

ICD-10 Frequently Asked Questions Volume 2.0 – August 6, 2013

This series of frequently asked questions (FAQs) and answers is the second FAQ volume published for ICD-10. Additional FAQs will be added as necessary to reflect questions received from our health care stakeholders around the state. The [first FAQ volume](#), which covers background information on ICD-10, is available on the Department of Community Health (DCH) website...

https://dch.georgia.gov/sites/dch.georgia.gov/files/related_files/document/ICD10_Remediation_Project_FAQ_2013.pdf

ICD-10 Training and Certification

Q: *What is the appropriate timeline to start ICD-10 training?*

A: The DCH ICD-10 Project Team recommends that you should begin your staff's ICD-10 training immediately. The transition to ICD-10 is a major undertaking for providers, payers and vendors. ICD-10 will drive business process and system changes throughout the health care industry -- from large national health plans to small provider offices, laboratories, medical testing centers, hospitals, etc.

Training needs will vary by organization type, size and staff role. For example, physician practice coders will primarily need to learn ICD-10-CM diagnosis coding, while hospital coders will need to learn both ICD-10-CM diagnosis and ICD-10-PCS inpatient procedure coding. ICD-10 training should be a primary focus of your practice. It will help you avoid a host of errors and frustrations – including claims rejections and denials – that may accompany the transition.

Q: *Where can I download ICD-10 presentations and register for ICD-10 webinars?*

A: The presentations, recordings and links to register for the ICD-10 webinars are located on the DCH website at www.dch.georgia.gov/it-events. Upcoming Events are near the top of the page and Past Events on the lower portion. Typically, all DCH ICD-10 webinar presentations will be made available for viewing on demand at the same website location within two business days after the live presentation.

Q: *I am interested in obtaining ICD-10 Certification. Where can I learn more about it?*

A: ICD-10 certification criteria will vary by certification entity (i.e. RHIA, RHIT, CCA, CCS, CCS-P, CHDA, CHPS, and CDIP). Any provider, trading partner, or clearinghouse responsible for a practice's coding faculty, health information management, or other components of ICD-10 implementation must prepare well in advance for code set training. (Continued...)

FAQ



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Please visit the Centers for Medicare & Medicaid Services (CMS) website at www.CMS.gov/icd10 or other online resources such as www.aapc.com or www.ahima.com for information on ICD-10 Certification.

Q: Are there CEU (Continuing Education Unit) credits available from the Department of Community Health (DCH) for participating in the DCH-sponsored ICD-10 webinars?

A: Currently, DCH does not offer CEU credits for its ICD-10 webinars. Should this change, DCH will share this information with all providers and trading partners.

Q: Can you provide me with a registration number for the next ICD-10 webinar?

A: To register for future webinars, go to the DCH website at www.dch.georgia.gov/it-events and click on the link for the particular ICD-10 webinar that you would like to attend and follow the instructions to register. If you have difficulty registering for a particular ICD-10 webinar, please contact the ICD-10 Project Team at icd10project@dch.ga.gov, and we will assist you further with the registration process.

Q: Who is in charge of handling the implementation and training of ICD-10 in medical offices, small rural hospitals, or other provider organizations?

A: Individual providers or provider groups, including clinics and hospitals, are responsible for their own implementation and training associated with ICD-10. Small practices and hospitals – like all other providers and HIPAA-covered entities – must understand, anticipate and address ICD-10's affect on revenue cycles, as well as clinical/compliance/reporting/operational systems.

ICD-10 Testing

Q: I am interested in becoming a beta test site for Georgia Medicaid. Where do I submit my request?

A: Please submit your request to the DCH ICD-10 Project mailbox at icd10project@dch.ga.gov and the ICD-10 Project Team will add you to the list of potential beta testers.

Q: When will I receive information about beta testing with Georgia Medicaid?

A: The DCH ICD-10 Project Team is currently reviewing the testing plan and strategies for ICD-10. The team expects to submit testing criteria to all beta testers selected during Q3 2013. Those not selected for testing will be notified accordingly.

Q: How do we participate in the testing if we haven't made the transition to ICD-10?

A: You cannot participate in ICD-10 testing without having transitioned to ICD-10. Be mindful that ICD-10 will affect your current business processes and your systems software (billing,

practice management, electronic health records). The assessment phase is critical, so start there. Make sure your software systems can support both ICD-9 and ICD-10 codes. Then you/your staff will need training in the new ICD-10 codes. To test internally within your organization or externally with your trading partners or payers (like DCH/Georgia Medicaid), you must have completed the assessment, training and implementation phases of the ICD-10 transition.

ICD-10 – Staying Informed

Q: What is the best resource to purchase an affordable ICD-10 coding book?

A: DCH cannot make recommendations for the best resource for purchasing ICD-10 coding books. It is up to the provider to do the research and make his/her own decision. There are various online resources for purchasing ICD-10 coding books such as www.amazon.com, www.contexomedia.com, www.aapc.com, etc.

Q: If I order a 2014 ICD-10 coding book now, will it be updated to another version later?

A: DCH does not provide input to publishers of ICD-10 coding publications. It is up to the provider to contact the resource directly for the final version of its coding books.

Q: How do I learn more about ICD-10?

A: Both the DCH and CMS websites contain a wealth of information about ICD-10. Visit the [DCH website](#) for ICD-10 information, webinar events and more. Send questions to the DCH ICD-10 Team via e-mail at icd10project@dch.ga.gov and join our mailing list at AskDCH@dch.ga.gov for the latest news about ICD-10 updates and events. Visit the CMS [ICD-10 website](#) for the latest news and resources to help you prepare for the **October 1, 2014**, deadline. You can also sign up for [CMS ICD-10 Industry Email Updates](#).

Dual Coding – ICD-9 and ICD-10

Q: Is there a transition period when we can use either ICD-9 or ICD-10 codes?

A: No. If the date of service on a claim is before October 1, 2014, and contains ICD-9 codes, then the claim will be accepted for payment. If the date of service is on or after October 1, 2014, and uses ICD-9 codes, then this claim will be rejected. All claims that contain a date of service on or after the federally mandated compliance date of October 1, 2014, **MUST** use ICD-10 codes to be accepted for payment. If a practice continues to use ICD-9 codes on claims with dates of service after the compliance date, the practice may be subject to penalties established by CMS.

Q: Will split billing be insurance specific? For example, if a patient is admitted on September 29, 2014, and discharged on October 3, 2014, will we have to do split billing?

A: If an inpatient claim has a discharge and/or through date of service on or after October 1, 2014, then the entire claim must be billed using ICD-10 codes. If an outpatient claim spans the compliance date, then DCH recommends that the provider(s) split the claim so that all applicable ICD-9 codes remain on one claim with dates of service (DOS) through September 30, 2014, and all ICD-10 codes be placed on a separate claim with DOS starting on or after October 1, 2014.

ICD-10 Compliance and Non-Compliance Penalties

Q: Do we have to wait until October 1, 2014, to start using ICD-10 codes?

A: Yes. Providers, payers, trading partners and clearinghouses will not be able to process claims using ICD-10 codes until the mandated compliance date of October 1, 2014. However, DCH strongly recommends that you conduct both internal and external testing with your trading partners and payers using ICD-10 code sets before the October 1, 2014, compliance date.

Q: How lenient will CMS be about the October 1, 2014, compliance date? What penalties will be involved if providers fail to meet the target?

A: The October 1, 2014, compliance date for ICD-10 provides time to prepare and test payment systems to allow for an orderly transition. Currently, there are no specific fines or sanctions provided under the final rules for ICD-10 (code sets) and 5010 (transaction standards). However, both are governed by the Health Insurance Portability and Accountability Act (HIPAA) of 1996 and updated by the Health Information Technology for Economic and Clinical Health (HITECH) Act which includes sanctions for current violations of HIPAA transaction and code sets. Details about the penalties can be found in the Code of Federal Regulations [45 CFR 160.404]. ***Note: any delay by entities to implement ICD-10 will likely affect the timeliness of claim payments to providers.***

ICD-10's Financial Impact on Your Practice

Q: Should our practice be stockpiling money to help us through the ICD-10 transition period?

A: The financial strategies used within your practice must be determined by your practice or your trusted advisers. If your practice is ill-prepared for the ICD-10 transition, you will most likely incur claims rejections and denials that will naturally affect your cash flow and your credit worthiness. Conversely, if your practice has adequately prepared for the ICD-10 transition, you should be able to submit clean claims for timely processing by your payers.

Q: Does the new ICD-10 code change affect the current Medicaid rates?

A: No changes are anticipated at this time by Georgia Medicaid nor has CMS provided any reimbursement rules or rates for the ICD-10-CM or ICD-10-PCS codes.

Q: If we experience significant delays in our reimbursements from Georgia Medicaid, we could be out of business. Is there any contingency plan in place to help us through the transition to ICD-10?

A: There is no contingency plan in place at this time. It is the provider's responsibility to submit clean claims in a timely manner and DCH's responsibility to pay those clean claims in a timely manner. Depending on your level of ICD-10 readiness, industry experts are advising providers to have several months of cash reserves or access to cash through a loan or line of credit to avoid potential cash flow headaches.

Coding, Tools and Crosswalking

Q: What is meant by "crosswalk" from ICD-9 to ICD-10 codes?

A: CMS and DCH refer to crosswalking as the act of mapping or translating a code in one code set to a code or codes in another code set. Crosswalking between ICD-9 and ICD-10 should be done on all codes currently used by your practice. This process will prove to be valuable during the transition to ICD-10. It will also prove instructional in identifying the differences between ICD-9 and ICD-10 codes.

Q: Is there crosswalking software of some special algorithm available that we can use to go from one code to the other?

A: There are various websites and resources that offer a number of translation tools or toolkits for ICD-10. Some are free; some are sold at varying prices. CMS has published its General Equivalence Mapping System (GEMS tool) to help with the crosswalking. It is available at www.CMS.gov/icd10. Note that this free tool is not comprehensive, but is frequently updated to add new codes. For more information on ICD-10, visit www.dch.ga.gov/ICD-10. For more information on tools, view the DCH ICD-10 webinar "Tools & Tips, Tackle the Transition to ICD-10," (6/27/13) posted under Past Events at www.dch.georgia.gov/it-events.

Q: Will the procedure codes (found in ICD-9-CM, Vol. 3) be changing as well for ICD-10?

A: Yes. The ICD-10 codes affect ICD-10-CM for diagnosis coding and ICD-10-PCS for inpatient procedure coding.

Q: Are any codes not affected by the transition to ICD-10?

A: Yes. The change to ICD-10 does not affect Current Procedural Terminology (CPT) or Healthcare Common Procedure Coding System (HCPCS) coding for outpatient procedures.

Q: Are the ICD-9-CM code sets being updated at all before October 1, 2014?

A: Yes. The final updates to ICD-9-CM codes will take effect on October 1, 2013. These updates will be in effect until the ICD-10 transition takes place on October 1, 2014. You can find the last official ICD-9-CM code titles, both full and abbreviated, posted on the CMS [website](http://www.CMS.gov/icd10) at www.CMS.gov/icd10.

Specific Codes for Select Facilities and Services

Q: As with ICD-9 Codes, are there ICD-10 codes specific to skilled nursing/long term care facilities? Will there be coding training specific to skilled nursing/long term care facilities?

A: The ICD-10-CM codes (for diagnoses) address codes that are more specific to any setting, including skilled nursing facilities. DCH will not offer code trainings. The provider, trading partner, or clearinghouse can perform an assessment of the ICD-9 codes that are currently being used to determine specific ICD-10 codes needed for the transition.

Q: Can a case manager/biller/coder submit a claim with a valid ICD-10 code if physician notes are submitted using ICD-9 codes or incorrect codes?

A: With the health care industry changing to ICD-10 coding on and after October 1, 2014, there may be medical documentation that includes ICD-9 diagnoses codes in patients' medical records. No biller or coder should correct claims (based on the insufficient or incorrect documentation of the physician) with the appropriate diagnoses or procedure codes. It is the responsibility of the physician to document in a clear, complete and concise manner about the patient's medical condition and treatment plan. In some Georgia Medicaid community-based support programs (waivers), the case manager may submit the waiver members' diagnoses code(s) to the biller or coder for record documentation and/or billing. Again, in this scenario, the case manager should confer with the physician's office to inform them to use appropriate ICD-10 diagnoses codes on or after October 1, 2014, rather than the ICD-9 diagnoses codes.

Entities Required to Transition to ICD-10

Q. Is every health care provider required to transition to ICD-10?

HIPAA law applies directly to three covered entity categories (providers, payers and vendors) and their business associates. Allied health care sectors such as health related research institutions, while not required, are encouraged to make the transition to ICD-10.

FAQ



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Q: Are the Care Management Organizations (CMOs) also transitioning on October 1, 2014? Do we have to contact our CMO about the transition?

A: All HIPAA entities, including CMOs, are impacted by the October 1, 2014, federally mandated compliance date. Providers should contact ALL of their payers (including CMOs), trading partners, clearinghouses, and/or billing companies regarding plans for the ICD-10 transition. DCH recommends that providers contact their CMO(s) as soon as possible so that they do not experience any disruptions in their CMO reimbursements on and after October 1, 2014.