

ICD-10: Don't Get Lost in Translation

The massive and mandatory transition from ICD-9 to ICD-10 on October 1, 2015 may be the biggest challenge physicians face this year.



How much time—and money—do you have to lose per patient while translating to the correct diagnostic code? ICD-10 codes will increase the number of codes dramatically; finding the correct code will be like searching for a needle in a haystack.



Generating the revenue you deserve for the patients you treat depends on the accuracy of medical coding and billing.



As precision in coding increases, so may profits. However, errors in billing can result in denied payments.



With the introduction of the 10th revision of the International Classification of Diseases (ICD), a medical classification list by the World Health Organization (WHO), diagnostic codes will rise from 13,000 to more than 141,000 — a nearly **425%** increase.

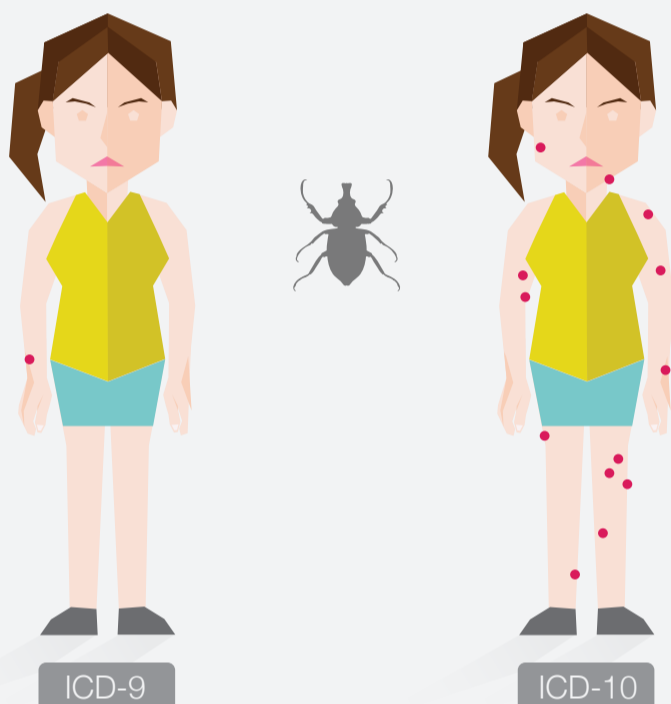
Let's look at an example

ICD-9 has one code for insect bite. ICD-10 requires specificity in diagnosis, increasing the code selection for insect bites to 180.

Complexity of the codes will also increase. ICD-9 codes are largely numeric and contain three to five digits. ICD-10 codes are alphanumeric and contain three to seven digits.

ICD-9: 8 3 1 . 4 1
 ICD-10: S 5 2 . 5 3 1 A

Only 5 percent of ICD-9 codes have equivalent ICD-10 codes.



“Because there are not 100 percent exact matches between ICD-9 and ICD-10, crosswalking [mapping] is a complex activity that in many cases requires additional review, which emphasizes the reason that coding should be done directly in ICD-10.”*

“In an extreme example, [for] the ICD-9-CM code 733.82 (other disorders of bone and cartilage, nonunion of fracture) there are 2,530 corresponding ICD-10-CM codes due to the degree of specificity required in ICD-10.”**

Translating the code from a list of **141,000 codes** isn't a time-saving or cost-effective option. For efficiency, codes need to generate automatically and intuitively right along with your exam notes.

•EMA

Modernizing Medicine's Electronic Medical Assistant® (EMA™) is a native approach to ICD-10 that's so dramatically different and advanced that it's patent pending. Using structured data, ICD-10 codes are dynamically calculated and automated on demand, ultimately saving the physician and coder time.

While other systems with templates or unstructured data could put the time-consuming burden of code determination and verification on the office staff and physician, EMA requires **no**:



general equivalence mapping (GEM)



translation tools



added conversion software



long lists of codes to sort through

When October 1, 2015 rolls around, choose a system that does all of the coding and billing legwork for you. One that could eliminate translations and human error. Choose EMA. Just tap, touch and you're done. It's that simple.

See how easy it is. Request a demo >