September 26, 2012

ICD-10 Industry Readiness Assessment

Background

The questions that follow are designed to gauge the health care industry's awareness of and preparation for the transition to ICD-10. The survey is being conducted for the Centers for Medicare & Medicaid Services (CMS) and should not take longer than 10 minutes. Your participation is voluntary and your responses are confidential; only de-identified, aggregated data will be provided to CMS. This information will be used to inform outreach and education efforts to help health care providers, payers, software vendors and clearinghouses prepare for the coming transitions.

Please select the term below that best describes your organization [Please select one response]:

1. Provider practice, small (10 or fewer physicians)
2. Provider practice, large (11 or more physicians)
3. Hospital, small (99 or fewer beds)
4. Hospital, large (100 or more beds)
5. Payer (private)
6. Payer (public, e.g., Medicaid, TRICARE)
7. Other insurer (e.g., property and casualty)
8. Software vendor
9. Clearinghouse
10. Third-party biller
11. Third -party administrator
12. Other (specify)

[IF Q1=1-7, 9-11] Which of the following statements **best** describes your **responsibility** in your organization's ICD-10 transition? [Please select one response.]

☐ I am the most senior person responsible for preparing the company for the transition

☐ I am not the most senior person, but am involved in the transition and I have significant input or influence into the decisions regarding the systems and/or procedures that will be implemented

☐ I make recommendations regarding the systems and procedures that will be implemented, but am not a decision-maker [TERMINATE]

☐ I provide support (and work with the systems used) for reporting patient information for billing and reimbursement, but have no influence over what procedures or systems are implemented [TERMINATE]

☐ None of the above [TERMINATE]

[IF Q1=8] Which of the following statements best describes your role when it comes to marketing the systems/solutions/services you offer or will offer your healthcare clients to assist them in the transition to ICD-10? [Please select one response.]

☐ I am the most senior person in the company responsible for marketing these systems/solutions/services

☐ I am not the most senior person, but I have significant input or influence into the decisions regarding marketing these systems/solutions/services

☐ I make recommendations regarding marketing these systems/solutions/services, but the final marketing decisions are made by someone else   [TERMINATE]

☐ I will implement the marketing or sell these systems/solutions/services, but have no influence over marketing decisions [TERMINATE]

☐ None of the above [TERMINATE]

About the ICD-10 Transition on October 1, 2014

ICD-10 codes must be used on all HIPAA transactions, including outpatient claims with dates of service, and inpatient claims with dates of discharge on and after October 1, 2014.

Otherwise, provider claims and other transactions may be rejected. This could result in delays and may impact reimbursements, so it is important to prepare now for the changeover to ICD-10 codes.

This change **does not affect CPT coding** for outpatient procedures.

***Directions*:**
Please read About the ICD-10 Transition above before answering the following questions.

Did you know about the ICD-10 transition before reading the information above?
- ☐ Yes
- ☐ No
- ☐ Not sure

Did you know about the October 1, 2014, deadline for the ICD-10 transition?
- ☐ Yes
- ☐ No
- ☐ Not sure

Is your organization taking action to prepare for ICD-10?
- ☐ Yes
- ☐ No
- ☐ Not sure

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[Please indicate when you completed or plan to complete the following activities to prepare for the ICD-10 transition.][1]

Activity	Completed before Jan 2013	Jan – Mar 2013	Apr-Jun 2013	Jul-Sept 2013	Oct-Dec 2013	Jan-Mar 2014	Apr-Jun2014	Jul-Sept 2014	Oct 1, 2014	Not planning for this activity	Don't know
Conduct impact analysis (e.g., identify everywhere you use ICD codes for potential changes to work flow)											
Develop ICD-10 implementation plan											
Talk with your business trading partners (providers, payers, vendors) about transition plans											
Secure budget (time and costs related to implementation)											
Begin internal testing (e.g., test changes in software, practice within your organization)											
Complete internal testing											
Begin external testing (e.g., between providers, payers, billing services, clearinghouses)											
Complete external testing (i.e., complete testing of processes from beginning to end, including claims and other inbound and outbound transactions)											
Conduct staff training											
SOFTWARE/HEALTH IT DEVELOPERS/VENDORS											
System development											
Product rollout											
Conduct customer education											
Live production operations using ICD-10											

Do you think your organization will be ICD-10 compliant by the October 1, 2014, deadline?

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[1] To minimize burden to respondents, CMS requests permission to delete timeframes from this table as they become outdated (e.g., if the survey is fielded in April 2013, CMS would like to delete the "Jan-Mar 2013" response option and replace the "Completed before Jan 2013" response option with "Completed before Apr 2013").

☐   Yes [Terminate survey]
☐   No
☐   Not sure

Ask only among those who indicate "no" or "not sure" to question above:

What are the obstacles and challenges to reaching compliance by October 1, 2014? [Please select all that apply]

☐   Impact analysis not conducted
☐   Inadequate budget/funding
☐   Lack of incentive
☐   Lack of time and/or staff
☐   Internal testing not complete
☐   External testing not complete
☐   Lack of coordination with vendor(s)
☐   Other health care transition(s) taking priority (i.e., Meaningful Use)
☐   Running dual systems to accommodate ICD-9 and ICD-10 codes simultaneously
☐   Other [please specify]