

ICD-10 SOLUTIONS

Business
Intelligence
and Clinical
Excellence



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The U.S. Department of Health and Human Services has mandated that health-care organizations begin reporting ICD-10 CM / PCS (International Classification of Diseases, 10th Revision, Clinical Modification / Procedural Coding System) codes beginning October 1, 2013. The transition to ICD-10 does not just impact the coding department — it will affect numerous other functions, systems, and processes throughout the organization, including physician documentation, information technology, reporting, forms, work flows, 3rd party payer contracts, policies, procedures, and more. Given the magnitude of the impact, organizations must begin preparing for ICD-10 now to ensure a successful transition.

In a phased approach, Novia will partner with your organization to provide project management support and identify, design, implement, and monitor all of the changes required prior to the ICD-10 transition. The Novia team includes a seasoned project manager that will partner with your organization's designated project leadership to provide overall engagement planning and oversight. Specialists with an average of 25 years of experience will perform the assessment, design, and implementation activities. They include information systems professionals, revenue cycle experts, credentialed HIM professionals (i.e. RHIA, CCS, CPC), and clinicians (i.e. MD, RN and CDS).

[Additional Services >>](#)

BENEFITS OF OUR ICD-10 CONSULTING SERVICES

We will work with you to develop and implement strategies and tools that ensure:

- Compliance with the October 1, 2013, transition date
- Improved clinical documentation
- Improved coding
- Optimal reimbursement
- Improved data quality
- Optimal staff productivity
- Effectively managed implementation costs
- Coder and other staff retention
- Optimal physician engagement

OUR APPROACH

We utilize a multi-phased approach in our consulting which is tailored to the level of support you need. These phases are as follows.

- Phase 1: Project Planning and Readiness Assessment – Establish the framework and infrastructure needed to successfully manage ICD-10 assessment and implementation activities and perform the readiness assessment
- Phase 2: Go-live Preparation – Design and implement changes in preparation for the transition to ICD-10
- Phase 3: Go-live and Post-Implementation Support – Ensure successful and sustainable ICD-10 implementation on 10/1/2013



Assessment Planning and Implementation

Phase One – Project Planning and Readiness Assessment:

- Establish the project management infrastructure including steering committee, project team, work plans, budget, and communication plan
- Complete an inventory of all information technology, reporting, forms, work flows, 3rd party payer contracts, policies and procedures, etc., that will be impacted by ICD-10
- Determine changes that need to be made for each impacted area
- Assess the impact of ICD-10 on clinical documentation and coding
- Assess the impact of ICD-10 on overall coder / clinical documentation specialist (CDS) productivity
- Evaluate the need for computer-assisted coding (CAC) tools / technology
- Develop a plan for dual code (i.e. ICD-9 and ICD-10) reporting
- Develop a training plan to address all impacted areas
- Deliver a summary of findings and recommendations along with detailed initiative work plans and budgets

Phase Two – Go-Live Preparation:

- Facilitate the design, build, and testing of system and business process modifications
- Monitor vendor readiness
- Develop 3rd party payer contract changes
- Design and deliver training to physicians, coders, and all other impacted areas
- Begin "parallel processing" of coding
- Go live with changes

Phase Three – Go-Live and Post-Implementation Support:

- Perform post-implementation monitoring of information technology, reporting, reimbursement, case mix, denials / rejections, clinical documentation quality, coding quality, and coder / CDS productivity
- Based on findings, develop issues logs and action plans to address, provide follow-up reinforcement and training, and modify impacted areas as needed