

PROVIDER *news*

INDIANA HEALTH COVERAGE PROGRAMS NL201303 MARCH 2013



Prepare for ICD-10 by practicing coding each day

Indiana healthcare officials from the Office of Medicaid Policy and Planning (OMPP), the Indiana State Medical Association (ISMA), and the Indiana Hospital Association (IHA) urge you and your staff to prepare for the International Classification of Diseases, Tenth Revision (ICD-10), by practicing daily with the new ICD-10 codes. Even though implementation is not until October 1, 2014, now is the time to become familiar with the new code set.

ICD-10 is bigger than the *Health Insurance Portability and Accountability Act* (HIPAA), because it could affect claims payment. A recent study revealed a 25% error rate among certified coders using ICD-10. As a result, the OMPP strongly suggests physicians and their staffs practice using the new codes.

Tip from the OMPP, ISMA, and IHA

To become familiar with the complexity of coding claims in ICD-10 versus ICD-9, the Indiana Health Coverage Programs (IHCP) suggests you code the first claim of each day using both ICD-9 and ICD-10 codes. This will allow billing staffs to become familiar with the new coding system.

The IHCP encourages you to use these ICD-10-coded claims for testing purposes with the IHCP through your software and clearinghouse vendor during the testing time frame currently under way. For more information, see the [ICD-10 Testing – Software and Clearinghouse Vendors](#) page on indianamedicaid.com.

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Providers may also use the [ICD-10 manual](#) at cdc.gov. You can find additional information about ICD-10 on the [Centers for Medicare & Medicaid Services \(CMS\) website](#) at [cms.gov \(Medicare>Coding>ICD-10> Provider Resources\)](#).

Providers and coders need to use what they learn, and practicing with ICD-10 codes will help keep the information fresh. If you have questions, email the ICD-10 Questions Mailbox at INXIX.ICD10Questions@HP.com.

For more information about getting started with ICD-10 codes and claims, see the [ICD-10 Training](#) page on indianamedicaid.com.

To become familiar with the complexity of coding claims in ICD-10 versus ICD-9, the IHCP suggests you code the first claim of each day using both ICD-9 and ICD-10 codes.

ICD-10 is real: 19 months and counting

At the end of February, the healthcare industry—and Indiana Medicaid providers—will have only 19 months to prepare for the October 1, 2014, implementation of the International Classification of Diseases, Tenth Revision (ICD-10).

Have you begun staff training?

Industry experts estimate it will take 10,000 hours or five years for a typical coder to become proficient in coding ICD-10 claims. One factor that will hamper the transition from ICD-9 to ICD-10 is that there is often not a one-to-one match between ICD-9 and ICD-10 codes.

“You won’t have to sit down and read the ICD-10 code book from cover to cover to code ICD-10 claims, but you will have to use standard coding guidelines for indexing to redefine diagnoses and procedures to ICD 10,” says HP ICD-10 Medical Policy Lead Geneane White, registered health information administrator (RHIA). “You can’t simply use the mappers alone.”

Will ICD-10 affect your revenue flow?

ICD-10 will definitely affect your revenue stream—especially if you are not ready! You may not want to think about ICD-10 yet, but unless your business or practice will remain completely untouched by ICD-10, you will have to make the change or face an interruption in your revenue stream. Industry studies show that even groups that believe they are unaffected by ICD-10 may, in fact, be affected one way or another by this major healthcare initiative. Preparing for ICD-10 will not guarantee a seamless transition—changes of this magnitude are rarely without problems—but one thing you can be sure of: If you are **not** ready, your claims will deny—by Indiana Medicaid or by other payers.

Do you know how much longer coding ICD-10 claims will take compared to ICD-9 claims? Do you know how the transition will affect reimbursement time? If you answer these questions with, “We’re not sure,” it’s time to begin assessing your organization’s readiness for ICD-10.



Indiana Medicaid is ready for vendor testing – are you?

Are your claim submission partners—managed care entities (MCEs), extract vendors, software vendors, and clearinghouses—ready for ICD-10? Have you talked with them about ICD-10?

Although ICD-10 testing with Indiana Medicaid is not mandatory for vendors now, the IHCP strongly encourages MCEs and extract vendors, as well as software and clearinghouse vendors, to test ICD-10 claims well before the October 2014 implementation date. To make it as easy as possible to start testing, the IHCP has created two ICD-10

Testing web pages—one for [MCEs and extract vendors](#) and one for [software and clearinghouse vendors](#). Visit the web pages today and encourage your claim submission partners do the same.

Recent links added to indianamedicaid.com:

- [Workgroup for Electronic Data Interchange \(WEDI\) and the Centers for Medicare & Medicaid Services \(CMS\) survey industry to determine ICD-10 progress – ICD-10 Information web page](#)
- [CMS ICD-10 updates delivered to your in-box – ICD-10 Information web page](#)

ICD-10 Question of the Month: It's quick and easy

The IHCP wants to hear from you! In an effort to build a dialogue with providers and vendors concerning ICD-10, the IHCP added a "Question of the Month" to the IHCP's monthly provider newsletter. The question also appears on the [ICD-10 Information](#) page on indianamedicaid.com. The Question of the Month addresses ICD-10 concerns and requires a simple, quick click of the mouse – "Yes" or "No." Please take 15 seconds to respond.

Results for the February 2013 question

Have you contacted or been contacted by your software vendor or clearinghouse/billing vendor about its readiness for ICD-10?

- Yes – 9
- No – 13
- Not affected by ICD-10 – 0

Please respond to the ICD-10 Question of the Month

Help us help you. It is quick and easy, so please take a moment to respond to the March 2013 Question. Remember: *We are all in this together.*

MARCH 2013 QUESTION

Do you know what the most common diagnosis code is for your specialty?

*(Click the link below that corresponds to your answer. An email containing your answer will be created. Add your comments to the email and click **Send.**)*

- [Yes](#)
- [No](#)
- [Not affected by ICD-10](#)

Look for Indiana Medicaid at IHIMA's annual meeting

The Indiana Health Coverage Programs will be at the Indiana Health Information Management Association (IHIMA) Annual Meeting April 17-19 at the Indianapolis Marriott Downtown. Be sure to look for us if you attend!

Sixth National Drug Take-Back Day slated for April 27

The Drug Enforcement Administration (DEA) has scheduled another [National Prescription Drug Take-Back Day](#) Saturday, April 27, from 10 a.m. to 2 p.m. Drug Take-Back Day allows people with unwanted, unused prescription drugs to safely dispose of the drugs at designated locations throughout the United States. In previous Take-Back events, the DEA and its law-enforcement and community partners removed more than 2 million pounds (1,018 tons) of prescription medications from circulation.



Collection sites are currently being organized. Please check the [National Prescription Drug Take-Back Day](#) website April 1, 2013, to locate collection sites near you.

Have you signed up for the EHR incentive program?

Incentive payments for the Electronic Health Records (EHR) initiative amount to more than \$106 million since the program's introduction in May 2011. A total of 1,409 eligible professionals and 91 eligible hospitals have benefited from these payments. For more information about EHR, see the [EHR Incentive Program](#) page on indianamedicaid.com.





RECENTLY PUBLISHED TO THE IHCP WEBSITE

BULLETINS

- [BT201303](#) – Corrections to Family Planning Eligibility Program guidance in BT201301
- [BT201304](#) – Indiana Medicaid HCBS Waiver Update

PROVIDER MANUAL UPDATES

[IHCP Provider Manual](#) – the following chapter of the manual has been updated:

- [Chapter 1](#) – *General Information*

[590 Program Provider Manual](#)

[Healthy Indiana Plan Reimbursement Manual](#)

[Right Choices Program Policy Manual](#)

LOOKING FOR MORE INFORMATION ABOUT PROVIDER MANUAL UPDATES?

- Subscribe to [IHCP E-mail Notifications](#).
- The Revision History at the front of each manual (or chapter) provides detailed information about the updates made in the most recent revision.

NEWS FROM RECENT BANNER PAGES

- [Online Provider Enrollment training held every Wednesday in February](#)
- [Register online for IHCP first-quarter workshops](#)
- [Hospital outpatient claims will be mass adjusted or reprocessed](#)
- [Training on physician fee increase provided](#)
- [HP implements new provider customer assistance call flow](#)
- [Check out provider education opportunities](#)
- [Bed-hold days paid in error will be mass adjusted](#)
- [Web interChange now allows claims with billed amount of \\$0.00](#)
- [Register online for IHCP first-quarter workshops](#)

FOR MORE INFORMATION

- Contact your [Provider Relations Field Consultant](#).
- [IHCP Provider Quick Reference](#) – This reference contains a complete list of addresses, telephone numbers, and fax numbers for the IHCP and IHCP vendors.

TO PRINT

A [printer-friendly version](#) of this publication, in black and white and without graphics, is available for your convenience.