

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS BR201437 SEPTEMBER 16, 2014

What is going on with ICD-10 and APR-DRG?

Answers to IHCP providers' questions about the delay in implementing ICD-10

With the delay of ICD-10 implementation until October 2015, many providers are asking how the Indiana Health Coverage Programs (IHCP) plans to proceed with ICD-10 coding, system testing, and the transition to the All-Patient Refined Diagnosis-Related Grouper (APR-DRG). Answers to the most commonly asked questions follow:

Q The Centers for Medicare & Medicaid Services (CMS) has set a new ICD-10 compliance date of October 1, 2015. Would you please confirm that the IHCP has delayed the implementation of ICD-10, as well?

A The IHCP is following the time line set forth by CMS.

Q I have questions about previous ICD-10 testing we did with the IHCP. Who should I contact?

A Please submit questions about ICD-10 testing to INXIXTradingPartner@hp.com.

Q What version of the APR-DRG is the IHCP using?

A The IHCP will continue to use the All-Patient (AP) grouper version 18 until the APR-DRG version 30 is implemented October 1, 2015. Once the APR-DRG is implemented, claims with dates of service (DOS) on or after October 1, 2015, will process through the APR-DRG. Claims with dates of service before October 1, 2015, will continue to process through the AP grouper version 18.

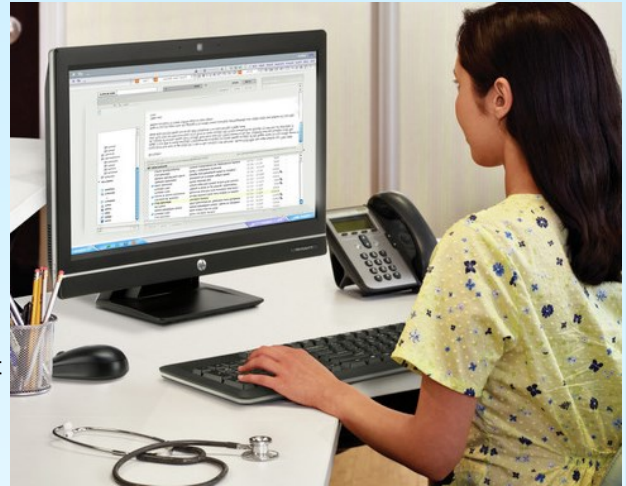
Q If providers and vendors have already tested ICD-10, will they have to test again before the new implementation date of October 1, 2015?

A Clearinghouses, software vendors, and providers have the primary responsibility for transitioning their practices and billing systems to the new code sets. **The IHCP recommends testing before the October 2015 ICD-10 implementation to eliminate errors and glitches, and ensure that ICD-10 claims are adjudicated appropriately.** Correcting errors after implementation will consume valuable resources and could affect providers' timely reimbursement.

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Q When will the IHCP's 2015 ICD-10 testing plans and time frames be available?

A The IHCP plans to update the ICD-10 section of indianamedicaid.com, including the information about the APR-DRG, in the coming weeks, so watch the website for more information. You can also sign up to receive [email notifications](#) when new content, such as IHCP provider bulletins, banner pages, provider manual updates, and ICD-10 webpage updates, is available at indianamedicaid.com.

Changes to provider manuals will make it easier to find appropriate codes for billing

The Indiana Health Coverage Programs (IHCP) is in the early stages of revising the overall format of the *IHCP Provider Manual* and supplemental provider manuals. The first phase of the revision process involves relocating many code lists and tables from individual chapters and manuals, and posting them to the Code Sets section at indianamedicaid.com. Lists and tables that will be affected include:

- Current Procedural Terminology (CPT®¹) and ICD-9 and ICD-10 code lists related to members' benefit packages or coverage policies
- Other codes used for billing, such as place of service codes, occurrence codes, and report type codes
- Codes used for claims processing, such as third-party liability (TPL) bypass code lists, Julian dates, and region codes

As the code lists and tables are removed from the manuals, they will be posted to the Code Sets section at indianamedicaid.com as individual PDF documents and titled according to subject. A hyperlink to the web document will be inserted in the manual from which the list or table was removed.

This change will allow providers to easily find code information in two ways – by clicking a link in the manual or by going directly to the [Code Sets page](#) at indianamedicaid.com. Providers can access the Code Sets page by clicking the Claims/Billing quick link on the provider home page or clicking **General Provider Services > Billing and Remittance > Code Sets**. These changes should be visible in the next regularly scheduled updates of all provider manuals.

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Section 2:

Indiana Health Coverage Programs Provider Manual

Table 8.15 – ICD-9 Procedure Codes

Code	Description
37.63	Repair of heart assist system
	Replacement of parts of an existing VAD
37.64	Removal of heart assist system
37.65	Implant of external heart assist system
	Device (outside the body but connected to heart) with external circuit
	Includes open chest procedure for cannula attachments
37.66	Insertion of implantable heart assist system
	Device directly connected to the heart and implanted in the body
	Includes the following:
	• Axial flow heart assist system
	• Diagonal pump heart assist system
	• L-VAD
	• Pulsatile heart assist system
	• Right ventricular assist device (RVAD)
	• Rotary pump heart assist system
	• Transportable, implantable heart assist system
	• VAD, not otherwise specified

Table 8.16 –

Code	Description
33975	Insertion of ventricular assist device
33976	Removal of ventricular assist device
33977	Insertion of ventricular assist device
33978	Removal of ventricular assist device
33979	Insertion of ventricular assist device
33980	Removal of ventricular assist device
33990	Insertion of ventricular assist device
33991	Removal of ventricular assist device
33992	Insertion of ventricular assist device
33993	Removal of ventricular assist device

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