ICD-10 Support in EMR-Link

Introduction

The Centers for Medicare & Medicaid Services (CMS) released a rule mandating that Covered Entities, organizations covered by the Health Insurance Portability and Accountability Act (HIPAA), must implement ICD-10 for medical coding. The compliance date (previously set for October 1, 2014) has been moved to October 1, 2015.

Since ICD codes are used as the Diagnosis code in most EHRs this means any applications used for ordering or billing will be affected. Liaison Healthcare uses diagnosis codes in several functional areas of EMR-Link:

1. Diagnosis codes are received from the EHR when an order is placed and forwarded to the lab or imaging system.
2. Diagnosis codes are used in the Medical Necessity lookup that is performed as part of the order to determine if an ABN is required.
3. Diagnosis codes are included in any billing messages that are generated as part of the order and forwarded to the Practice Management System.
4. Orders Anywhere maintains a problem list which is used to associate a diagnosis with a test.

This document will provide an overview of how Liaison Healthcare is addressing the transition to ICD-10 codes.

Some facts from the CMS ruling on ICD-10 compliance

- The compliance date (previously set for October 1, 2014) is now October 1, 2015.
- All Covered Entities must transition to ICD-10. This includes providers and payers who do not deal with Medicare claims.
- CMS is urging everyone to prepare early but they are also stating that they WILL NOT accept claims with ICD-10 codes until the compliance date. This is an important detail. Everyone must be prepared to send ICD-10 codes prior to October 1, 2015 but must not actually make the switch until the compliance date.
- CMS maintains a web site to provide information regarding the ICD-10 ruling. The link to their web page is www.cms.gov/icd10.

EMR-Link changes

Not all customers will want to transition from ICD-9 to ICD-10 at the same time. And not all labs will be ready to transition at the same time either. To accommodate this disconnect EMR-Link must be able to separately control which code set is used on the front end (customer-facing) and on the back end (lab-facing). The changes include:
1. EMR-Link has been modified to include both the ICD-9 and ICD-10 diagnosis tables as well as the crosswalks from ICD-9 to ICD-10 and ICD-10 to ICD-9.
2. EMR-Link contains medical necessity rules for both ICD-9 and ICD-10 diagnosis codes.
3. EMR-Link always saves both ICD-9 and ICD-10 codes for every order. If the EHR provides only ICD-9 diagnosis codes then EMR-Link will look up the corresponding ICD-10 code using the crosswalk tables provided by CMS. This ensures that ICD-10 diagnosis data is available for any future orders that were scheduled prior to the compliance date but fall due after Oct 1, 2015.
4. There is now a Customer-level setting that allows an organization to select whether they want to use ICD-9 or ICD-10 diagnosis codes in EMR-Link. If ICD-10 is selected then EMR-Link will use ICD-10 codes for medical necessity checking and billing. It will also cause ICD-10 codes and descriptions to display on the EMR-Link Order Review page.
5. There is also a new Lab-level setting that enables ICD-10 for the lab. If set, then ICD-10 codes will be displayed on the printed requisition and will be included in the HL7 ORM message sent to the lab.
6. Orders Anywhere now displays both ICD-9 and ICD-10 codes when performing a diagnosis search.

With these changes in place EMR-Link is able to accept either ICD-9 or ICD-10 data from the EHR and still push the appropriate code to the lab even if the Practice and the Lab are on different code sets.

**Example 1:** The Practice is ready to use ICD-10 codes internally. They use EMR-Link to connect to 2 different labs. Lab1 can accept ICD-10 data but Lab2 is still on ICD-9.

In this case the Customer-level setting is set to ICD-10. Lab1 is also set to ICD-10 and Lab2 is set to ICD-9. When an order is received into EMR-Link the ICD-10 codes are cross-mapped to find their ICD-9 equivalents and these are also saved with the order.

The medical necessity check is performed using the ICD-10 data. The Order Review page displays ICD-10 codes and descriptions and any billing messages generated through EMR-Link will include ICD-10 data.

Any orders pushed to Lab1 will use ICD-10 codes and descriptions on the printed requisition an in the HL7 ORM message. Any orders pushed to Lab2 will use the ICD-9 data that was returned as a result of the cross-map that was done when the order data was received from the EHR.

**Example 2:** The Practice is still on ICD-9 data but their lab wants to start receiving all order data with ICD-10 codes.

In this case the Customer-level setting is set to ICD-9. The Lab is set to ICD-10. When an order is received into EMR-Link the ICD-9 codes are cross-mapped to find their ICD-10 equivalents and these are also saved with the order.

The medical necessity check is performed using the ICD-9 data. The Order Review page displays ICD-9 codes and descriptions and any billing messages generated through EMR-Link will include ICD-9 data.
Any orders pushed to the Lab will use ICD-10 codes and descriptions on the printed requisition and in the HL7 ORM message.

**Example 3:** The Practice and the Lab both use ICD-9 codes until the compliance date of October 1, 2015. The Practice created several future orders in the system that were created while the ICD-9 code set was in use but the draw is scheduled to occur after the October 1 compliance date.

When the order was transferred into EMR-Link the cross-map lookup was done to get the equivalent ICD-10 code, which was saved with the order. Since the Practice and the Lab are both set to ICD-10 then that code set is used rather than the original ICD-9 data.

**FAQs**

**Does EMR-Link work with CPS 11, CPS 12 and EMR 9.8?**
These are the Centricity releases that include ICD-10 support. The answer is, yes. A lot of customers have been up and running on these releases for some time. The current version of the Process Orders Form handles the addition of an ICD-10 code in the order data.

**How will EMR-Link deal with future orders?**
There will be cases where orders were placed before the compliance deadline with a draw date that is after the October 1, 2015 compliance date. This will not be a problem because EMR-Link saves the ICD-10 equivalents when the order is first receives so the ICD-10 codes are available at the time of the draw.

**When will EMR-Link be ICD-10 capable?**
The current production version of EMR-Link is able to support ICD-10 orders. This includes the ability to perform ICD-10 based Medical Necessity checks as well as send ICD-10 data to the labs and billing systems. Orders Anywhere contains a problem list that displays ICD-9 and ICD-10 diagnosis codes and descriptions.

It’s worth noting that many of the labs are still not prepared to receive ICD-10 codes in their order messages. Our two largest labs (LabCorp and Quest) are ready and EMR-Link has already been certified for ICD-10 with both. Liaison plans to reach out to all of our lab and radiology service providers and EHR partners to prepare a test plan with each to ensure a smooth transition. With the recent change to the October 1, 2015 date, it’s likely most labs won’t engage until after the first of the year.

**Is there a cost increase for ICD-10 support?**
Liaison Healthcare is not adding any surcharge for ICD-10 support. Codemap (our provider of Medical Necessity Rules) has indicated that they are not currently increasing the price for the ICD-10 based Medical Necessity Rules. However, they have indicated that a price increase could happen prior to the compliance date. If a Practice has a need for both ICD-9 and ICD-10, then there is a cost for 2 code sets rather than just one.
What does our clinic need to do to prepare?

If your EHR is ICD-10 capable, then most of the functionality is covered. EMR-Link will pick up the ICD-10 codes from the EHR and ensure they are used in the Order message as well as any billing messages. If your EHR is not ICD-10 capable, then you’re still covered because the ICD-9 codes are mapped to a corresponding ICD-10 code automatically when the order is received into EMR-Link.

Enabling the ICD-10 setting in your EMR-Link account will cause the ICD-10 codes to display on the Order Review page and be used for Medical Necessity checking.

If your clinic uses EMR-Link to generate billing messages then someone should contact Liaison and provide us with information regarding any format changes needed in the FT1 segment of the HL7 DFT message.

Centricity customers must be using a version of the Process Orders Form that is newer than v3.4.0 to ensure the ICD-10 diagnosis codes are captured (in the EHR) as part of the order data that is transmitted to EMR-Link.

What does our lab need to do to prepare?

There are some things that labs should do to ensure a smooth transition. First, they should contact Liaison and provide us with information regarding any format changes needed in the DG1 segment if it needs to be different for ICD-10 codes. It may be that the format is identical but some labs prefer to include a diagnosis code identifier to indicate ICD-10 vs. ICD-9. For example, here’s a DG1 segment showing the ICD-9 coding and the equivalent ICD-10 diagnosis:

DG1|1|I9|v20.2^Routine infant or child health check
DG1|1|I10|Z00.129^Encounter for routine child health examination without abnormal findings

Note that in addition to the change in code and description in DG1.3, there’s also a change in DG1.2 to indicate which code set is used.

Liaison recommends that the lab receive both the ICD-9 and ICD-10 code. Having both codes available may be useful and even necessary if you plan to forward the diagnosis codes on to a payer. The following format is an example that could be used:

Template:  DG1|1||<icd9code>^<icd9description>^I9^<icd10code>^<icd10description>^I10

Example:  DG1|1||v20.2^Routine infant or child health check^I9^Z00.129^Encounter for routine child health examination without abnormal findings^I10

It would also be helpful for Liaison to have a date of when the lab is prepared to start receiving ICD-10 data.