ICD-10 Implementation

The U.S. Department of Health and Human Services has mandated that the ICD-9 Diagnosis Codes used by both medical coders and billers to report health care diagnoses will change to the ICD-10 Diagnosis Code set as of October 1, 2015.

The prerequisite to change to the ICD-10 Diagnosis Code set was the implementation of the Version 5010 standards for electronic health care transactions. The Version 5010 standard accommodates the ICD-10 Diagnosis Code set. Community Care currently is transacting using the Version 5010 standard. Any provider who currently submits claims to Community Care electronically (837), including Provider Online, or receives an electronic remit (835), is submitting and/or receiving a compliant, acceptable 5010 file format when billing either an ICD-9 or an ICD-10 diagnosis code. Providers who currently contract with either a billing and/or software vendor should contact them for information on their ICD-10 conversion and/or testing plan.

As of October 1, 2015, the ICD-10 Diagnosis Code set will replace the ICD-9 Diagnosis Code set. In order to comply with the implementation, there are specific instructions related to both ICD-9 and ICD-10, which are date-of-service driven. Please take the time to review the billing instructions outlined below. Providers can find examples of both the CMS-1500 and the UB-04 forms in the Provider Resources section of the Community Care website, www.ccbh.com

ICD-9 BILLING INSTRUCTIONS:

- **ICD-9 Outpatient Claim Submissions: CMS-1500**
  - Dates of Service through September 30, 2015 must be populated with an appropriate ICD-9 code.
  - No changes to current claim submission process.
  - ICD-10 codes, which populate any transactions related to outpatient dates of service prior to October 1, 2015, will systematically deny.
  - ICD-9 Diagnosis Code set 290-319.
  - **Claim must be submitted with ICD-9 ONLY.**
- **ICD-9 Inpatient Claim Submissions: UB-04**
  - Any inpatient claim with a discharge date prior to or on October 1, 2015 must be populated with an appropriate ICD-9 Diagnosis Code.
  - No changes to current claim submission process.
  - Inpatient claims billed with a discharge date on or prior to October 1, 2015 which are populated with an ICD-10 Diagnosis Code will systematically deny.
  - ICD-9 Diagnosis Code Set 290-319.
  - **Claim must be submitted with ICD-9 ONLY.**

**ICD-10 BILLING INSTRUCTIONS:**

- **ICD-10 Outpatient Claim Submissions: CMS-1500**
  - Outpatient dates of services, which occur on or after October 1, 2015, must be populated with an ICD-10 code.
  - ICD-10 Chapter V: Mental and Behavioral Disorders ‘F00-F98’.
    - ICD-10 Diagnosis Codes are 3-7 digits
    - Digit 1 is alpha, Digit 2 is numeric
    - Digits 3-7 are alpha or numeric.
    - Decimal is used after the third character.
  - ICD-9 codes populated in any transaction representing dates of service on or after October 1, 2015 will systematically deny.
  - **Claim must be submitted with ICD-10 ONLY.**

- **ICD-10 Inpatient Claim Submissions: UB-04**
  - Inpatient discharges after October 1, 2015 and inpatient interim encounters with a through date on or after October 1, 2015 must be populated with an ICD-10 code.
    - ICD-10 Diagnosis Codes are 3-7 digits
    - Digit 1 is alpha, Digit 2 is numeric
    - Digits 3-7 are alpha or numeric.
    - Decimal is used after the third character.
  - ICD-9 codes populated in any transaction representing dates of discharge after October 1, 2015 will systematically deny.
  - **Claim must be submitted with ICD-10 ONLY.**
Lastly, please feel free to contact the Provider Reimbursement Department through the Provider Line to discuss ICD-9 or ICD-10 billing questions. Keep in mind the Provider Line is \textit{unable} to assist you with either of the following:

- Determining the appropriate ICD-9 or ICD-10 to populate on either the CMS-1500 or UB-04.
- How to map an ICD-9 code to an ICD-10. This is the sole responsibility of the submitter.

Please call the Provider Reimbursement Department at 1-888-251-2224 if you have any questions concerning the above information.