Section 1: Introduction

This ICD-10 Regional Office Toolkit is an all-inclusive guide to help CMS’ Regional Offices in their outreach efforts around ICD-10. The toolkit includes ICD-10 materials and resources available from CMS as well as tips for using social media and stakeholder outreach to communicate to target audiences about ICD-10.

Background on ICD-10
As you know, the ICD-9 code sets that are currently used to report health care diagnoses and inpatient procedures must now be replaced with ICD-10 code sets. Mandated by law, this change will take place on October 1, 2015. Note: the compliance date was previously set for October 1, 2013. However, CMS issued a final rule on September 5, 2012, delaying the compliance date by one year to October 1, 2014. In March 2014, Congress delayed the ICD-10 transition once again. In July 2014, CMS set the compliance date for October 1, 2015.

Because ICD-10 will affect diagnosis and inpatient procedure coding for everyone covered by the Health Insurance Portability and Accountability Act (HIPAA), it is important that we educate those affected by the ICD-10 transition.

Our Goals
CMS’ main goal is to ensure that every affected entity successfully transitions to ICD-10 by October 1, 2015. To do this, we create national awareness, engage key partners and stakeholders, and provide targeted educational materials whenever possible. We want to make sure providers, payers, and vendors are aware that the ICD-10 transition is occurring and that they should be preparing now. We also want to emphasize the October 1, 2015, compliance date as well as the resources available from CMS to help them understand and prepare for the ICD-10 transition. Finally, we want to urge providers to take steps immediately to get ready for the transition.

How You Can Help
As Regional Offices of CMS, you are our key partners in helping to provide information about the ICD-10 transition. Communicating about ICD-10 with hard-to-reach populations, such as providers in small and rural practices, is a top priority for CMS. By working together, we can help small and rural practices better understand and prepare for the ICD-10 transition. We can also help you maximize your relationships and local knowledge to provide ICD-10 information to other organizations that represent the core audiences affected by ICD-10 (e.g., providers, payers, clearinghouses, third-party billers, and vendors).

Key Messages
With the compliance date now October 1, 2015, messaging will focus on making sure health care organizations are aware of the date. More importantly, messaging will also include concrete steps on how to prepare and implement ICD-10 stage by stage. Below are messages to convey when speaking about the ICD-10 transition:

- The compliance date for the ICD-10 transition is **October 1, 2015**; take steps **now** to get ready.
• Claims for services provided on or after October 1, 2015, must use ICD-10 codes for medical diagnosis and hospital inpatient procedures. CPT codes for outpatient procedures are not affected by this change. HIPAA covered entities must continue to use ICD-9-CM through September 30, 2015.
• The transition from ICD-9 to ICD-10 will require business and systems changes throughout your organization. Now is the time to prepare.
• All health care organizations that are covered entities under HIPAA must make the transition to ICD-10, not just those who file Medicare or Medicaid claims. Covered entities include providers, health plans, payers, clearinghouses, and third-party billers.
• Non-HIPAA-covered entities that use ICD-9 coding are also advised to make the transition to ICD-10, which will make ICD-9 codes obsolete.
• CMS has resources to help organizations prepare for the transition to ICD-10. Visit www.CMS.gov/ICD10 to learn more.
• Clearinghouses are not coders, and will not/cannot provide a safety net for providers for ICD-10. There is a perception that clearinghouses will take care of the ICD-10 transition as they did for Version 5010. While clearinghouses can assist with claims, they cannot convert ICD-9 codes to ICD-10 because they do not have access to the appropriate documentation.

Using This Toolkit
This toolkit contains pertinent information, materials, tools, and tactics to assist in your ICD-10 outreach and education efforts. The toolkit takes into account the various audience segments you will need to target—including providers, payers, and vendors.

The toolkit contains the following materials and resources:

• Fact sheets
• ICD-10 Email Updates
• Web button
• Drop-in articles
• ICD-10 PowerPoint Presentation
• Road to 10
• Medscape Modules on ICD-10

Many of these materials can be found on the ICD-10 website. CMS has provided these resources here in this toolkit to make your outreach efforts as smooth as possible. The toolkit also contains tips and best practices for communicating with stakeholder organizations, including:

• Key stakeholder organizations and tips on conducting stakeholder outreach on a state and regional level
• Effective social media outreach pointers

We encourage you to take advantage of the materials included in this toolkit when providing information about ICD-10 in your region. We welcome your feedback and suggestions for additional items to support your outreach efforts or ways to assist you as you work with local providers and other stakeholders affected by the transition to ICD-10.
Section 2: Available Materials

The following is a list of materials contained in this toolkit. Several of the items include tailored versions that are geared toward a specific audience segment.

<table>
<thead>
<tr>
<th>MATERIALS AVAILABLE</th>
<th>DESCRIPTION</th>
<th>VERSIONS</th>
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</table>
| **Fact Sheets**                            | These fact sheets provide an overview of the ICD-10 transition, tailored for specific audiences (providers, payers, vendors, and non-covered entities). The fact sheets can be used as handouts at conferences and other events, or sent to stakeholder organizations to post on their websites and/or distribute to their constituents. | Fact Sheets  
- Get Ready for ICD-10 Now (available in RO Toolkit ZIP folder)  
- ICD-10 Transition: An Introduction  
- ICD-10 Basics for Medical Practices  
- ICD-10 Basics for Small and Rural Practices  
- Talking to Your Vendors About ICD-10: Tips for Medical Practices  
- Talking to Your Customers About ICD-10: Tips for Software Vendors  
- ICD-10 Basics for Payers  
- The ICD-10 Transition: Focus on Non-Covered Entities  
- Questions to Ask Your Systems Vendor About ICD-10  
- ICD-10 Resources Flyer |
| **ICD-10 Industry Email Updates Messages** | The ICD-10 Industry Email Update messages contain updates, alerts, and general information on the ICD-10 transition. They are also used to inform subscribers of new CMS materials or events related ICD-10. A few sample messages are included in this toolkit, which can be repurposed as web and newsletter content, handouts, or social media messages. Additional messages and subscription information are available on the CMS website. | Sample Email Update Messages:  
- Five ICD-10 Facts  
- Five More ICD-10 Facts  
- Results from November ICD-10 Acknowledgement Testing Week  
- Successful ICD-10 Testing Shows Industry Ready to |
<table>
<thead>
<tr>
<th>TYPE</th>
<th>DESCRIPTION</th>
<th>VERSIONS</th>
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<tbody>
<tr>
<td>Web Button</td>
<td>The web button contains the official CMS ICD-10 logo and can be provided as a resource that stakeholders or partners can place on their websites to link to the CMS ICD-10 website.</td>
<td>Take Next Step to Modernize Health Care • CMS ICD-10 Resources • Get Ready Now for ICD-10</td>
</tr>
<tr>
<td>Drop-in Articles</td>
<td>The drop-in articles focus on how organizations can prepare for the ICD-10 transition and what changes they should expect. These articles can be pitched to local media outlets as well as to stakeholder organizations for inclusion in their publications.</td>
<td>ICD-10 10 Facts • ICD-10 Testing • ICD-10 Physician Champions Panel (available in RO Toolkit ZIP folder)</td>
</tr>
<tr>
<td>ICD-10 PowerPoint Presentations</td>
<td>The PowerPoint presentations provide an overview of the transition to ICD-10 and include helpful talking points. There is a short version that can be used for presentations that require a brief update on ICD-10; the longer version can be used for more comprehensive presentations on ICD-10.</td>
<td>ICD-10 Presentation for Regional Offices (long version) • ICD-10 Presentation for Regional Offices (short version) (available in RO Toolkit ZIP folder)</td>
</tr>
<tr>
<td>Intro Guide to ICD-10</td>
<td>This PDF provides an overview of ICD-10, why the transition is necessary, steps for how to transition, and helpful resources for providers.</td>
<td>Intro Guide to ICD-10</td>
</tr>
<tr>
<td>Road to 10: Small Physician Practice’s Route to ICD-10</td>
<td>This tool is an online resource built with the help of providers in small practices. It is intended to help small medical practices jumpstart their ICD-10 transition. “Road to 10” includes specialty references and gives providers the capability to build ICD-10 action plans tailored for their practice needs.</td>
<td>Road to 10</td>
</tr>
</tbody>
</table>
I. Fact Sheets

Fact sheets can be distributed to appropriate audiences at large gatherings such as conferences or on an individual, as-needed basis to allow for easy dissemination of important information about the ICD-10 transition. Fact sheets can be distributed in electronic form to post on websites or to help key audiences, such as providers, prepare for staff training. The information contained in these fact sheets can also be used to inform talking points or topics for presentations, and the fact sheets themselves can be referenced in presentations.

Get Ready for ICD-10 Now (available in the RO Toolkit ZIP file)
Description:
Provides a step-by-step plan for providers to transition to ICD-10 and emphasizes the urgency of the transition. The second page includes a list of ICD-10 resources.

Recommendations for Use:
This fact sheet is ideal for distribution at conferences or other educational events since it provides concrete steps for getting ready for ICD-10 and showcases all of the materials in one place.

The ICD-10 Transition: An Introduction Fact Sheet
Description:
Provides a general overview of the ICD-10 transition.

Recommendations for Use:
The introduction fact sheet is very versatile and is appropriate for multiple audiences. This fact sheet is ideal for distribution at payer, provider, and other health care industry conferences and meetings. This fact sheet can also be provided to stakeholder organizations to post on their websites and/or distribute to their constituents.
**ICD-10 Basics for Medical Practices**

*Description:*
Provides a simple checklist for providers who are just beginning the ICD-10 transition.

*Recommendations for Use:*
This fact sheet is appropriate for medical practices that are beginning the ICD-10 transition process. It can be distributed to health care organizations as well as vendors who work with providers.

**ICD-10 Basics for Small and Rural Practices**

*Description:*
Provides a list of important questions small and rural practices should address to help prepare for the ICD-10 transition.

*Recommendations for Use:*
This fact sheet is appropriate for small and rural medical practices that are beginning the ICD-10 transition process. It can be distributed to health care organizations as well as vendors who work with these providers.
Talking to Your Vendors – Tips for Medical Practices

Description:
Provides tips for medical practices on how to start conversations with vendors about preparing for the ICD-10 transition.

Recommendations for Use:
This fact sheet is ideal for distribution at local and national provider conferences. It is also an excellent resource for provider practices, especially rural and small practices, which need assistance communicating with vendors about ICD-10. In addition, this fact sheet can be provided to stakeholder organizations to post on their websites and/or distribute to their constituents.

Talking to Your Customers – Tips for Software Vendors

Description:
Provides a list of important dates and several important topics that vendors should discuss with customers.

Recommendations for Use:
This fact sheet can be distributed to vendors through mailings, or at conferences, meetings, or showcases. This fact sheet can also be provided to stakeholder organizations to post on their websites and/or distribute to their constituents.
ICD-10 Basics for Payers Fact Sheet

Description:
Provides a payer-focused overview of ICD-10, a description of who will be affected by the transition, a short guide to preparing for the transition, and a list of resources available to payers.

Recommendations for Use:
The payer fact sheet can be distributed at conferences and meetings where payers may be present, such as local and regional payer organization meetings, and annual meetings. Fact sheets can also be distributed to local payers on an individual basis or provided to local payer organizations to post on their websites and/or distribute to their constituents.

ICD-10 Basics for Non-Covered Entities

Description: Provides non-covered entities, such as home care, hospice, and workers’ compensation organizations, with background on the ICD-10 transition, including an explanation of ICD-10-CM/PCS. It discusses how the ICD-10 transition affects non-covered entities and offers tips for adopting the new code set.

Recommendations for Use: This fact sheet can be distributed to non-covered entities through mailings, or at conferences, meetings, or showcases. This fact sheet can also be provided to stakeholder organizations to post on their websites or share with partner organizations that are not covered by HIPAA.
Questions to Ask Your Systems Vendor About ICD-10

Description: Offers a comprehensive list of questions that health care providers can ask their practice management and EHR systems vendors to ensure that the new system meets their practices health IT goals.

Recommendations for Use: This fact sheet is appropriate for medical practices. It can be distributed to health care organizations as well as to vendors who work with providers. This fact sheet can be distributed at conferences or other educational events, and provided to stakeholder organizations to post on their website. These top questions can also be incorporated into Regional Office presentation and listserv content.

ICD-10 Resources Flyer

Description: Provides a list of the ICD-10 resources available on the CMS ICD-10 website including fact sheets, email updates, continuing medical education modules, and PowerPoint presentations. The resources are categorized by topics like ICD-10 basics, communicating about ICD-10, and implementation planning.

Recommendations for Use: This fact sheet is ideal for distribution at conferences or other educational events since it showcases all of the materials in one place. In addition, this fact sheet can be provided to stakeholder organizations to post on their websites and/or distribute to their constituents.
II. ICD-10 Email Update Messages

Email Update messages are sent from CMS to specific subscribers of the ICD-10 Email Updates list, which as of April 2015, includes over 200,000 subscribers.

Messages are sent to a distribution list of people who have subscribed to the email updates, which includes many payers, providers, and vendors, as well as members of the media. The Email Update messages are used to distribute important ICD-10 updates, as well as practical tips for making the transition to ICD-10.

The ICD-10 Email Update messages can be repurposed as newsletter or blog content as well as promoted in presentations and talks to encourage sign-ups.

OESS is responsible for sending Email Update messages, but welcomes any content recommendations. Content from the Email Update messages can be sent to Regional Office email lists, as well as included in the quarterly Regional Office publication “The Pulse.”

Note: New messages will be posted on the ICD-10 Email Update section of the CMS ICD-10 website.

SAMPLE MESSAGES:

Five Facts about ICD-10

To help dispel some of the myths surrounding ICD-10, the Centers for Medicare & Medicaid Services (CMS) recently talked with providers to identify common misperceptions about the transition to ICD-10. These five facts address some of the common questions and concerns CMS has heard about ICD-10:

1) The ICD-10 transition date is October 1, 2015.
   The government, payers, and large providers alike have made a substantial investment in ICD-10. This cost will rise if the transition is delayed, and further ICD-10 delays will lead to an unnecessary rise in health care costs. Get ready now for ICD-10.

2) You don’t have to use 68,000 codes.
   Your practice does not use all 13,000 diagnosis codes available in ICD-9. Nor will it be required to use the 68,000 codes that ICD-10 offers. As you do now, your practice will use a very small subset of the codes.

3) You will use a similar process to look up ICD-10 codes that you use with ICD-9.
   Increasing the number of diagnosis codes does not necessarily make ICD-10 harder to use. As with ICD-9, an alphabetic index and electronic tools are available to help you with code selection.
4) **Outpatient and office procedure codes aren’t changing.**
   The transition to ICD-10 for diagnosis coding and inpatient procedure coding does not affect the use of CPT for outpatient and office coding. Your practice will continue to use CPT.

5) **All Medicare fee-for-service providers have the opportunity to conduct testing with CMS before the ICD-10 transition.**
   Your practice or clearinghouse can conduct acknowledgement testing at any time with your Medicare Administrative Contractor (MAC). Testing will ensure you can submit claims with ICD-10 codes. During a special “acknowledgement testing” week to be held in June 2015, you will have access to real-time help desk support. Contact your MAC for details about testing plans and opportunities.

   Stay tuned for five more facts about ICD-10: coming to you soon in another CMS ICD-10 Email Update message.

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**Keep Up to Date on ICD-10**
Visit the CMS [ICD-10 website](#) for the latest news and resources to help you prepare. Sign up for [CMS ICD-10 Industry Email Updates](#) and follow us on Twitter.

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**Five More Facts about ICD-10**

Previously, the Centers for Medicare & Medicaid Services (CMS) shared five facts dispelling misperceptions about the transition to ICD-10. Here are five more facts addressing common questions and concerns CMS has heard about ICD-10:

6) **If you cannot submit ICD-10 claims electronically, Medicare offers several options.**
   CMS encourages you to prepare for the transition and be ready to submit ICD-10 claims electronically for all services provided on or after October 1, 2015. But if you are not ready, Medicare has several options for providers who are unable to submit claims with ICD-10 diagnosis codes due to problems with the provider’s system. Each of these requires that the provider be able to code in ICD-10:

   - Free billing software that can be downloaded at any time from every Medicare Administrative Contractor (MAC)
   - In about ½ of the MAC jurisdictions, Part B claims submission functionality on the MAC’s provider internet portal
   - Submitting paper claims, if the Administrative Simplification Compliance Act waiver provisions are met

   If you take this route, be sure to allot time for you or your staff to prepare and complete training on free billing software or portals before the compliance date.

7) **Practices that do not prepare for ICD-10 will not be able to submit claims for services performed on or after October 1, 2015.**
Unless your practice is able to submit ICD-10 claims, whether using the alternate methods described above or electronically, your claims will not be accepted. Only claims coded with ICD-10 can be accepted for services provided on or after October 1, 2015.

8) Reimbursement for outpatient and physician office procedures will not be determined by ICD-10 codes.

Outpatient and physician office claims are not paid based on ICD-10 diagnosis codes but on CPT and HCPCS procedure codes, which are not changing. However, ICD-10-PCS codes will be used for hospital inpatient procedures, just as ICD-9 codes are used for such procedures today. Also, ICD diagnosis codes are sometimes used to determine medical necessity, regardless of care setting.

9) Costs could be substantially lower than projected earlier.

Recent studies by 3M and the Professional Association of Health Care Office Management have found many EHR vendors are including ICD-10 in their systems or upgrades—at little or no cost to their customers. As a result, software and systems costs for ICD-10 could be minimal for many providers.

10) It’s time to transition to ICD-10.

ICD-10 is foundational to modernizing health care and improving quality. ICD-10 serves as a building block that allows for greater specificity and standardized data that can:

- Improve coordination of a patient’s care across providers over time
- Advance public health research, public health surveillance, and emergency response through detection of disease outbreaks and adverse drug events
- Support innovative payment models that drive quality of care
- Enhance fraud detection efforts

Keep Up to Date on ICD-10

Visit the CMS ICD-10 website for the latest news and resources to help you prepare. Sign up for CMS ICD-10 Industry Email Updates and follow us on Twitter.

Get ready now

With less than a year to go before the October 1, 2015, compliance date, now is the time to get ready. Whether you’re a provider, payer, or other health care entity, it’s important to prepare for ICD-10 now.

Visit the CMS ICD-10 website to learn how to make a plan that fits your needs. By working together, we can make a successful ICD-10 transition.
Benefits of ICD-10
Foundational to modernizing health care and improving quality of care, the ICD-10 code set will replace ICD-9 codes for both diagnosis and inpatient procedures. Among its benefits, ICD-10:

- Better captures details about chronic illnesses, identifying underlying causes, complications of disease, and conditions that contribute to complexity of a disease
- Serves as a building block that allows for greater specificity and standardized data to better support patient care and improve disease management
- Improves data for peer comparison and utilization benchmarking and better documentation of patient complexity and level of care to support reimbursement for care provided
- Enhances public health surveillance and reporting—as well as quality measurement and reporting—with robust detail for research and data analysis

Using ICD-10, doctors can capture much more detail, meaning they can better understand important information about the patient’s health. And by enabling more detailed patient history coding, ICD-10 can help to better coordinate a patient’s care across providers and over time.

CMS resources can help you get ready
To help you prepare for ICD-10, CMS recently released two Medscape videos and an expert column. Available on the CMS ICD-10 website, these resources provide guidance about the transition to ICD-10 with a focus on small practices. Continuing medical education (CME) and nursing continuing education (CE) credits are available to health care professionals who complete the learning modules. Anyone who completes the modules can receive a certificate of completion.

The Road to 10 Tool, also available through the CMS ICD-10 website, gives an overview of ICD-10 and answers frequently asked questions. The tool is designed to help small practices jumpstart their transitions. Providers can build an ICD-10 action plan and review tailored clinical scenarios to learn more about how ICD-10 affects their practice.

Keep Up to Date on ICD-10
Visit the CMS ICD-10 website for the latest news and resources to help you prepare. Sign up for CMS ICD-10 Industry Email Updates and follow us on Twitter.

ICD-10 Testing Opportunities for Medicare FFS Providers
On July 31, HHS issued a rule (CMS-0043-F) finalizing October 1, 2015, as the compliance date for health care providers and health plans to transition to ICD-10. ICD-10 represents a significant code set change that impacts the entire health care community.

CMS is taking a comprehensive four-pronged approach to preparedness and testing for ICD-10 to ensure that CMS, as well as the Medicare Fee-For-Service (FFS) provider community, is ready:

- CMS internal testing of its claims processing systems
- CMS Beta testing tools available for download

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• Acknowledgement testing
• End-to-end testing

For more information, see MLN Matters® Special Edition Article #SE1409, “Medicare FFS ICD-10 Testing Approach.”

Acknowledgement Testing
In March 2014, CMS conducted a successful ICD-10 acknowledgement testing week. Providers, suppliers, billing companies, and clearinghouses are welcome to submit acknowledgement test claims anytime up to the October 1, 2015, implementation date. In addition, a special acknowledgement testing week in June of 2015 will give submitters access to real-time help desk support and allow CMS to analyze testing data. Registration is not required for this virtual event. Contact your Medicare Administrative Contractor (MAC) for more information about acknowledgement testing.

End-to-End Testing
CMS offered providers and other Medicare submitters the opportunity to participate in end-to-end testing with MACs and the Common Electronic Data Interchange (CEDI) contractor in January and April, and another opportunity will be available in July of 2015. As planned, approximately 2,550 volunteer submitters will have the opportunity to participate over the course of three testing periods. The goals of this testing are to demonstrate that:

• Providers and submitters are able to successfully submit claims containing ICD-10 codes to the Medicare FFS claims systems
• CMS software changes made to support ICD-10 result in appropriately adjudicated claims
• Accurate Remittance Advices are produced

Additional details about end-to-end testing will be available soon.

Keep Up to Date on ICD-10
Visit the CMS ICD-10 website for the latest news and resources to help you prepare. Sign up for CMS ICD-10 Industry Email Updates and follow us on Twitter.

III. Web Button

The Web Button can be given to organizations to place on their website alongside their ICD-10 related products or on their homepage. The button should be linked to the CMS ICD-10 information website: http://www.cms.gov/ICD10/.

Recommendations for Use:
The Web Button provides a simple way for CMS to drive traffic to the CMS ICD-10 webpage when working with payer and provider organizations. Here’s how to use the web button:

• When working with third-party groups, the button can be offered for inclusion on the group’s website homepage or ICD-10 section.
• If a group agrees to post the web button to its page, email the button and ask the group to link the button to the CMS ICD-10 website.
• Follow up once the button has been posted to see if it is working properly.

We do not advise you to distribute this web button to vendors, as it may be construed as an endorsement of that vendor on behalf of CMS.

IV. Drop-In Articles

Drop-in articles can be used to reach a large number of target audiences through media and other channels. To most effectively use the drop-in article, it is important to identify key organizations or media outlets that reach the target audiences. Once publications/outlets have been identified, submit the drop-in article for insertion. It is important to be aware of the publication schedule and insertion deadlines when submitting the drop-in article. In addition, stakeholder organizations may be interested in posting the drop-in articles on their websites or including in an e-newsletter for their constituents. The drop-in articles can also be used in the Regional Office publication “The Pulse.”

Drop-in articles have been created for provider audiences on the following topics:
• ICD-10 10 Facts
• ICD-10 Testing
• ICD-10 Physician Champions Panel

V. ICD-10 PowerPoint Presentations

Preparing Your Practice for ICD-10 – long version
If you are asked to give a presentation on ICD-10, these PowerPoint slides will help guide your presentation. The PowerPoint contains all of the basic information about the transition and includes talking points to assist you.

Preparing Your Practice for ICD-10 – short version

For Regional Office representatives who only need to provide a brief update on ICD-10, these PowerPoint slide cover the basics:
• Facts about ICD-10
• Important steps to get prepared
• CMS ICD-10 Resources
In some instances, you may be asked to present on more specific information about the ICD-10 transition. In that case, CMS contractor Ketchum is available to help tailor the ICD-10 PowerPoint presentation based on conference topics, audiences, and needs.

VI. Road to 10: Small Physician Practice’s Route to ICD-10

The Road to 10 tool, available through the CMS ICD-10 website, is a website that allows users to build personalized ICD-10 action plans, read FAQs, and watch webcasts on a variety of topics. In addition, there are resources focused on specific specialties, including Internal Medicine, Pediatrics, Cardiology, and others. Road to 10 resources focus on the ICD-10 transition for small physician practices.

VII. ICD-10 Medscape Modules

CMS, through Medscape Education, has released two ICD-10 video lectures and one expert column providing practical guidance for the ICD-10 transition. The resources are specifically designed for small practices.

- Video: ICD-10: Getting From Here to There -- Navigating the Road Ahead
- Video: ICD-10 and Clinical Documentation
- Expert Column: Preparing for ICD-10: Now Is the Time

The modules are free to use and can be shared at any event you attend. They are excellent resources for learning more about ICD-10. If the user is not a member of Medscape, they will first be prompted to fill out a brief registration form. You can use these modules as resources for providers who are interested in getting a deeper understanding of ICD-10 than is provided by fact sheets and the website.
Section 3: Social Media Overview

Social Media Tools

Social media is an important tool for reaching key audiences with CMS messages. Non-traditional media allow us to interact with audiences in a neutral space—not just on the CMS website or through publications—and can help to drive audiences to take action. Below are descriptions of two effective social media tools that are used by CMS:

<table>
<thead>
<tr>
<th>TOOL</th>
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<tbody>
<tr>
<td><strong>Twitter</strong></td>
<td>Service that allows users to post brief text updates (maximum 140 characters)</td>
</tr>
<tr>
<td>(@CMSGov)</td>
<td>that can be viewed by their network. Users can also view posts from other people they choose to “follow.”</td>
</tr>
<tr>
<td><strong>YouTube</strong></td>
<td>Allows users to upload videos and view and comment on the uploaded content of others.</td>
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<tr>
<td>(CMSHHSgov)</td>
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Integrating Social Media for Outreach

CMS uses both Twitter and YouTube for social media outreach focused around the ICD-10 transition. Through the CMS Twitter handle, @CMSGov, messages can be sent to update thousands of followers on the latest news or information around ICD-10. The YouTube channel, CMSHHSgov, allows CMS to share and host videos that can be viewed easily.

Twitter

Twitter is an effective way to share information with a large audience in real time. With a 140-character limit, Twitter is most effectively used for sharing links to articles, brief updates, and announcements. A few ways we use the CMS Twitter account include:

- Announcing CMS’ presence at conference booths, panels, and presentations
- Sharing links to articles about ICD-10 implementation
- Posting messages about the ICD-10 transition, important deadlines, resources, and CMS events
- Re-tweeting any ICD-10 related tweets (approved by CMS)
- Directing people to the CMS ICD-10 webpage for news and program updates

Note: If your Regional Office has any news or ideas for updates related to ICD-10 that the CMS account team can tweet about, please submit your ideas to CMS contractor Ketchum for consideration.
Re-tweeting
One way to generate impressions from the CMS Twitter account is by re-tweeting messages. Re-tweeting messages is a way to repost something from another person, company, or organization for your network to see. If you or someone in your Regional Office uses Twitter, re-tweeting CMS messages related to ICD-10 from the @CMSGov Twitter handle can be a good way to distribute important messages. To re-tweet messages created by the CMS Twitter account, copy the content of the tweet and put an RT (for “re-tweet”) @CMSGov before the content.

Hashtags
Using hashtags is an easy way to get messages seen and to track a conversation. Hashtags are brief topic indicators that are denoted with a “#” before a topic. Hashtags are commonly used during large events as a way to organize the conversation. Check CMS messages for hashtags related to ICD-10, as this will indicate messages that discuss ICD-10 topics. Some previously used hashtags include #Version5010, #5010, and #ICD10.

YouTube
Videos are a great way to educate audiences and broaden CMS’ outreach efforts. CMS currently maintains a YouTube page where videos are posted from several different groups inside of CMS. As part of ICD-10 outreach, CMS has developed several ICD-10-related videos:

- **Introduction to ICD-10 Coding** - This animated video explains the benefits of ICD-10 medical codes. Health care providers will start using ICD-10 instead of ICD-9 codes on October 1, 2015.

- **ICD-10 Coding and Diabetes** - This animated video uses diabetes to show how ICD-10 codes improve on ICD-9.
Section 4: Stakeholder Outreach

Conducting Stakeholder Outreach

CMS and Ketchum are engaging national vendor, payer, and provider organizations to serve as intermediaries in reaching their memberships with messages about the ICD-10 transition and resources available from CMS. National stakeholder collaboration activities include:

- Encouraging organizations to post CMS ICD-10 materials to their websites and distributing materials at conferences or meetings
- Linking from their websites to the CMS ICD-10 website
- Arranging opportunities for CMS ICD-10 spokespeople to present at their conferences
- Sponsoring webinars and conference calls featuring CMS ICD-10 spokespeople
- Coordinating placement of drop-in articles in organization publications
- Subscribing members to the CMS ICD-10 Industry Email Update list
- ICD-10 implementation trainings with CMS contractor Noblis

Regional Offices can replicate these activities with local chapters of national organizations and other regional third-party groups that reach payers, providers, and vendors. Many of you have existing relationships with groups in your region. Ketchum is available to help identify and cultivate regional relationships with chapters of national groups and fill any gaps that may exist.

When working with regional stakeholder organizations, you can leverage the resources in this toolkit. When meeting or visiting with local organizations you can:

- Discuss opportunities to collaborate on communicating about the ICD-10 transition. Identify ways you can work together such as through the organization’s publications, e-newsletter, social media channels, and website.
- Provide electronic or hardcopy CMS materials such as fact sheets to the organization to have on hand for meetings or staff trainings, or for inclusion on their website.
- Identify any opportunities for speaking engagements, conference sessions, or meetings where you or a colleague can present information on ICD-10 to the organization.
- Request placement of drop-in articles in publications.

As you begin to regularly work with organizations, it is important to maintain the relationship and establish an ongoing interval for following up with groups. Consider offering to check in on a quarterly basis.

Below is a list of national organizations with which OESS and Ketchum have established regular stakeholder activity and interaction. Review this list to see if there are any regional chapters of groups you may want to consider contacting.
ICD-10 Stakeholder Partners

*Please note: This is not an exhaustive list and it continues to grow with new partners. The following groups are collaborating with OESS on ICD-10 outreach and communications.

*denotes organization has regional/state-level chapters

<table>
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<tr>
<th>Providers/Health Information Managers, Coders</th>
<th>Payers</th>
<th>Vendors</th>
<th>Multiple Audiences</th>
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<td>American Academy of Family Physicians (AAFP)*</td>
<td>American Health Information Management Association (AHIMA)*</td>
<td>America’s Health Insurance Plans (AHIP)</td>
<td>3M Siemens Health</td>
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<td>American Academy of Professional Coders (AAPC)*</td>
<td>BlueCross BlueShield Association (BCBSA)</td>
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<td>National Association of County and City Health Officials (NACCHO)*</td>
<td>Healthcare Billing and Management Association (HBMA)</td>
<td>North Carolina Health Information and Communications Alliance (NCHICA)</td>
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<td>National Hispanic Medical Association (NHMA)</td>
<td>Cooperative Exchange</td>
<td>Workgroup for Electronic Data Interchange (WEDI)</td>
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<td>National Council for Prescription Drug Program (NCPDP)</td>
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