

Figure 5

Quotes on Education and Training in Preparation for ICD-10-CM/PCS

“I have not done anything except read an article or two about how codes are going to increase in ICD-10. I am relying on my billing service to do that. With respect to the hospital, they have not really given us any formal training for ICD-10 at all.”

“Hospital coding is totally depending on ICD-9 and as they convert to 10, they will do the training (for inpatient). But that is inpatient. What about outpatient? The hospital will train you as they have a vested interest. For outpatient, I don’t know.”

“Hiring an HIM [professional] full-time to help with the coding systems, educate billers and coders on how to maximize reimbursement (like you downcode this).”

“An HIM professional could help with the EMR conversion timeline. Yes, anything to support my practice and make it efficient, to comply and to maximize reimbursement; feed me information about that.”

“I have a small practice; I am not using an EMR and am still writing notes. I would love to have information on the new codes and how that it is going to affect my patients’ insurance; need a cheat sheet on how to translate the two different codes (crosswalk).”

“HIM could be involved in developing training materials that are palatable for physicians, who typically don’t want to spend very much time on training for things like this. It’s hard to engage them so finding a set of materials that they will respond to positively would be valuable.”

“For OB, training comes from professional organizations about documentation requirements for each individual OB code.”

“For surgeons, nothing came from formal groups; most of the information regarding ICD-10 preparation and training would come from the hospital side as they have the best interest in training the physicians mainly for hospital utilization and reimbursement purposes.”