

ICD-10 IHCP [^]bulletin

INDIANA HEALTH COVERAGE PROGRAMS BT201568 SEPTEMBER 22, 2015

IHCP cross walks diagnosis and procedure codes to ICD-10 – Part 4

The Indiana Health Coverage Programs (IHCP) has cross walked diagnosis and procedure codes to ICD-10 in policy areas where coverage is restricted or specific billing instructions have been established. The ICD-10 codes identified should be billed for dates of service (DOS) on or after October 1, 2015. See the [Span-Date Logic Tables](#) at indianamedicaid.com for information about when to use ICD-9 and ICD-10 for claims that span the October 1, 2015, date. Providers are responsible for billing the appropriate code with the highest level of specificity for the member's diagnosis, unless otherwise instructed. IHCP policy and related billing guidance, other than the crosswalk to ICD-10 codes as described, remains unchanged.

Hospital-Acquired Conditions

As announced in *IHCP ICD-10 Bulletin* [BT201560](#), the IHCP follows the Centers for Medicare & Medicaid Services (CMS) determinations for hospital-acquired condition (HAC) and present on admission (POA) diagnosis requirements. Further, the IHCP continues to exclude deep vein thrombosis and pulmonary embolism diagnoses following a total knee replacement or hip replacement in pediatric and obstetric patients from the HAC and POA requirements. The *Deep Vein Thrombosis and Pulmonary Embolism Diagnosis Codes Excluded from Hospital-Acquired Condition (HAC) and Present On Admission (POA) Requirements* have been cross walked to ICD-10 and are available on the [Code Sets](#) page at indianamedicaid.com.



Provider Preventable Conditions

The IHCP policy regarding provider preventable conditions (PPCs) has not changed. The IHCP continues to follow the CMS rule, which prohibits coverage for surgical or other invasive procedures to treat medical conditions when the practitioner performs the surgery or invasive procedure erroneously. These procedures include the following:

- Incorrect surgical or other invasive procedures
- Surgical or other invasive procedures on the wrong body part
- Surgical or other invasive procedures on the wrong patient

**Only 8 days remain until the implementation of ICD-10 on
October 1, 2015. Are you ready?**

The IHCP does not cover the hospitalization or any other service related to the noncovered PPC. All services provided in the operating room when a PPC occurs are considered related and, therefore, are not covered. All providers in the operating room when the PPC occurs are considered related and, therefore, their services are not covered. All related services provided during the same hospitalization in which the PPC occurs are not covered.

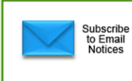
Hospitals and professional providers must use the correct diagnosis codes and modifiers to identify these services. The IHCP will deny provider claims for PPCs and related services. The *Provider Preventable Conditions Diagnosis Codes* have been cross walked to ICD-10 and are available on the [Code Sets](#) page at indianamedicaid.com.

QUESTIONS?

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