ICD-10 IHCP ^bulletin

INDIANA HEALTH COVERAGE PROGRAMS BT201547 JULY 14, 2015

IHCP to implement ICD-10 October 1, 2015

The Indiana Health Coverage Programs (IHCP) will implement ICD-10 on October 1, 2015, per federal mandate from the Centers for Medicare & Medicaid Services (CMS).

Who is affected by ICD-10?

If you are required to use ICD-9 diagnosis codes on your claims, you will be required to use ICD-10 codes on claims for dates of service on or after October 1, 2015. Diagnosis codes are not currently processed on dental and non-durable

medical equipment (DME) pharmacy claims. Dental and non-DME pharmacy claims are the only claims not affected by the implementation of ICD-10 at this time.

What should you do now to prepare for ICD-10?

Hopefully, you have already begun assessing and planning for ICD-10. If you have not yet begun preparing for ICD-10, begin now!



Staff training

- The <u>CMS Provider Resources</u> web page offers several guides for providers and their staffs.
- Although certified coders will not need to be recertified for ICD-10, their skills need to be assessed for ICD-10, and continuing education unit (CEU) requirements will change. Credentialing organizations supply this information on their websites.
- Other areas of training to consider include:
 - Staff training in clinical documentation and charting
 - Updating your superbill and charge-slip and the associated processes
 - Revising patient questionnaires and "reasons for visit" to accurately reflect ICD-10-related information needs
 - Evaluating and updating electronic health records (EHR) to reflect ICD-10 information needs

Systems and testing

- Review your file layouts and where your files are stored to ensure your system can accommodate the additional code length.
- Contact your system and software vendors if they have not contacted you.

Only 78 days remain until the implementation of ICD-10 on October 1, 2015. Are you ready?

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- Testing with clearinghouses, software vendors, and extract vendors, as well as with managed care entities (MCEs) began June 1, 2015, and will continue through August 14, 2015. This testing is designated for claims processing and end-to-end testing.
- For the most part, the IHCP will not test directly with providers; rather, it is the responsibility of clearinghouses and vendors to coordinate testing with their providers. If a provider submits claims directly to the IHCP, and has an

information technology (IT) department, the IHCP will work with that department to conduct testing.

Stay informed

- Visit the <u>ICD-10 Information</u> page at indianamedicaid.com to find answers to frequently asked questions (FAQs) and other resources for providers.
- Stay up-to-date with ICD-10 changes by signing up to receive email notifications when the IHCP publishes new information to indianamedicaid.com look for the blue sign-up envelope throughout that website and in our Sign Up for IHCP Email Notifications box at the bottom of every IHCP banner page and bulletin (see below).
- Look for upcoming ICD-10 communications on the following topics:
 - ICD-10 testing
 - Prior authorization
 - All Patient Refined Diagnosis-Related Group (APR DRG) methodology
 - ICD-10 code table updates
- If you have questions about ICD-10, email the ICD-10 Questions Mailbox at <u>INXIX.ICD10Questions@hp.com</u>.

QUESTIONS?

If you have questions about this publication, please visit the <u>ICD-10 Information</u> page at indianamedidcaid.com.

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