient Type: O - Outpatient

Patient Height: [ ] in/cm Patient Weight: [ ] lb/0.00kg

**Presenting Dx Code(s):**

Code	Description	Comments
719.46	PAIN IN JOINT INVOLVING LOWER LEG	
M25.561	Pain in right knee	

**Presenting Dx Code(s):**

719.46	PAIN IN JOINT INVOLVING LOWER LEG
M25.561	Pain in right knee



# Core Technology Updates – Sunrise Clinical Manager (SCM)

Item	East Campus	West Campus
ICDx	<ul style="list-style-type: none"> <li>Progressive messaging upon note save and oriented to ICD-10 concepts in production at both campuses</li> </ul>	
Electronic Superbill	<ul style="list-style-type: none"> <li>Diagnosis codes are not posted into Eagle.</li> <li>Effective 10/1, ICD-10 codes to Epic regardless of date of service. Epic will back map to ICD-9 for pre-October 1 dates of service.</li> </ul>	<ul style="list-style-type: none"> <li><b>Decimal point issue resolved.</b></li> <li><b>Dual coding interface to be put into production this week.</b></li> </ul>
MLM & Order sets	<ul style="list-style-type: none"> <li>Diagnosis requirement for Radiology and EKG</li> <li><b>All ICD-9 based MLM criteria converted and in production</b></li> </ul>	

*Note: Items highlighted in bold red are updates from previous readiness sessions.*