

HFMA's Revenue Cycle ICD-10 Readiness Survey Summary of Results & Findings

Sponsored by 3M HIS

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hfma
healthcare financial management association

Intro

As hospitals and health systems address additional time for the ICD-10 transition, it will be key to recognize where efforts stand compared with others and top challenges they are likely to face moving forward.

With this in mind, HFMA researchers, with sponsorship from 3M HIS, provide this overview of industry readiness prior to the delay.*

* Survey in field 2/14; Delay signed into law 3/31.

Key Findings

1 Revenue Cycle Perspective of Current State

2 Top Challenges Facing Revenue Cycle

3 Readiness Progress to Date

Key Findings

1

Revenue Cycle Perspective of Current State

- Most hospital and health system revenue cycle leaders were confident they would have been ready for ICD-10 by fall 2014, with those at larger organizations having greatest confidence
- However, work lists are still long
- Revenue cycle leaders largely believed payers and physicians wouldn't have been ready

Key Findings

2 Top Challenges Facing Revenue Cycle

- The biggest hurdles hospitals and health system revenue cycle leaders expect to face in their transition to ICD-10 are the readiness of physicians and payers, as opposed to internal—and more controllable—challenges around having the right HIM coding staff resources or staff training

Key Findings

3 Readiness Progress to Date

- Most hospitals have had the majority of their financial/billing IT systems updated to support ICD-10 codes
- But when it comes to payer testing, more than 40% do not have a testing plan in place with their top 3-5 commercial payers
- Also, the majority of hospitals and health systems have had less than half of their contracts analyzed to determine financial impact of ICD-10
- Most do not feel confident in ability to predict impact on cash flow, payment, and DNFB

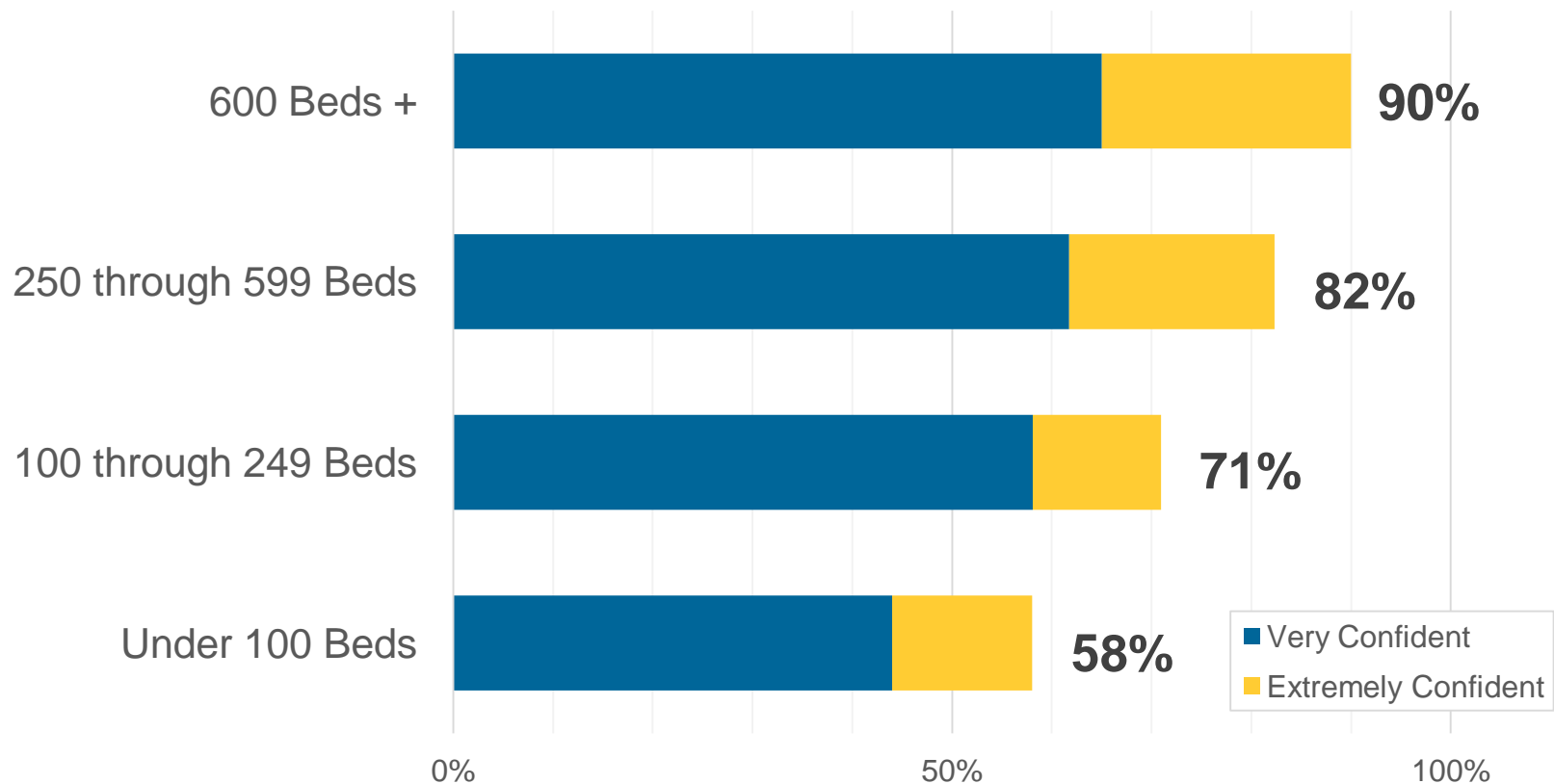
Key Findings

3 Readiness Progress to Date, cont.

- Larger organizations are better positioned to understand the financial impact of ICD-10, with many of them already having established monitoring metrics in place
- They also are more likely than peers to have contingency plans
- When it comes to looking at the strategic benefits of the ICD-10 transition, revenue cycle directors are far more likely than VPs of Revenue Cycle or CFOs to explore opportunities associated with improved granularity

Perspective: Organizational Readiness

How confident are you in your organization's readiness for ICD-10 by fall of 2014?*



5 point scale used.
Chart shows top 2 points.

*Surveying conducted prior to announcement of delay

Perspective: Long Worklists Still Ahead

By October 1, your organization intends to have completed the following...*

Established metrics to monitor the impact to revenue cycle

73%

Developed contingency plans to mitigate financial risk

68%

Begun dual coding in ICD-9 and ICD-10

67%

Begun querying physicians for additional specificity

62%

Modified EHR templates

60%

Begun exploring opportunities to strategically leverage the additional granularity

59%

Delivered training to impacted staff at owned entities

55%

Developed workflow redesign/corrective actions

54%

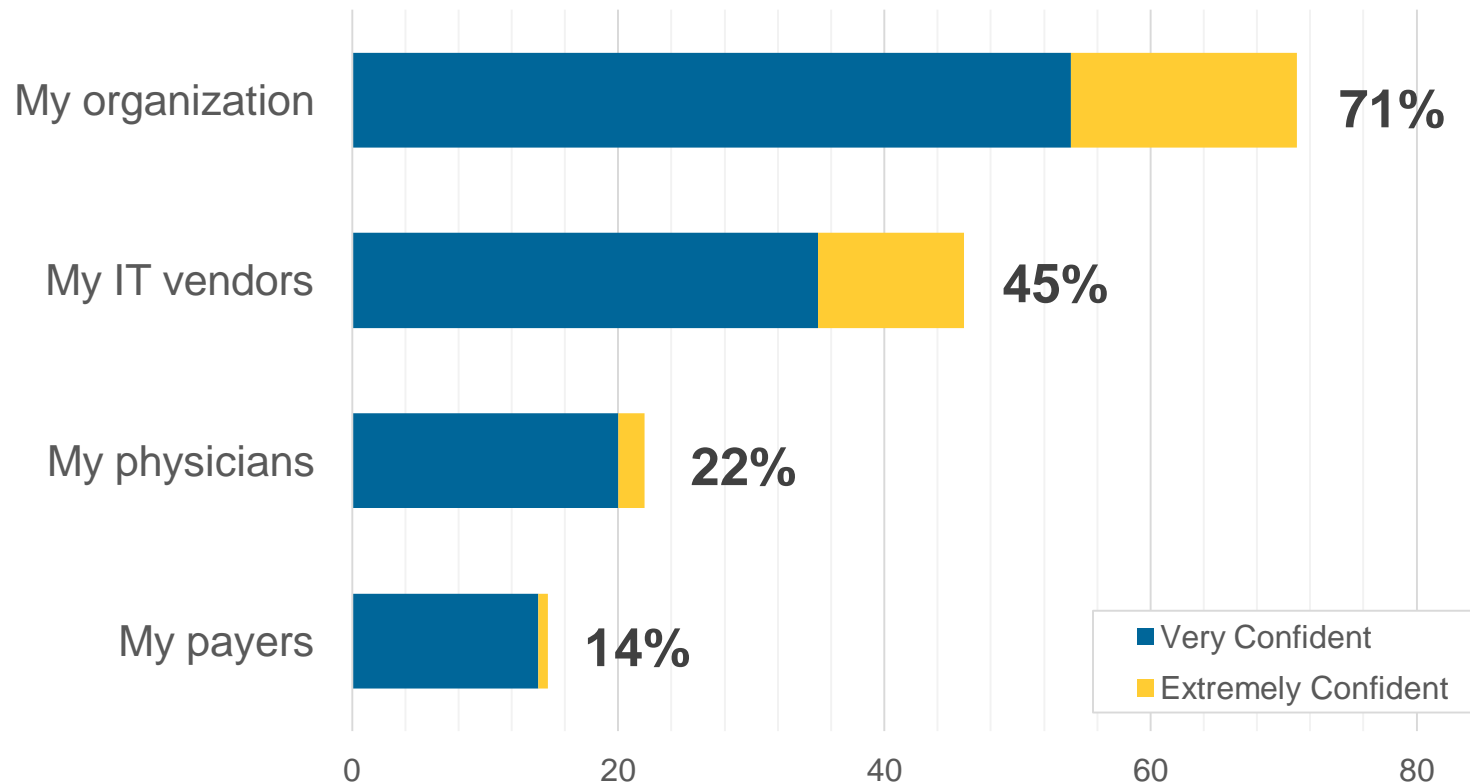
Those responding "Don't Know" excluded from the analysis.

0% 20% 40% 60% 80%

*Surveying conducted prior to announcement of delay

Perspective: Industry Readiness

How confident are you in the following entities' readiness for ICD-10 by fall 2014?*

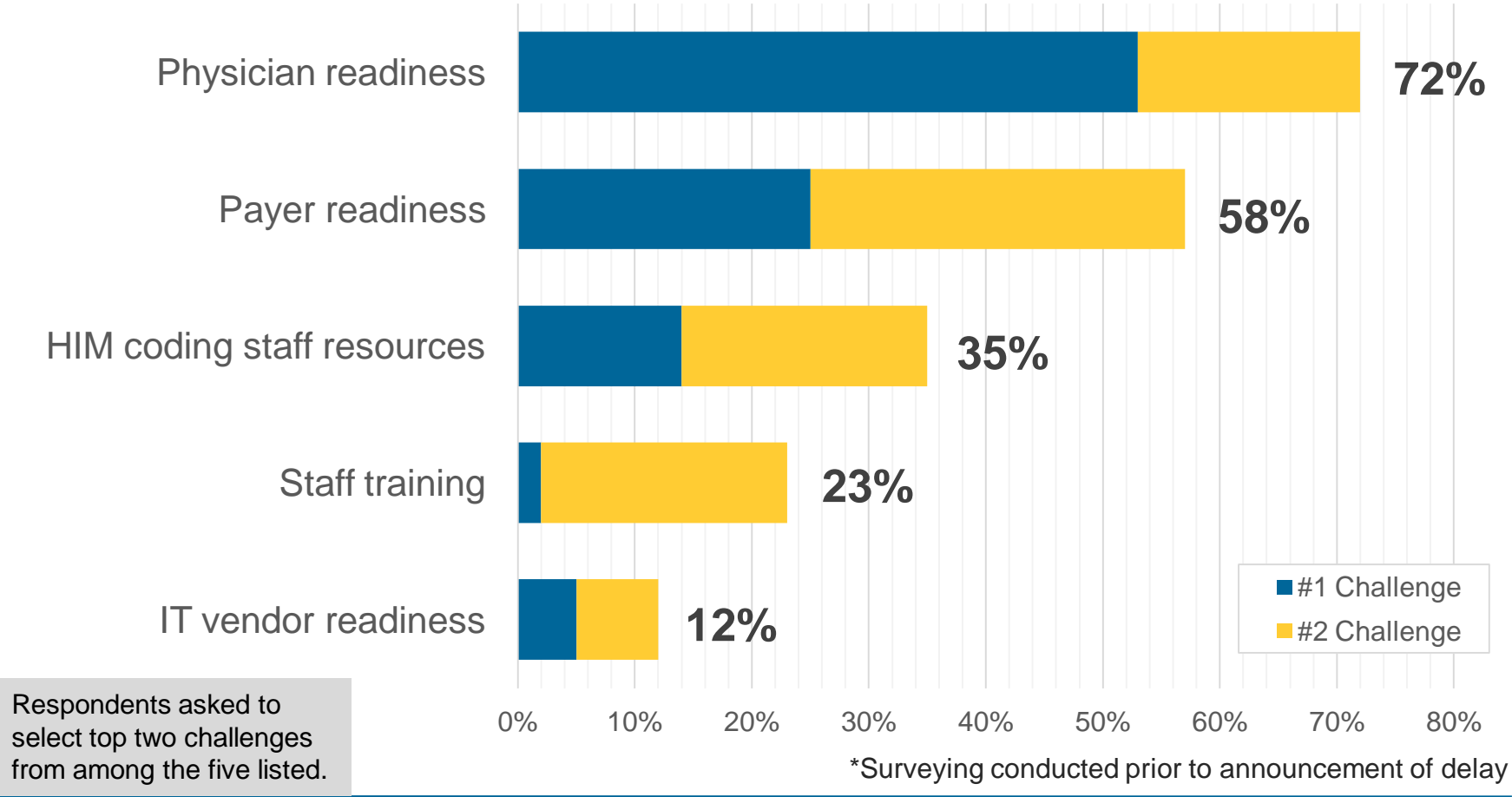


5 point scale used.
Chart shows top 2 points.

*Surveying conducted prior to announcement of delay

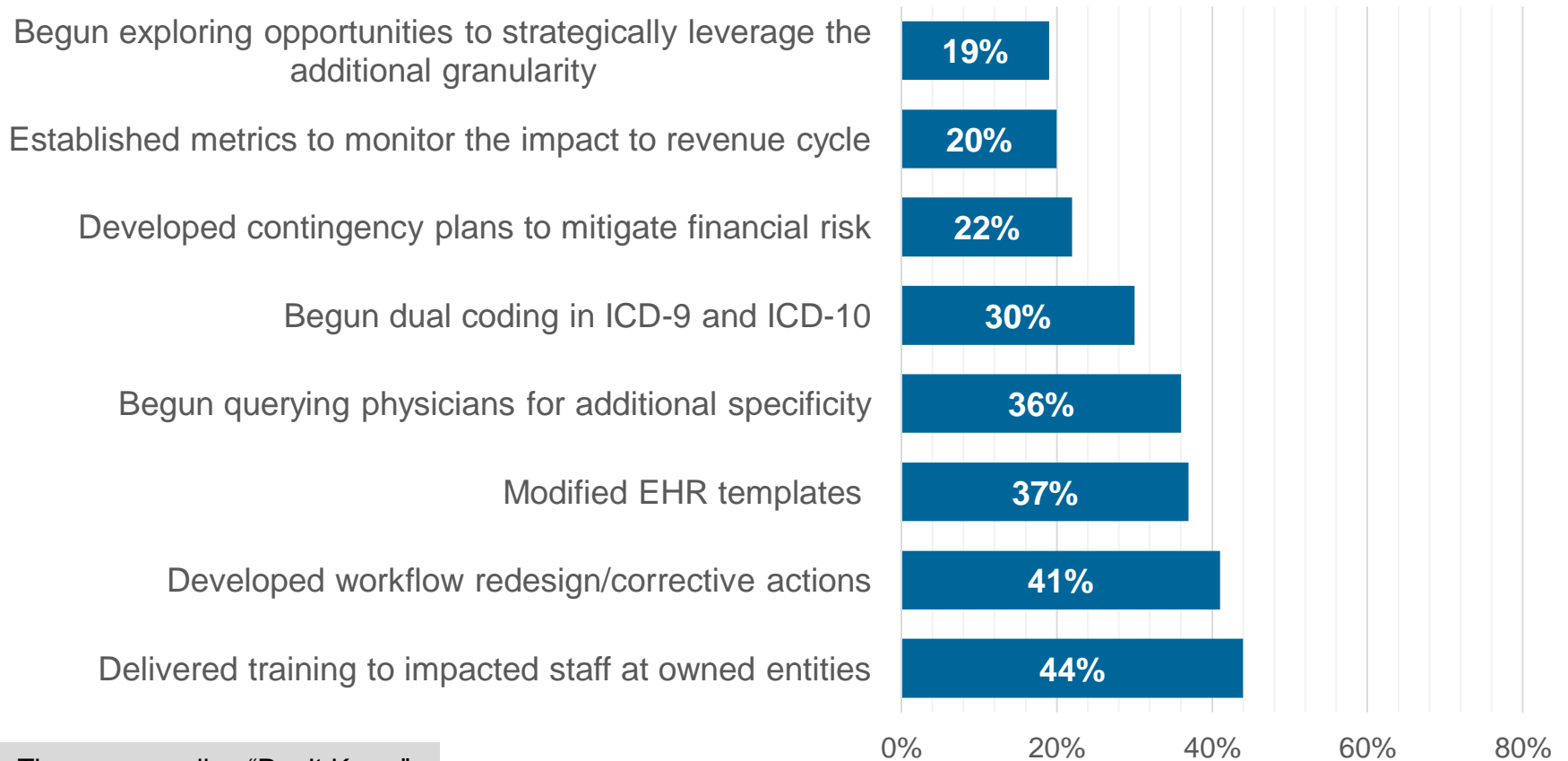
Top Challenges Facing Revenue Cycle

What do you foresee as your biggest challenge in achieving ICD-10 readiness?*



Progress: Overview of Readiness to Date

Your organization has completed the following...



Those responding "Don't Know" excluded from the analysis.

Progress: Payer Testing

Which of the following activities have you completed in preparation for ICD-10?

Our CMS ICD-10 testing will include hospital-owned entities (e.g. practices)

77%

We plan to participate in CMS's ICD-10 testing week (March 3 to March 7, 2014) with our Medicare Administrative Contractor

71%

We have a testing plan in place with our top 3-5 commercial payers

59%

We have a testing plan in place with our top 3-5 commercial payers that includes hospital-owned entities (e.g. practices)

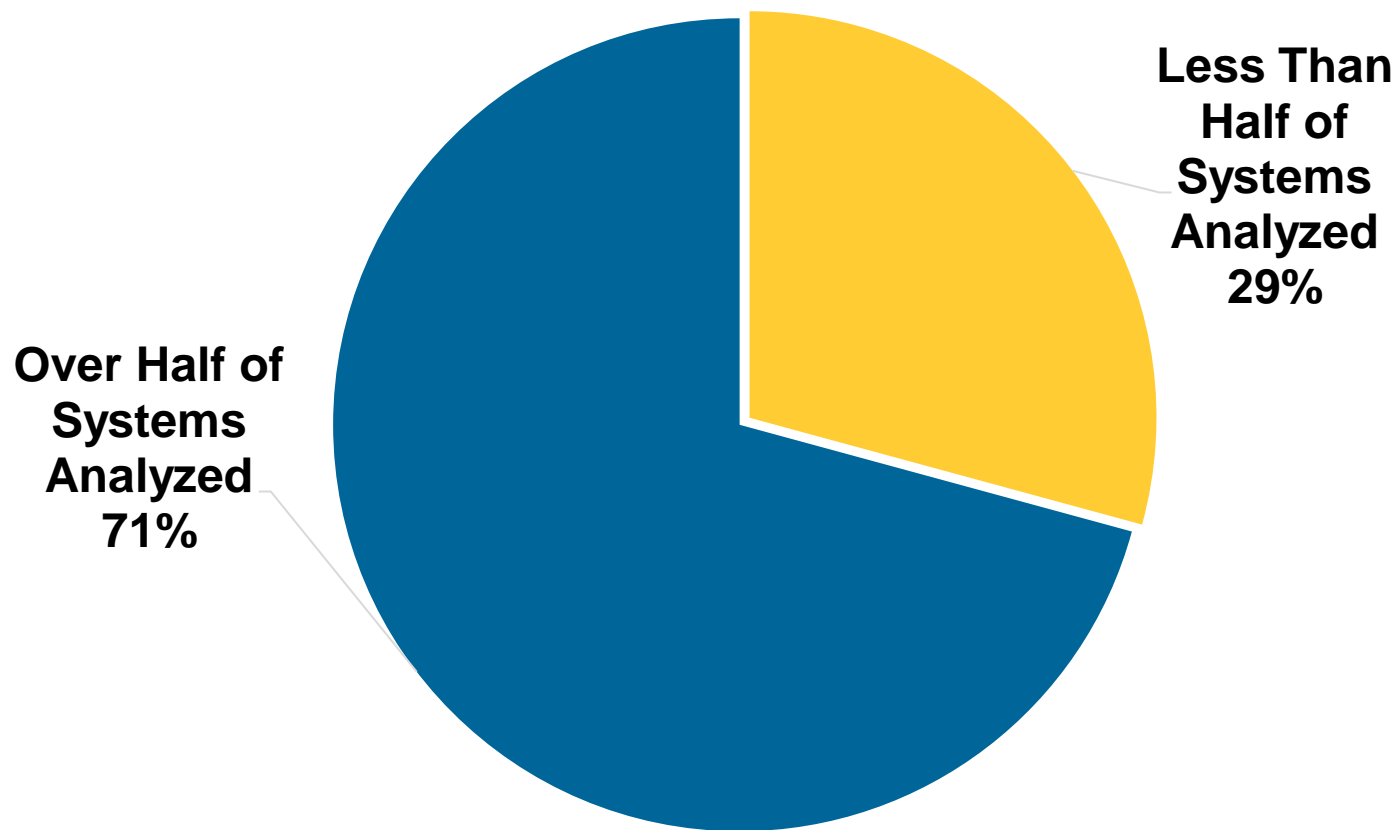
50%

0% 20% 40% 60% 80% 100%

Those responding "Don't Know" excluded from the analysis..
All organizations surveyed include owned entities.

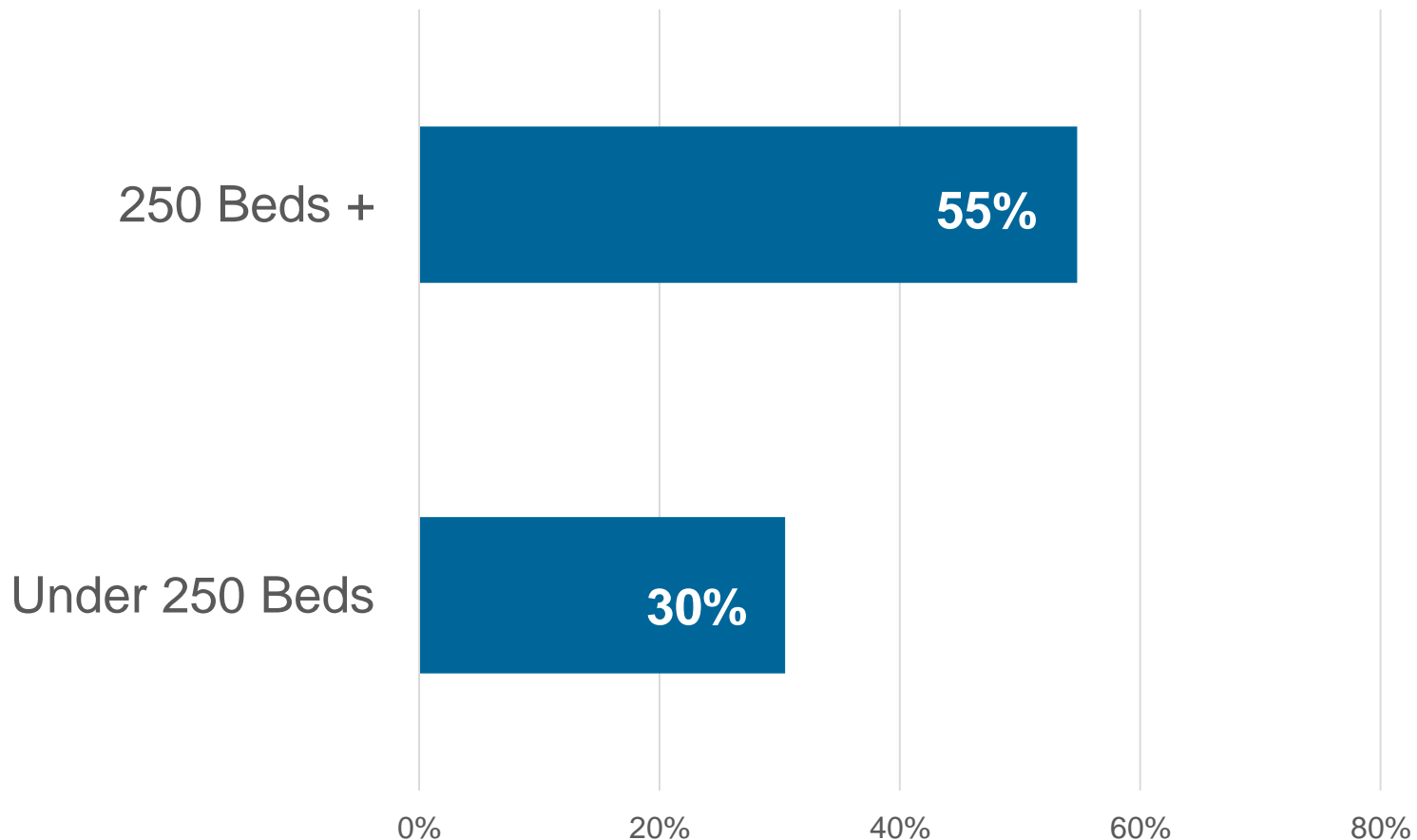
Progress: Completion of Analyzing Financial/Billing Systems

To what degree have you analyzed your financial/billing systems for the ability to support ICD-10 codes?



Progress: Completion of Contract Analysis by Bed Size

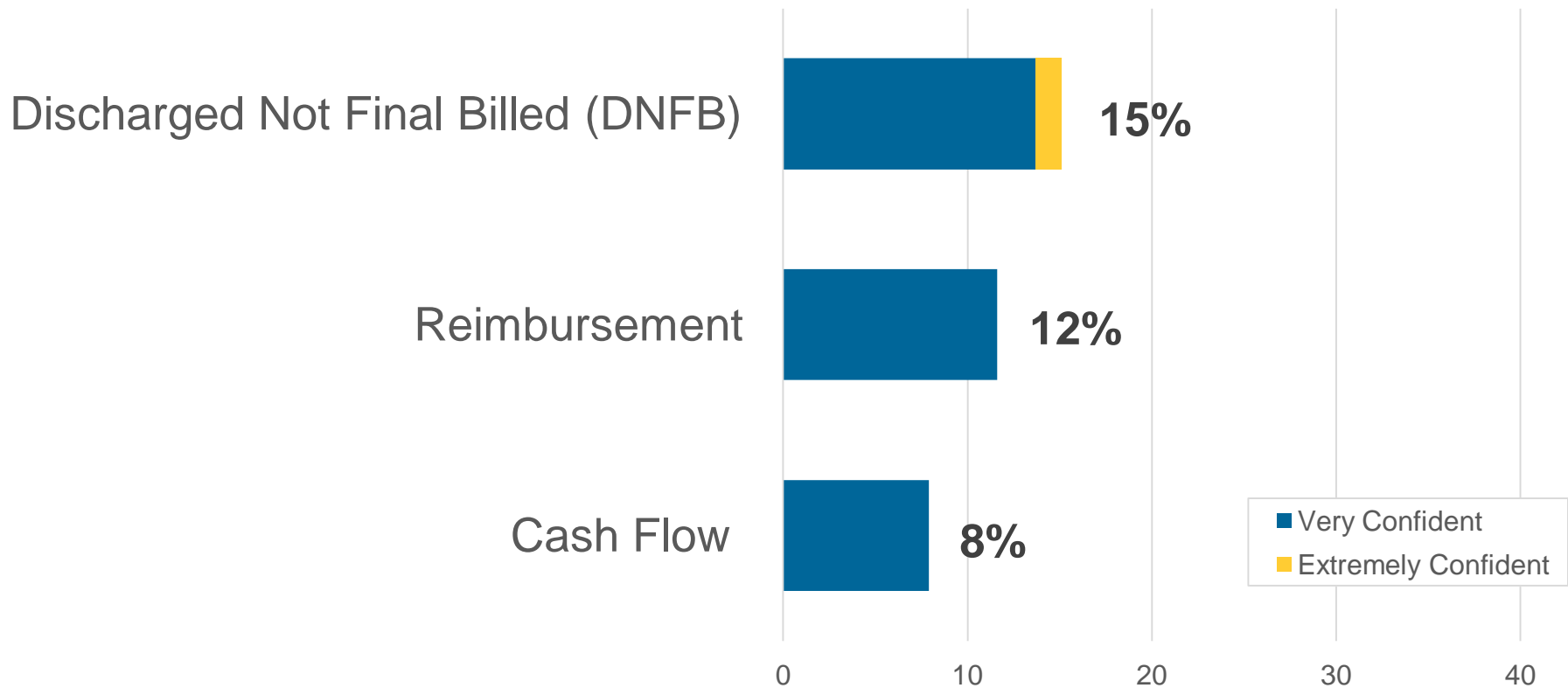
Percentage responding “Over half of contracts analyzed”



Positive correlation between size and percentage of contracts analyzed

Progress: Estimating Financial Impacts of ICD-10

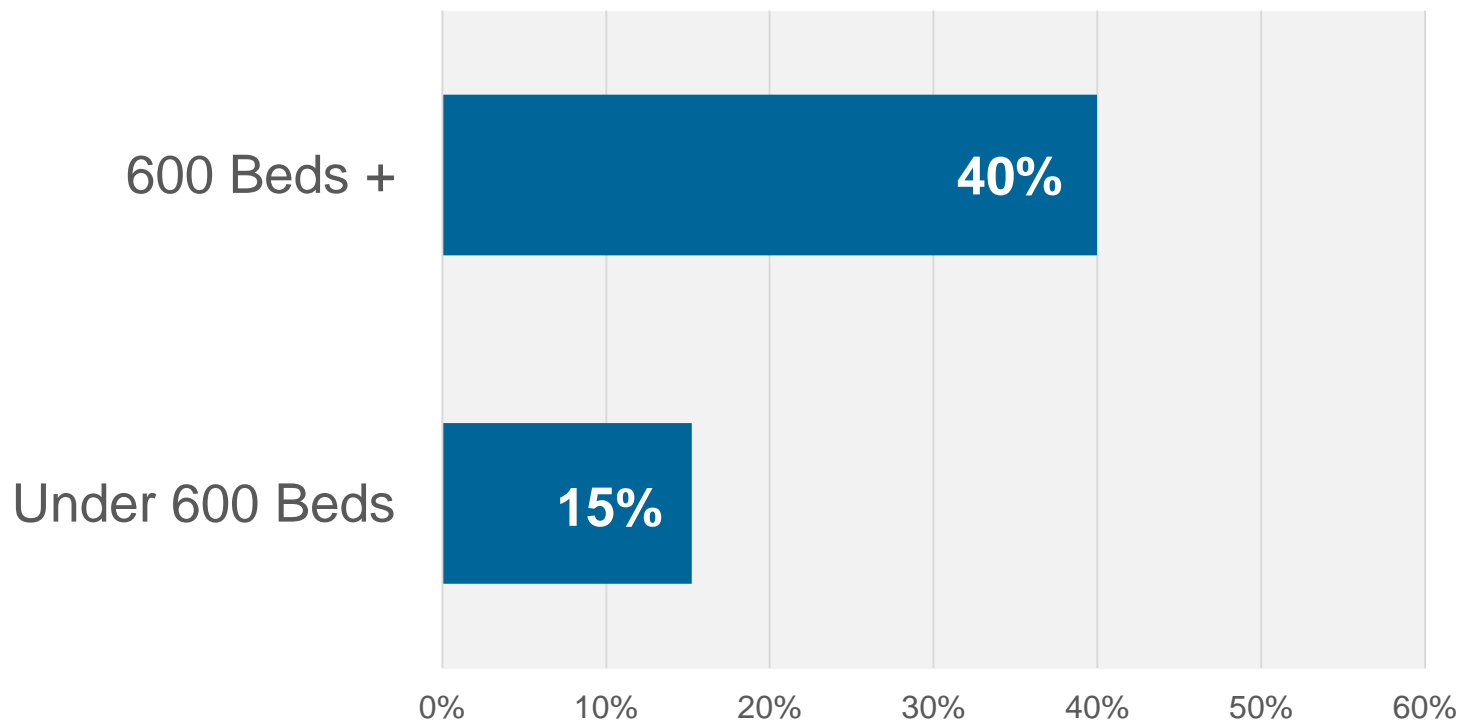
How confident are you that you can estimate the financial impact of ICD-10 on the following?



5 point scale used. Chart shows the top 2 points Very Confident and Extremely Confident.

Progress: Establishing Metrics to Monitor Financial Impact Post-ICD-10

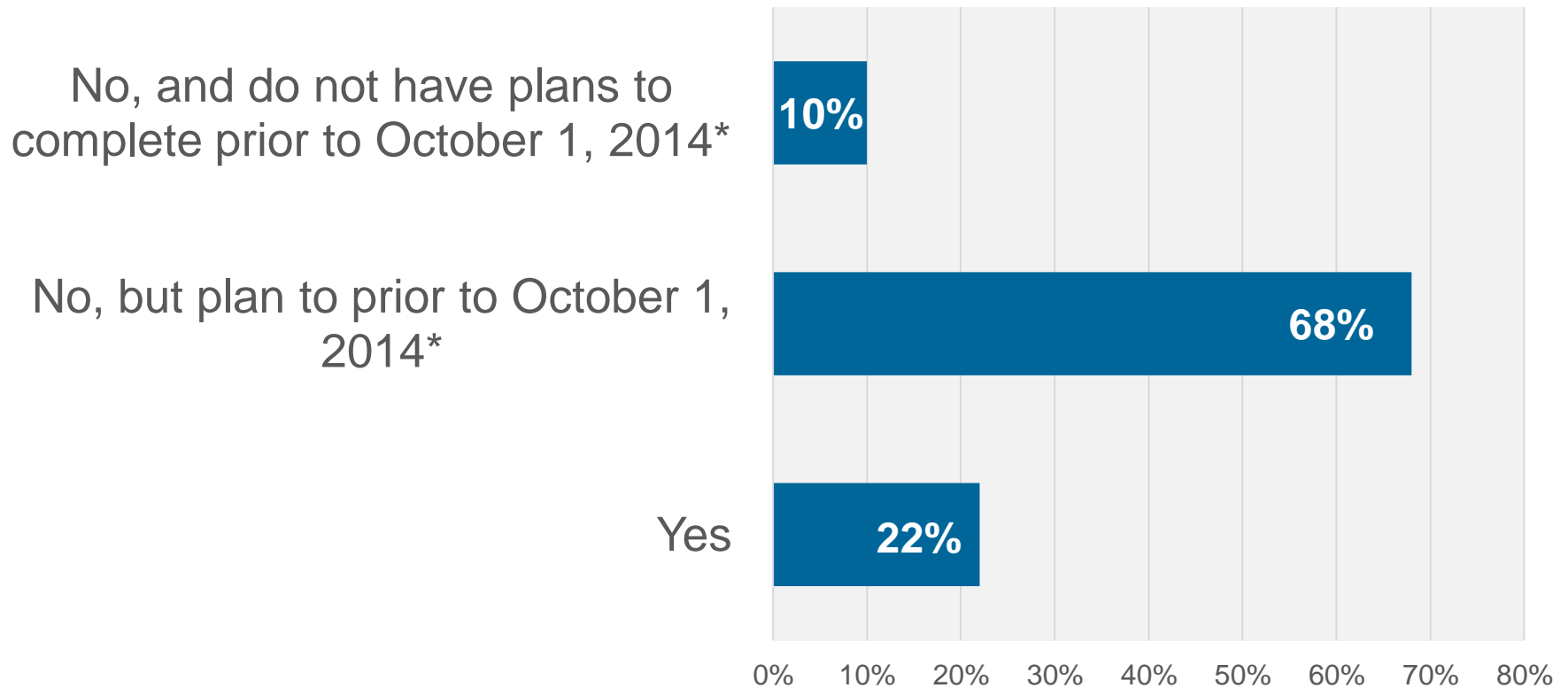
Responding “Yes” to “Established metrics to monitor the financial impact of ICD-10 after the transition”



Those responding “Don’t Know” excluded from the analysis.

Progress: Contingency Planning

Responding to “Developed contingency plans for post -ICD-10 transition to mitigate financial risk (e.g. reduced reimbursement)”

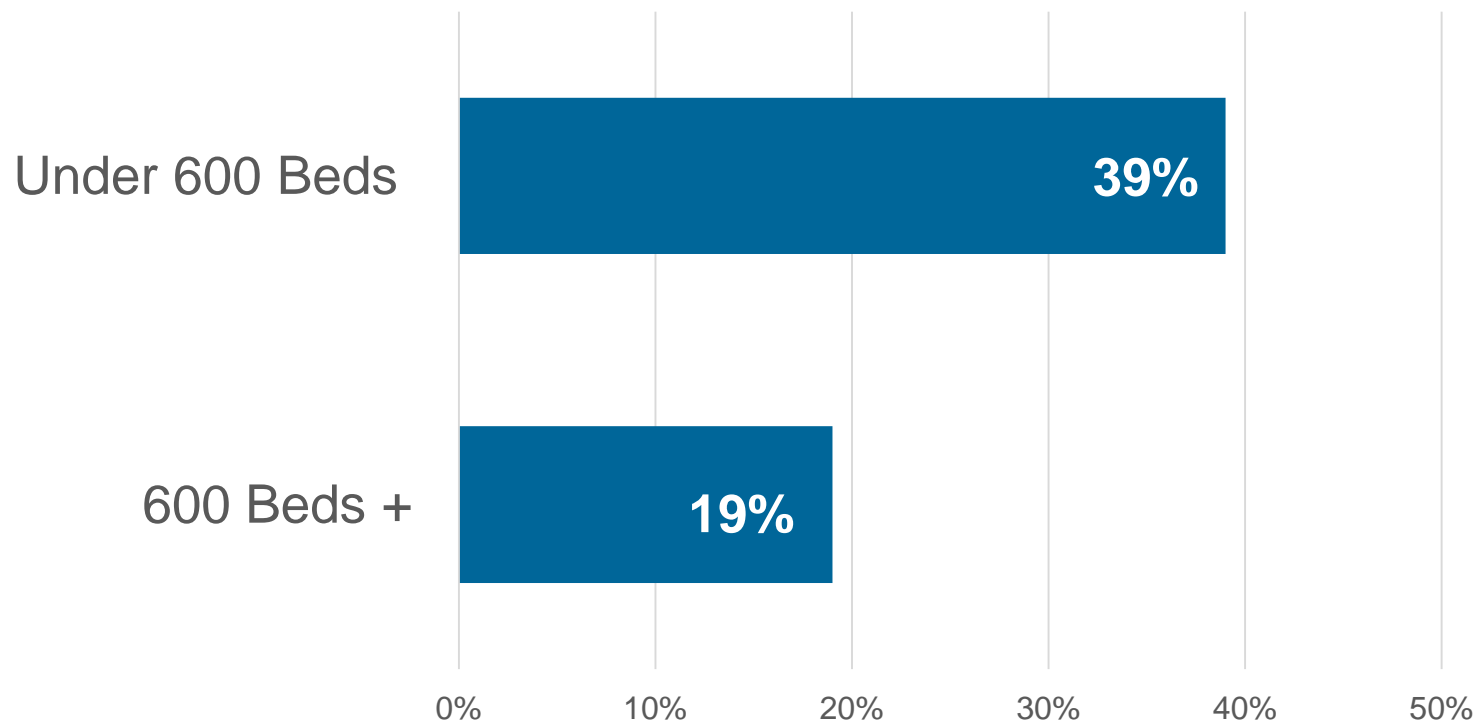


Those responding “Don’t Know” excluded from the analysis.

*Surveying conducted prior to announcement of delay

Progress: Contingency Planning

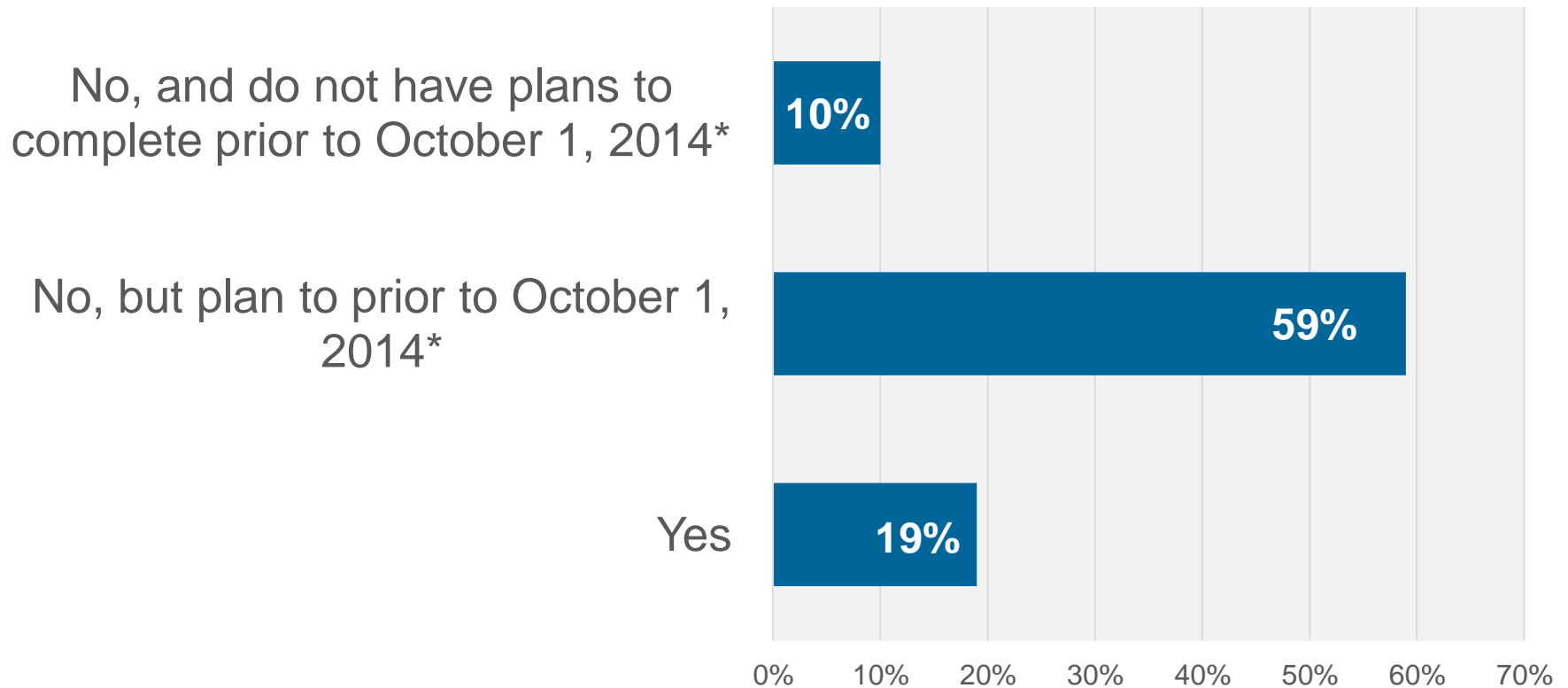
Responding “Yes” to “Developed contingency plans for post -ICD-10 transition to mitigate financial risk (e.g. reduced reimbursement)”



Those responding “Don’t Know” excluded from the analysis.

Progress: Leveraging the Additional Granularity of ICD-10

Responding to “Begun exploring opportunities to strategically leverage the additional granularity of ICD-10 codes post-transition”

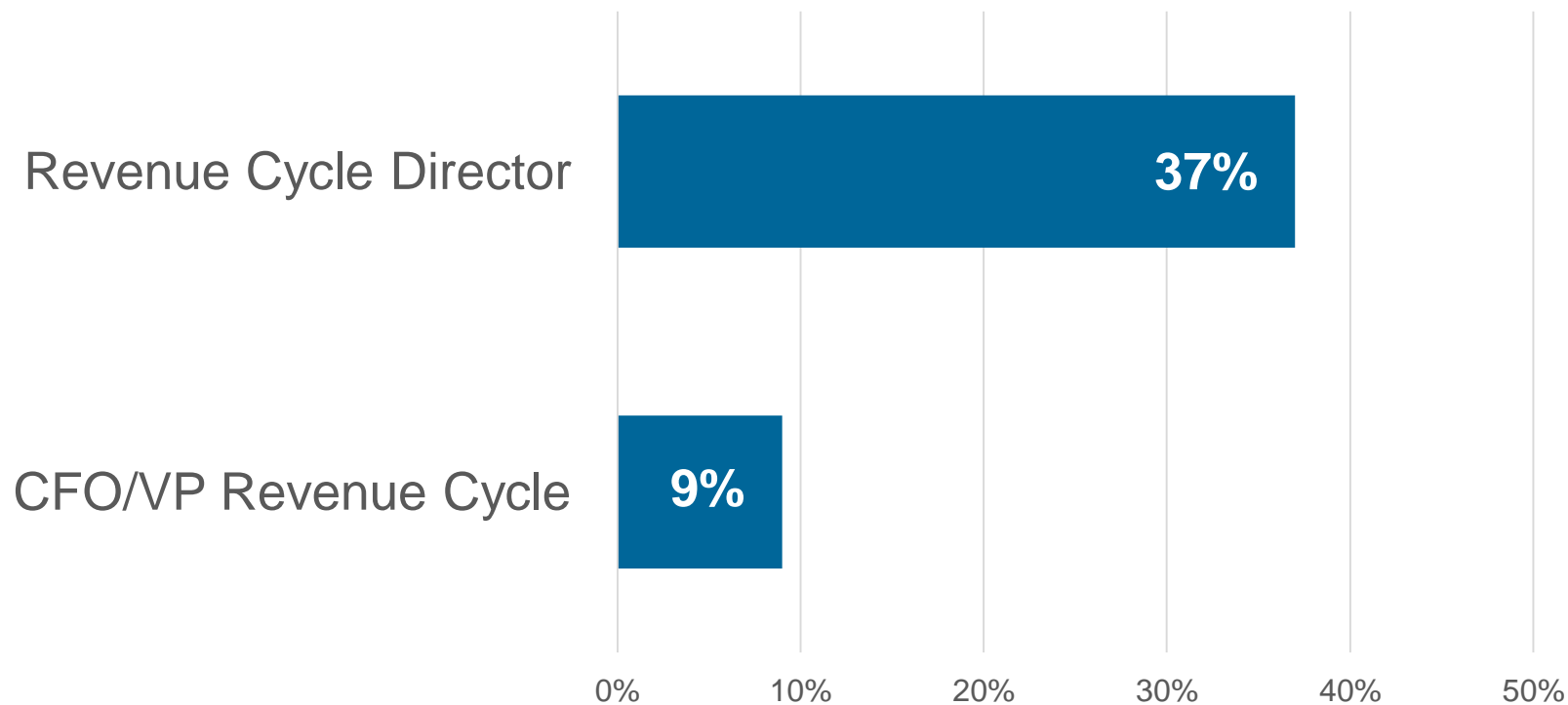


Those responding “Don’t Know” excluded from the analysis.

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Progress: Leveraging the Additional Granularity of ICD-10

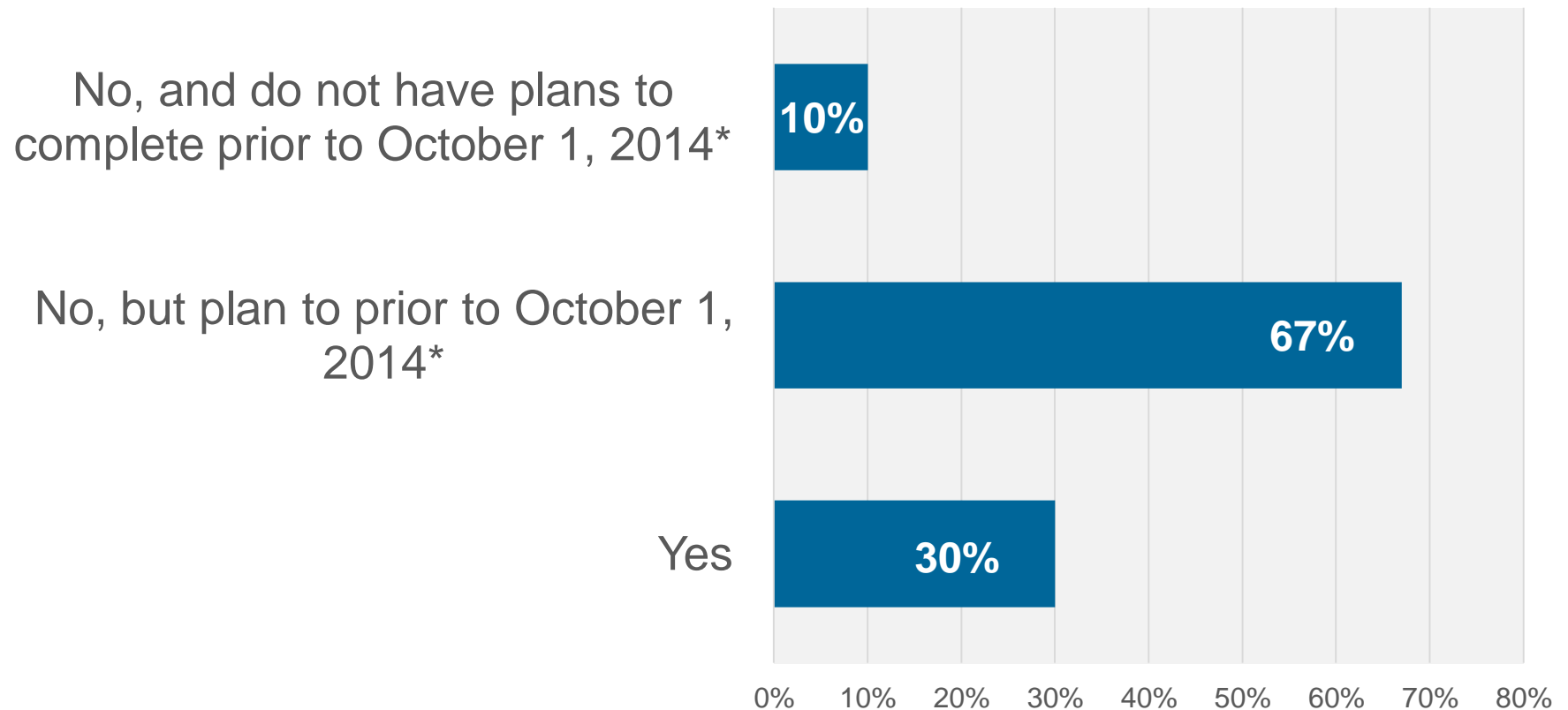
Responding “Yes” to “Begun exploring opportunities to strategically leverage the additional granularity of ICD-10 codes post-transition”



Those responding “Don’t Know” excluded from the analysis.

Progress: Dual Coding

Responding to “Have developed systems for coding in both ICD-9 and ICD-10”

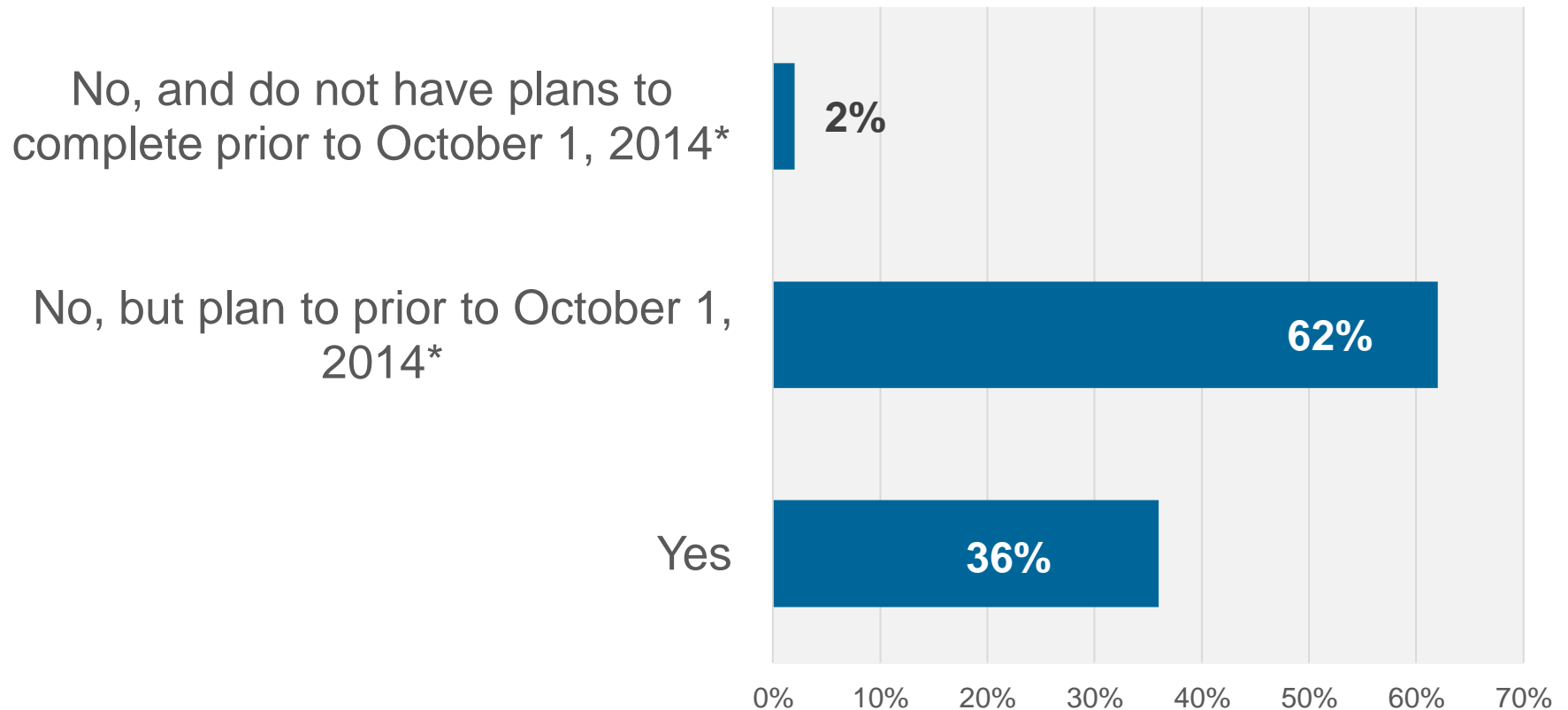


Those responding “Don’t Know” excluded from the analysis.

*Surveying conducted prior to announcement of delay

Progress: Querying Physicians to Aid ICD-10 Assignment

Responding to “Have systems in place to query physicians for the specificity needed to assign ICD-10 codes”

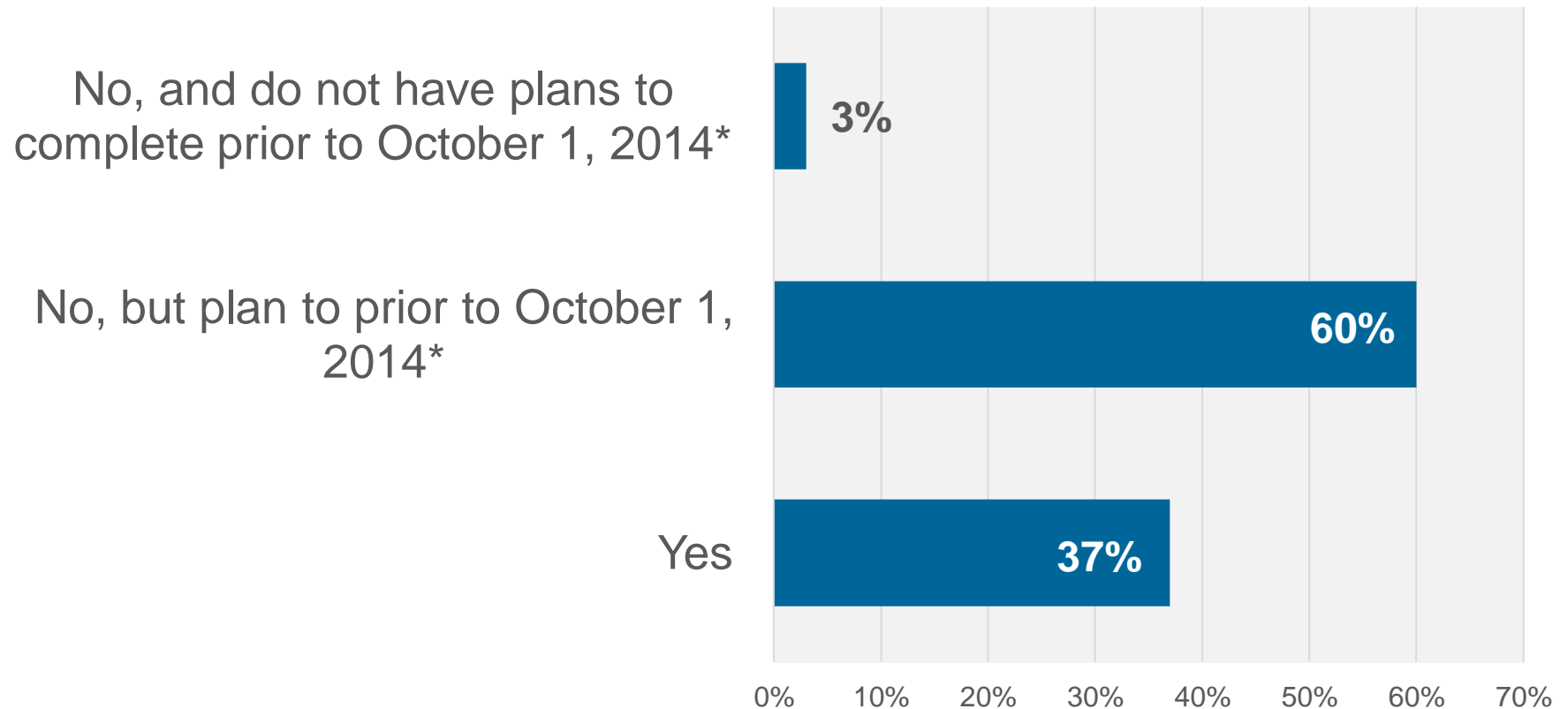


Those responding “Don’t Know” excluded from the analysis.

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Progress: Modifying EHR Templates

Responding to “Have adapted electronic health record templates for ICD-10”

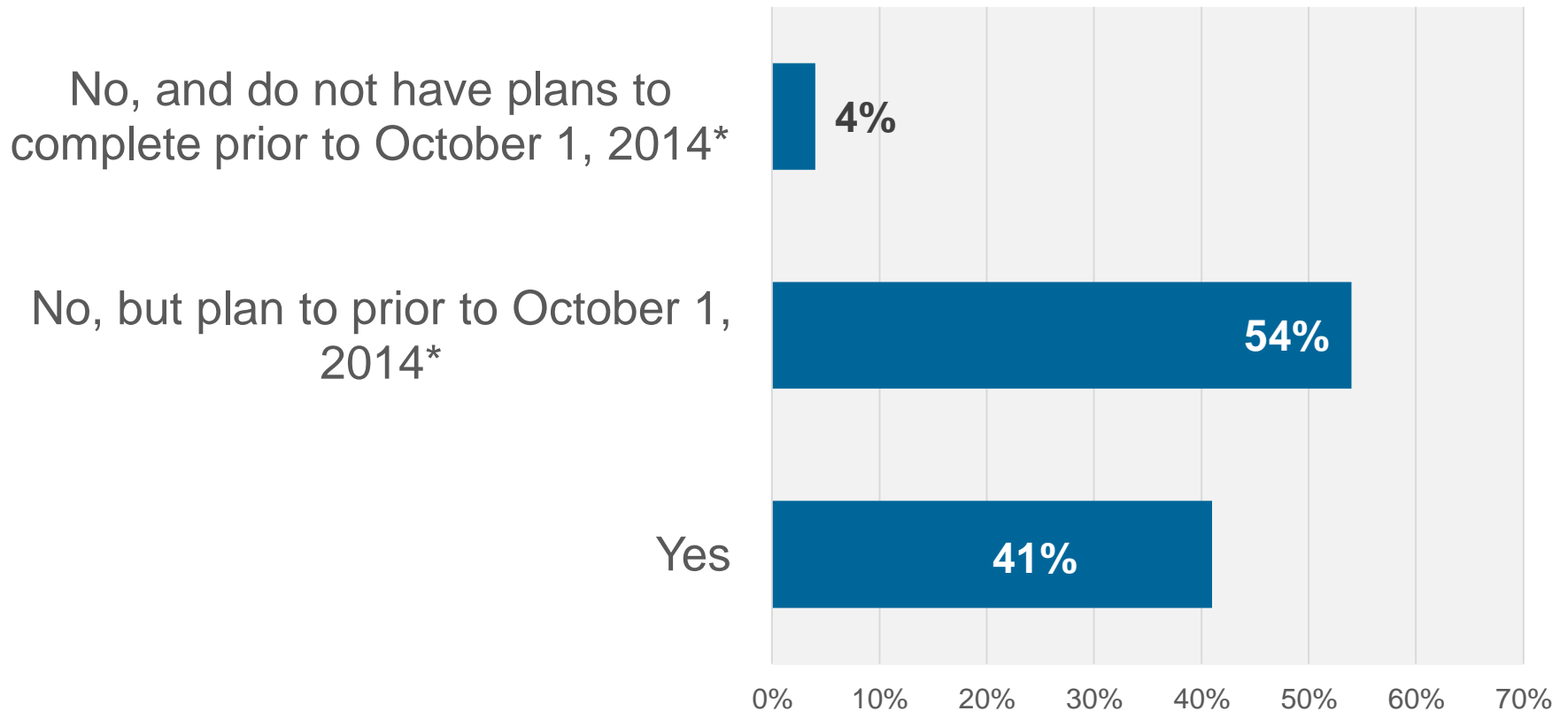


Those responding “Don’t Know” excluded from the analysis.

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Progress: Improving Revenue Cycle Workflow/Corrective Action

Responding to “Have systems in place to improve revenue cycle workflow and/or implement corrective action for the ICD-10 transition”

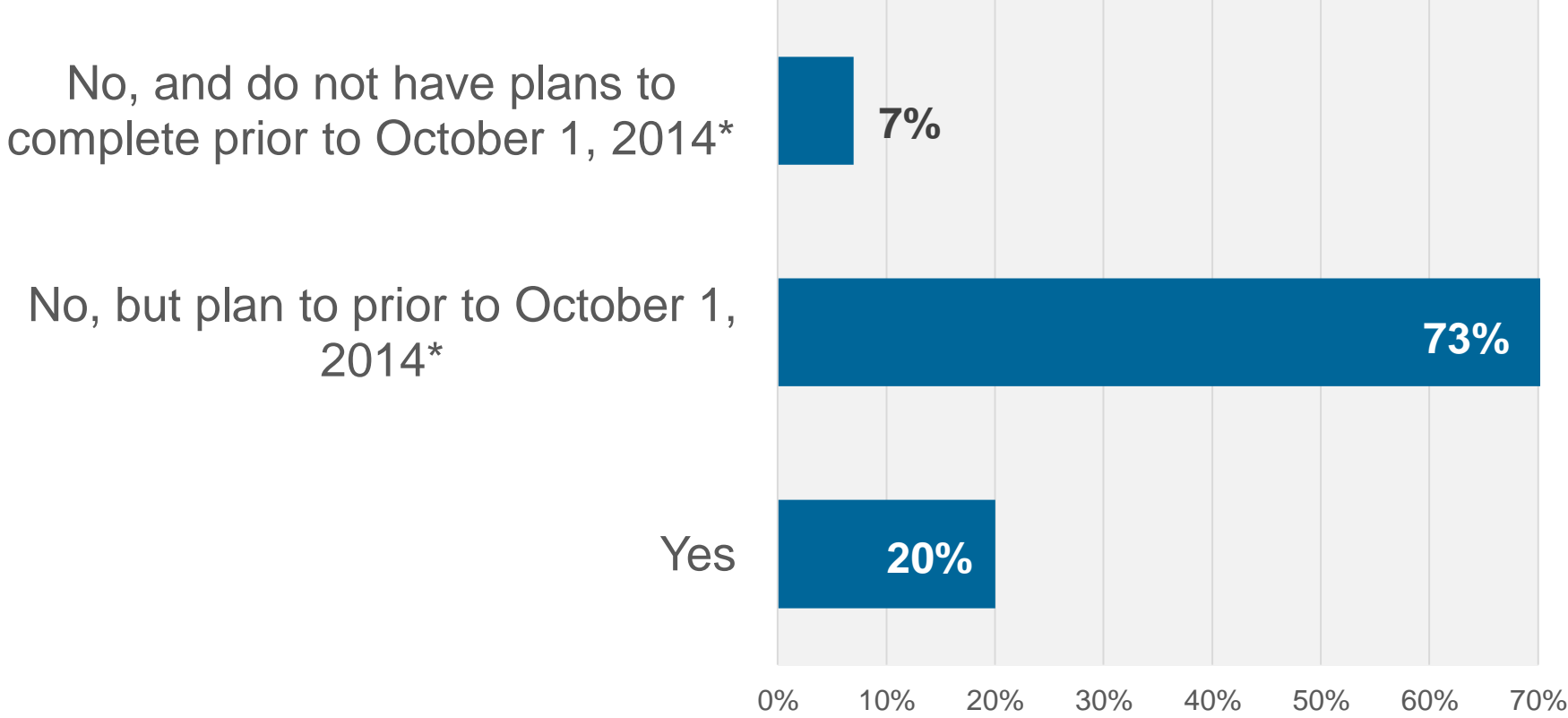


Those responding “Don’t Know” excluded from the analysis.

*Surveying conducted prior to announcement of delay

Progress: Establishing Metrics to Monitor the Impact of ICD-10 Post-Transition

Responding to “Established metrics to monitor the revenue cycle impact of ICD post-transition”

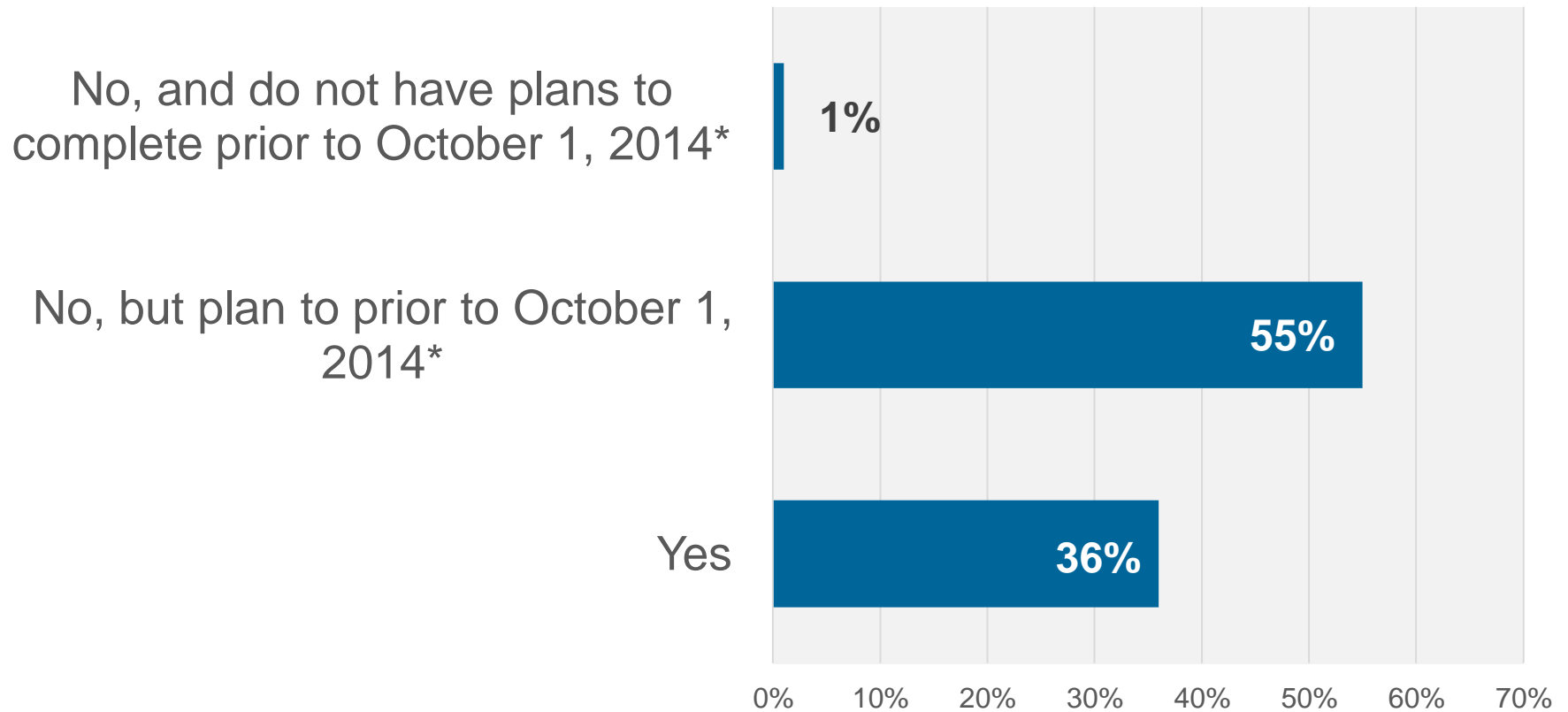


Those responding “Don’t Know” excluded from the analysis.

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Progress: Training at Owned Entities

Responding to “Delivered training to impacted staff at owned entities in support of ICD-10 readiness.”



Those responding “Don’t Know” excluded from the analysis.

*Surveying conducted prior to announcement of delay

Respondent Demographics: Level and Organizational Size

Count of Responses

139

Level	Percentage
CFO/VP Revenue Cycle	57%
Revenue Cycle Director	43%

Size	Percentage
Under 100 Beds	37%
100 through 249 Beds	23%
250 through 299 Beds	25%
600 Beds +	15%

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