

Will you be ready?

Visit the ICD-10 page in the Standards and Requirements section of our Provider website at bcbsok.com/provider for information on critical steps, such as testing with BCBSOK. You'll also find answers to frequently asked questions and other tools and related resources.

Learn more!

For additional help with your office transition to ICD-10, go to AAPC.com/ICD-10/



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Physicians

• Documentation:

The need for specificity dramatically increases by requiring laterality, stages of healing, weeks in pregnancy, episodes of care, and much more.

Code Training:
Codes increase from 17,000 to 140,000. Physicians must be trained.

Nurses

• Forms:

Every order must be revised or recreated.

• Documentation:

Must use increased specificity.

Prior Authorizations:

Policies may change, requiring training and updates.

Lab

Documentation:

Must use increased specificity.

• Reporting:

Health plans will have new requirements for the ordering and reporting of services.

Clinical Area

• Patient Coverage:

Health plan policies, coverage limitations, and new ABN¹ forms are likely.

• Superbills:

Revisions required and paper superbills may be impossible.

• ABNs:

Health plans will revise all policies linked to LCD²s or NCD³s, etc., ABN forms must be reformatted and patients will require education.

Managers

New Policies and Procedures:

Any policy or procedure associated with a diagnosis code, disease management, tracking, or PQRI⁴ must be revised.

Vendor and Payer Contracts:
All contracts must be evaluated

Budgets:

and updated.

Changes to software, training, new contracts, new paperwork will have to be paid for.

• Training Plan:

Everyone in the practice will need training on the changes.

Front Desk

• HIPAA:

Privacy policies must be revised and patients will need to sign the new forms.

• Systems:

Updates to systems are likely required and may impact patient encounters.

Billing

• Policies and Procedures:

All payer reimbursement policies may be revised.

Training:

Billing department must be trained on new policies and procedures and the ICD-10-CM code set.

Coding

Code Set:

Codes will increase from 17,000 to 140,000. As a result, code books and styles will completely change.

Clinical Knowledge:

More detailed knowledge of anatomy and medical terminology will be required with increased specificity and more codes.

Concurrent Use:

Coders may need to use ICD-9-CM and ICD-10-CM concurrently for a period of time until all claims are resolved.

- Advance Beneficiary Notice of Non-coverage
- 2. Local Coverage Determination
- 3. National Coverage Determination
- 4. Physician Quality Reporting Initiative

