

Small and Medium Practice RASCI Matrix Purpose

RASCI Matrix (Responsible, Accountable, Supportive, Consulted, and Informed)	
Purpose	The RASCI Matrix is a responsibility assignment matrix system that brings structure and clarity to assigning the roles people play within a team. The RASCI grid describes the participation by various roles in completing action steps or deliverables for a project or business process. A RASCI is especially useful in clarifying roles and responsibilities in cross-functional/departmental projects and processes.
Key Responsibility Roles	<p>Responsible: Those who do the work to achieve the action step. There is typically one role with a participation type of Responsible, although others can be delegated to assist in the work required (see also RASCI below for separately identifying those who participate in a supporting role).</p> <p>Accountable: (also Approver or final Approving authority), Those who are ultimately accountable for the correct and thorough completion of the deliverable or action step, and the one to whom the Responsible one is accountable. In other words, an Accountable must sign off (Approve) on work that Responsible provides. There must be only one Accountable specified for each action step or deliverable.</p> <p>Supportive: Those who can provide resources or play a supporting role in implementation.</p> <p>Consulted: Those whose opinions are sought; and with whom there is two-way communication.</p> <p>Informed: Those who are kept up-to-date on progress, often only on completion of the action step or deliverable; and with whom there is just one-way communication.</p>
Benefits of Using a RASCI	<ul style="list-style-type: none"> • A team’s performance can be negatively impacted if responsibilities and accountabilities are not clearly stated. • Complex, time-sensitive or mission-critical projects will require you to evaluate each action step and appropriately assign roles to each team member. This clarity will prevent from gaps, duplication and confusion from occurring within a team. • One of the biggest challenges of working in a team (particularly in areas where there is little margin for error) is ensuring that action steps are completed and accurately executed. The RASCI Matrix offers a structured approach to assigning roles. Using the RASCI matrix, you can plot and determine who is responsible and accountable for each team action step, and check the integrity of each person’s roles. In doing so, you can minimize the risk of gaps, overlaps and confusions from occurring and foster a greater chance of running a highly effective and efficient team.

Small and Medium Practice RASCI Matrix Instructions

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Identify all of the processes/activities involved and list them on the left hand side of the chart. This should link directly to the Project Plan Template.
Identify all of the roles and role name. List them along the top of chart. Roles may include but are not limited to: ICD-10 Project Coordinator/Project Leader, ICD-10 Steering Committee, ICD-9-CM/ICD-10-CM content expert, Executive Sponsor, Individual Team Coordinator/Leads, Clinical SMEs, Policy SMEs, IT SMEs, Contractors etc.
Complete the cells of the chart (identify who is R esponsible, A ccountable, S upportive, C onsulted, I nformed for each process).
Each process should preferably have only one " R esponsible" as a general principle. A gap occurs when a process exists with no " R " (no role responsible) and overlap occurs when multiple roles exist that have an " R " for a given process.
Resolve Overlaps- Every process in a role responsibility map should contain one and only one " R " to indicate a unique process owner. In the case of multiple " R 's" there is a need to zoom in and further detail the associated sub processes to separate out individual responsibilities.
When a role has not been assigned to a process, the individual with the authority to assign roles must determine which role is responsible for a process. The RASCI map must be updated to clarify which individual(s) must assume that role.

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Action Steps	Individual Name	Individual Name2	Individual Name3	Individual Name4	Individual Name5	Individual Name6
Small and Medium Practice Implementation Timeline						
Actions to Take Immediately						
Inform physicians/staff of upcoming changes and the practice's implementation plans (1 month)						
Identify and establish an ICD-10 coordination manager for your practice (1 month)						
Perform an impact assessment and identify potential changes to existing work flow and business processes (6 months) <ul style="list-style-type: none"> Collect information on current use of ICD-9 and a list of staff members who need ICD-10 resources and training. Staff training will most likely involve billing and other financial personnel, coding staff, clinicians, management, and IT staff, if applicable Evaluate the effect of ICD-10 on other planned or on-going projects (e.g., Version 5010 transition, EHR adoption and Meaningful Use) 						
Determine business and technical implementation strategy (1 month)						
Develop an implementation plan, including a memo/letter communicating the new system changes to staff (3 months)						
Estimate and secure budget, including all costs associated with implementation such as software and software license costs, hardware procurement, and staff training costs (2 months)						
Contact systems vendors, clearinghouses, and/or billing services to assess their readiness for ICD-10 and evaluate current contracts (2 months) <ul style="list-style-type: none"> Determine if systems vendors and/or clearinghouses/billing services will support changes to systems, supply a timeline and cost estimate for implementation changes, and identify when testing will occur Determine anticipated testing time and schedule (when they will start, how long they will need, and what will be needed for testing) If vendor(s) provide solution, then engage immediately 						
Begin internal system design and development, if not started already (work with vendors as needed)						
Seek resources from CMS, professional and membership organizations to help with transition						
Educate staff on changes in documentation requirements from health plans						
Winter 2012						
Complete system design and development						
Continue to educate staff on changes in documentation requirements from health plans						
Start to conduct internal testing. This must be a coordinated effort with internal coding, billing and technical resources and vendor resources (9 months)						
Provider or key office personnel should contact IT support personnel to begin implementing the ICD-10 project plan throughout 2012 until ICD-10 implementation. Action steps include reviewing the sample data reports, testing, and evaluating data for accuracy (11 months)						
Spring 2012						
Continue to educate staff on changes in documentation requirements from health plans						
Provider or key office personnel and IT support personnel should continue implementing the ICD-10 project plan throughout 2012 until ICD-10 implementation. Action steps include reviewing the sample data reports, testing, and evaluating data for accuracy						
Summer 2012						
Continue to educate staff on changes in documentation requirements from health plans						
Continue internal testing and vendor code deployment (3 months)						
Provider or key office personnel and IT support personnel should continue implementing the ICD-						

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Action Steps	Individual Name	Individual Name2	Individual Name3	Individual Name4	Individual Name5	Individual Name6
Fall 2012						
Complete educating staff on changes in documentation requirements from health plans						
Complete internal testing and vendor code deployment						
Begin external testing (10 months)						
Provider or key office personnel and IT support personnel should continue implementing the ICD-10 project plan throughout 2012 until ICD-10 implementation. Action steps include reviewing the sample data reports, testing, and evaluating data for accuracy						
Winter 2013						
Continue external testing						
Provider or key office personnel and IT support personnel should continue implementing the ICD-10 project plan throughout 2012 until ICD-10 implementation. Action steps include reviewing the sample data reports, testing, and evaluating data for accuracy						
Spring 2013						
Continue external testing						
Conduct intensive training for coders on day-to-day basis (6 months)						
Provider or key office personnel and IT support personnel should continue implementing the ICD-10 project plan throughout 2012 until ICD-10 implementation. Action steps include reviewing the sample data reports, testing, and evaluating data for accuracy						
Summer 2013						
Complete external testing						
Work with vendor contractor(s) to transition ICD-10 systems to production						
Continue intensive training for coders on day-to-day basis, if applicable						
Provider or key office personnel and IT support personnel should continue implementing the ICD-10 project plan throughout 2012 until ICD-10 implementation. Action steps include reviewing the sample data reports, testing, and evaluating data for accuracy						
Fall 2013						
Work with vendor contractor(s) to complete transition ICD-10 systems to production						

CMS consulted resources from the American Medical Association (AMA), the American Health Information Management Association (AHIMA), the North Carolina Healthcare Information & Communications Alliance (NCHICA) and the Workgroup for Electronic Data Interchange (WEDI) in developing this timeline.