Testing and ICD-10

Dennis Winkler, Director II, Technical Program Management
Blue Cross Blue Shield of Michigan
Testing is critical

• We all know that ICD-10 testing is critical for success
• Testing gives us an opportunity to understand what will happen once ICD-10 is implemented
• This is important because it helps us identify possible issues in advance

<table>
<thead>
<tr>
<th>Issue</th>
<th>Result</th>
</tr>
</thead>
<tbody>
<tr>
<td>Non-compliant code sent</td>
<td>Claim rejects</td>
</tr>
<tr>
<td>Compliant, but inappropriate code sent</td>
<td>Claim process incorrectly, benefits applied incorrectly</td>
</tr>
<tr>
<td>Claim processed incorrectly</td>
<td>Possible incorrect payments or benefit application</td>
</tr>
</tbody>
</table>
Different concepts in testing

• There are several ICD-10 testing pilots underway

• These efforts focus on traditional end-to-end testing using pre-defined medical scenarios as inputs

• BCBSM is participating in these pilots and supports the use of medical scenarios to test ICD-10

• However, BCBSM believes there is a much more cost effective approach to testing ICD-10 with a large population of providers (content based testing) than with full end-to-end testing
The testing issue

• Traditional testing with health care providers is often:
  • Difficult to implement
  • Expensive
  • Limited in results

• We believe that testing for ICD-10 must be:
  • Accessible to all providers
  • Relatively easy to understand and execute
  • Cost-effective

• But most of all, it has to give us information we can use in the transition

• That’s what we feel content-based testing accomplishes
At BCBSM, we will use Medical Scenario Testing for ICD-10 for professional claims

Give physicians pre-defined clinically based medical scenarios and have them determine the ICD-10 codes they would use on the claim ...then let them know the effects of their selection

BCBSM would still run its claims adjudication process but would be transparent and minimally invasive to participating providers
At BCBSM, we will use agreed to medical records for ICD-10 for facility claims

Facilities locate agreed to medical records and determine/enter the ICD-10 codes they would use on the claim ...then let them know the effects of their selection

BCBSM would still run the front end of its claims adjudication process through the DRG determination
Why we chose content based ICD-10 testing

Benefits to the approach:

• Provides examples of actual data that will come in on and after the compliance date
• Assists providers in determining if their clinical documentation supports ICD 10 coding
• Easier for the providers to participate than with traditional testing
• Increases the possibility of provider engagement
• Properly defined medical scenarios should stand the test of time
• Avoids risk associated with using PHI during testing
• Minimizes resources required for provider/payer testing
But it has its challenges

Challenges to the approach:

- Scenario development is resource intensive
- Scenarios must be clinically ‘air tight’
- Defining the scenario ‘universe’ must be managed
- Not an end-to-end test
- Does not test customized clearinghouse edits (when applicable)
**Summary**

- BCBSM is fully supportive of testing ICD-10 with providers
  - Full end-to-end testing where it makes sense
  - Content based medical scenario testing for the masses

- The testing approach is not mandatory and does not imply any kind of ICD-10 ‘certification’

- Medical scenarios are not ICD-10 centric and therefore could and should be reused on future initiatives

- We are piloting content-based testing with Providers now

- We believe this type of testing will:
  - Give providers a chance to evaluate their ability to submit codes *and* to understand what is involved with the ICD-10 transition
  - Give providers a chance to see what is being submitted and prepare for the impacts
Requests for help

• Part of our ability to assess the impacts lies with having an ICD-10-based version of the Hierarchical Condition Categories (HCCs)

• If we could identify when the ICD-10 HCCs would be available, it would help our preparation efforts

• Also, many groups around the country are creating medical scenarios for ICD-10.

• Given their potential for broad use within ICD-10 and future reuse, a national repository of medical scenarios could be extremely beneficial to the industry