

# ICD-10 IHCP <sup>^</sup>bulletin

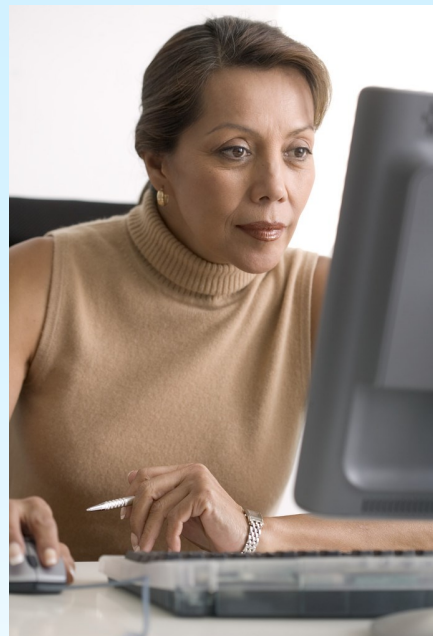
INDIANA HEALTH COVERAGE PROGRAMS BT201549 JULY 21, 2015

## IHCP is testing ICD-10!

The Indiana Health Coverage Programs (IHCP) began ICD-10 vendor testing June 1, 2015, and will continue testing through August 14, 2015. This testing is designated for claims processing and end-to-end testing, including testing with the new 3M™ All Patient Refined Diagnosis-Related Group software or APR DRG (grouper), new and updated policies, and Myers and Stauffer reimbursement rate updates.

APR DRG will be used for ICD-10 but will not replace the AP version 18 currently in use for dates of service (DOS) before the ICD-10 effective date of October 1, 2015. Version 30 of the APR DRG will be used for testing and has been implemented.

The IHCP needs a critical volume of testers to help make sure the transition to ICD-10 is as smooth and seamless as possible on October 1, 2015. If claims deny October 1, they will need to be corrected and resubmitted, which will delay reimbursement. Testing will ensure readiness – and readiness will reduce the impact of implementation for all parties.



### How should clearinghouses and software vendors prepare for the ICD-10 transition?

Clearinghouses and software vendors may submit test files containing ICD-9 and ICD-10 codes and the appropriate code qualifiers to ensure that claims will be accepted for processing.

- For the most part, the IHCP will not test with providers individually but with their clearinghouses or software vendors. It is the responsibility of clearinghouses and software vendors to coordinate testing with their providers.
- If a provider has an information technology (IT) or software department that submits claims directly to the IHCP, the IHCP will work with that department to conduct testing.
- End-to-end testing, including claims adjudication results, is available.
- Clearinghouses and software vendors should submit test files and retrieve response files.
- Clearinghouses and software vendors should pass claims adjudication results on to the provider.

**Only 71 days remain until the implementation of ICD-10 on  
October 1, 2015. Are you ready?**

The new ICD-10-related claim rejection edits can be tested at this time:

- Error 267 - 837P transactions – *Claim submitted with a mixture of ICD-9 and ICD-10 qualifiers on the ICD diagnosis. This is not permitted.*
- Error 269 - 837I transactions – *Claim submitted with a mixture of ICD-9 and ICD-10 qualifiers on the ICD diagnosis and/or procedure codes. This is not permitted.*

### How should providers prepare for the ICD-10 transition?

Providers can complete the following tasks to prepare for the transition:

- Familiarize yourself with the ICD-10 code set and coding guidelines to help assess the impact on your system.
- Code and save 5 to 10 current-day claims in ICD-10 to become familiar with the ICD-10 code set. These ICD-10-coded claims can then be used for ICD-10 claims adjudication testing.
- ICD-10 changes must be made to your system before beginning testing. Work with your clearinghouse or software vendor to understand possible ICD-10 software upgrades to your system and when the upgrades will be available.
- Consider the following when creating claims:
  - Create test claims using "real" production data.
  - Dates of service on the claims should be changed before submission based on ICD-9 end dates and ICD-10 effective dates. The ICD-10 effective date in the IHCP test environment is October 1, 2014.
- Supply your clearinghouse or software vendor with test ICD-10 claims.
- Coordinate with your clearinghouse or software vendor to submit test files to the IHCP.
- Request claims adjudication results from your clearinghouse or software vendor.



### How to begin testing ICD-10 with the IHCP

Follow these instructions to begin testing:

1. Submit a [Trading Partner Profile \(TPP\)](#) (located on this website under **General Provider Services > Electronic Data Interchange (EDI) Solutions**) indicating the transaction types you wish to test. Indicate in the comments section of the profile that you are requesting to test for ICD-10. The profile will be submitted electronically to HP.
2. HP will send an email containing specific testing information.
3. The effective date used for testing with the APR DRG is October 1, 2014.
4. Your claim adjudication results will be available by request on the test 835 Remittance Advice transaction and the provider test eRA (electronic Remittance Advice in pdf format).

## Testing questions

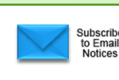
See the [ICD-10 FAQs – Testing](#) posted on the [ICD-10 Information](#) page at indianamedicaid.com. Send questions regarding the transition to ICD-10, including testing, front-end edits, or 835 transactions, to [INXIX.ICD10Questions@HP.com](mailto:INXIX.ICD10Questions@HP.com).

### QUESTIONS?

If you have questions about this publication, please visit the [ICD-10 Information](#) page at indianamedicaid.com.

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