AGENDA

Virtual Data Summit: ICD-10 and Beyond

August 24-25, 2015

MONDAY, August 24, 2015

Time	Topics
10–10:15 a.m.	**Welcome/Opening Remarks** **Cassi L. Birnbaum, RHIA, FAHIMA, MS, CPHQ, AHIMA Board President**
10:15–11:45 a.m.	**Positive Productivity Predictions** This session will discuss the concerns about coder productivity crashing and burning upon ICD-10's implementation. A recent study conducted of 1,000+ records will cast a ray of sunshine for the future of coding productivity. And, as we can never predict what Rose will say, attend this session to hear any other tidbits she may share. **Rose T. Dunn, MBA, RHIA, CPA, CHPS, FACHE, FAHIMA, Chief Operating Officer, First Class Solutions, Inc.**
11:45–12:15 p.m.	**Lunch Break**
12:15–1:30 p.m.	**SNOMED CT – Current and Future Use** This session will address the current and proposed future role of SNOMED CT in healthcare. The World Health Organization (WHO) and the International Health Terminology Standards Development Organization (IHTSDO) have entered into a cooperative agreement that will allow some aspects of SNOMED CT to be incorporated into ICD-11. Inherent differences between the two code sets have created challenges with this effort that are being addressed by the WHO and other parties through an international effort. For this and other reasons, ICD-11 will not likely be ready for implementation in the U.S. for 7 or more years. In parallel, the level of adoption and plans for future adoption of SNOMED CT by health information technology stakeholders has continued to progress. Health information management professionals will benefit from being familiar with the current and projected uses of SNOMED CT. **Michael Stearns, CHTS-CP, CHTS-PW, MD, CPC, CFPC, Apollo HIT, LLC**
1:30–2:00 p.m.	**Virtual Networking Break**
2:00–3:00 pm	**TRACK 1 – Data Analysis** **Predictive Model for 30 Day Readmissions in Cancer Patients** This session will present information about the process		**TRACK 3 – Quality Measures** **Data Quality and Validation and Its Importance in Quality Measures** This session will discuss the

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	used to compile data elements and select a model for predicting cancer patients that are most at risk to experience an unplanned readmission using a Cancer Readmission Risk Model (CRRM). The planning and implementation of study including aggregation of the required data elements will be discussed. The challenges encountered during the development of the model will be presented along with the results. This session will also demonstrate the use of EHR data in predicting 30 day unplanned readmissions for cancer patients. **Susan E. White, PhD, RHIA, CHDA, HIMS Division, The Ohio State University - School of Health and Rehabilitation Sciences, Columbus, OH and Kristen Johnson, MHA, OSU-CCC James Cancer Hospital, Columbus, OH**		various methodologies and the types of data that are used, as well the potential failure points and potentials for error or misrepresentation of quality outcomes. Strategies for improvement, including types of concurrent and retrospective review will also be discussed. **Kristen Geissler, MS, PT, CPHQ, MBA, Berkeley Research Group, Cockeysville, MD**
3:00–4:00 p.m.	**TRACK 1 – Data Analysis** **Using Data Analytics to Support Coding Operations** Presentation will share information about inpatient facility coding operations at UMHS including CDI, coding, secondary quality review processes, ICD-10 training and practice coding processes, and CAC workflows. A brief overview of the types of data HIM collects about its operations that are used to produce the various tools and analyses will be provided. The presentation will show regression models, spreadsheets, and executive dashboards. Examples of how data analytics assisted HIM in making decisions about coding	**TRACK 2 – Secondary Data Use** **Uncaptured Diabetes Data, until ICD-10** This presentation will discuss a research study on persons with Diabetes and how the participants were selected using ICD-9-CM diabetes codes. The process of converting the ICD-9-CM diabetes over to their respective ICD-10-CM code, will be highlighted to discuss the proposal of additional EHR documentation requirements as well as co-occurring ICD-9-CM and manifestation codes for more precise mapping. **Susie Harris, PhD, RHIA, CCS, HSIM, East Carolina**	**TRACK 3 – Quality Measures** **Collaboration to Improve Quality Outcomes Data and Performance Rankings** This presentation will address the challenge of ensuring accurate quality metrics, while addressing increasing pressure for revenue assurance and steps health systems can take to move forward. **Cheryl Manchenton, RN, BSN, CCDS, CPHM Senior Inpatient Consultant/Project Manager, AHIMA Approved ICD-10 Trainer 3M Consulting Services**

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	operations will be provided. **Heather Wilson, MPH, RHIA, Health Information Management, University of Michigan Health System, Ann Arbor, MI and Paul Durance, Ph.D., Finance, University of Michigan Health System, Ann Arbor, MI**	**University, Greenville, NC and *Ray Hylock, PhD, HSIM, East Carolina University, Greenville, NC**	
4:00–5:00 p.m.	**TRACK 1 –CAC/Technology** **What the Data Is Telling Us about ICD-10: Lessons Learned from ICD-10 Early Adopters** This presentation will share the data and experiences of hospitals and systems that dual coded within a CAC system. The presenters will share how this type of dual coding helped organizations: understand intermediate and advanced training needs; develop and maintain coder proficiencies within ICD-10; identify coding 'hotspots' within their own coding results; measure the growth in proficiency of CAC for ICD-10-CM/PCS; determine documentation strengths and deficiencies; identify potential DRG shifts and their root causes; identify special considerations for evaluating ICD-10-PCS coding success. **Brian Potter, PhD, Optum360, San Diego, CA and Mark Morsch, M.S., Optum360, San Diego, CA**	**TRACK 2– Secondary Data Use** **Navigating Healthcare Big Data** This session will discuss what big data is, the associated opportunities and risks of big data, its impact on healthcare in the US, as well as how other countries are using it. The history of data and how it led to the creation of ACOs, shift from resource use to quality of care, will also be discussed. **Kelly Canter, RHIT, CCS, Optum360, Roscommon, MI**	**TRACK 3 – Quality Measures** **How Barnabas Health Manages Quality Data to Deliver Better Patient Care and Improve the Bottom Line** In this session, Barnabas Health will reveal the lessons learned along the way towards creating a culture of data integrity and management that drives quality measurement. Topics in the presentation will include: 2015 current state of quality measurement and reporting; importance of data integrity, accuracy; Barnabas Health case study; key learnings and best practices for HIM; and the future state of quality measurement and reporting. **Catherine Gorman-Klug, RN, MSN, CPM, Nuance Communications, Inc., Wall Township, NJ and Deborah Larkin-Carney, RN, MBA, Barnabas Health, West Orange, NJ**

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Tuesday, August 25, 2015

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10:00-11:00 a.m.	**TRACK 1 Technology/Data Analysis** **Semantic Interoperability: Experience in Harmonizing Clinical Data at UPMC** The presentation will detail the heterogeneous nature of the healthcare information originating from various clinical systems within and across organizations. The presenters will detail UPMC's ambitious plans and unique efforts to achieve a semantic interoperability platform, mapping 100% of the discreet clinical entities to a set of standard reference terminologies. The origins, work execution, road map, vision, and values of vocabularies/terminologies across the entire health care continuum, will also be discussed **Ranga Chandra Gudivada, University of Pittsburgh Medical Center, Pittsburgh, PA**	**TRACK 2 – Data Mapping** **Using Data Mapping to Unravel ICD-9-CM and ICD-10-CM/PCS Differences in Quality Measures** The transition from ICD-9-CM to ICD-10-CM/PCS will have an impact upon quality measures including the AHRQ patient quality indicators. This analysis explores differences between the two classification systems using both the forward and backward GEM maps. Attendees will gain a greater understanding of the impact of the transition upon quality measure reporting. **Susan Fenton, PhD, RHIA, FAHIMA, UT School of Biomedical Informatics at Houston, Houston, TX and Kang Hsieh, UT School of Biomedical Informatics, Houston, TX**	**TRACK 3 –Qualtiy** **Looking Ahead to Oct 1: Advance Planning for The Joint Commission, CMS New Quality Reporting Requirements** This session will provide an overview of major quality reporting organizations and requirements. The top five current problematic outpatient and emergency department core measure requirements. The new CMS quality measure requirements that will be announced April 2015 and set to go into effect October 1, 2015, will be reviewed. The new TJC electronic option, its benefits and pitfalls, as well as alternatives, will also be discussed. And Strategies for streamlining information capture and reporting in ICD-9 while transitioning to ICD-10 will also be covered. **Catherine Gorman-Klug, RN, MSN, CPM, Nuance Communications, Inc., Wall Township, NJ**
11:00-12:00 p.m.	**Track 1 Technology/Data Analysis** **State Data Collection - What is Collected? Why is Accuracy Important? How is it Used?** This presentation will discuss the types of data elements collected from hospitals and free standing ambulatory surgery centers by states. Reporting requirements that mandate the types of data to be released to the state, and the release process which applies principles of information governance. As	**TRACK 2 – Data Mapping** **Accurate, Timely ICD-10-PCS Coding & Submission; Getting What You Need from Surgery** This presentation will discuss ICD-10-PCS and the potential challenges in surgical procedure data collection. Highlight strategies for effectively communicating data needs and monitoring data flow between the HIM and Surgical Services department. Explore both strategic initial and ongoing opportunities for timely and accurate surgical procedure code submission	**TRACK 3-Qualtiy** **Three Steps to Building Population Health with Data Analytics** This session explores practical strategies and applications of integrated data analytics that can be employed to help executives drive business collaboration in pursuit of effective population health management. **Tim Lantz, Senior Vice**

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	well as how data is being used by state, federal, public, and private entities, and how these uses will be affected by ICD-10. **Debbie Rickelman, RHIT, Information Center, Wisconsin Hospital Association, Madison, WI**	**Toni Wing, BSN, RN, CNOR, Coratek Perioperative Consulting, Johnson City, TN and Jessica Kovash, CHTS-PW, Coratek Perioperative Consulting, Johnson City, TN**	**President with Sentry Data Systems**
12:00–12:30 p.m.	**Lunch Break**		
1:00–2:00 p.m.	**Understanding Hierarchical Condition Categories (HCCs)** This presentation will provide attendees with an in-depth understanding of Hierarchical Condition Codes (HCCs), including how and why they are employed today, with special emphasis on the use of HCCs to drive value-based care. The session will help attendees answer the question: As the stewards of health information, how can HIM professionals help ensure that the health of a population is accurately reflected and help and reduce overall cost across the continuum of care? **Donna M. Smith, RHIA, Consulting Services, 3M Health Information Systems, Salt Lake City, UT**		
2:00-3:15 p.m.	**Data Quality and Its Importance in Effective Patient Matching** Learn about the importance of data quality, accuracy and completeness in ensuring successful patient matching and why patient matching is so critical to interoperability, HIE and optimizing the quality of care for our patients. **Beth Haenke Just, RHIA, MBA, FAHIMA, CEO Just Associates**		

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