ICD-10 FAQ’s

PriMed is committed to a successful transition to ICD-10 for all our products and services. We have assigned a dedicated team and developed a plan to help you achieve compliance by October 1, 2014.

The following questions address much of what your practice needs to know about ICD-10 so that you can prepare for the October 1, 2014 deadline for implementation.

Q1. What is ICD-10?
A. ICD-10 is the 10th Edition of the International Classification of Diseases set of diagnosis and inpatient procedure codes, which is published by the World Health Organization (WHO). The WHO authorized a US adaptation of the code set for government purposes. This is a larger and much more detailed set of codes compared to the ninth edition (ICD 9) used today.

Q2. Why does ICD-10 need to be implemented?
A. The Department of Health and Human Services (HHS) is requiring the move from ICD-9 to ICD-10 to bring the US into alignment with most developed countries throughout the world.

Q3. Who needs to implement ICD-10?
A. All “covered entities” as defined by HIPAA (this includes payers, providers and clearinghouses) are required to adopt ICD-10 codes for use in all HIPAA transactions with dates of service (or discharge dates) on or after October 1, 2014.

All physicians and their practices must implement ICD-10. Not using ICD-10 codes in the correct time frame will result in claims denials and your patients may experience a delay in care.

Q4. When does ICD-10 need to be implemented?
A. ICD-10 codes are required on all HIPAA transactions with dates of service (professional services) or discharge dates (institutional claims) on or after October 1, 2014. HPMG is focused on achieving compliance with the implementation dates required by CMS.
Q5. **Is there a standard for mapping between ICD-9 and ICD-10?**

A. No. Not all current codes will have equivalent codes in the new ICD-10 set. In some cases a current ICD-9 code will require several more codes in ICD-10. Documentation will need to support the use of the correct codes. It’s not just switching one code for another.

Centers for Medicare and Medicaid Services provided General Equivalence Mappings (GEMs) that will be referenced by Hill Physicians as a starting point for assessing and updating systems and procedures to utilize ICD-10 code sets. Clinical equivalence and intent of medical policies is the primary consideration. Per CMS “GEMs are a tool that attempt to map valid relationships between ICD-9 and ICD-10. They are not crosswalks, but support the development of crosswalks as a resource tool.”

Q6. **Will Hill Physicians accept claims after October 1, 2014 with ICD-9 codes?**

A. Yes, but only for claims with dates of service or discharge prior to October 1, 2014. Claims for dates of service or discharge dates on or after October 1, 2014, must be submitted with ICD-10 codes. Claims that do not comply will be rejected. Providers will be required to submit corrected claims within timely filing limits in order to pay the claim. Claim corrections will not be accepted via a telephone call to customer service.

Q7. **If I transition early to ICD-10, will Hill Physicians be able to process my claims?**

A. No. Hill Physicians will follow the CMS requirements to accept claims for dates of service or discharge dates after October 1, 2014 using ICD-10. Hill Physicians will not be able to process claims using ICD-10 codes until the compliance date.

Q8. **What should physician practices be doing to get ready for October 1, 2014?**

A. Educate yourself and your office staff.

- Assign overall responsibility and decision-making authority for managing the transition.
- Contact vendors, physicians, affiliated hospitals, clearinghouses, and others to determine their plans for ICD-10 transition.
- Ask your practice management software vendor about their plan to convert to an ICD-10 compliant version.
- Update superbills, EHR and office staff processes to incorporate the new codes.
- Make sure your biller has processes in place and is trained on ICD-10.
- Budget for project costs that may include training and software updates.
- Adhere to a well-defined timeline that makes sense for your organization.
Q9. What type of training will Hill Physicians provide for the transition?

A. Hill Physicians will provide information on training opportunities on this site into 2014. AHIMA recommends training to begin no more than six months before the compliance deadline. Providers should look for ICD-10 training offered through specialty societies and other professional organizations. Training needs will vary for different organizations and different members of your staff; physicians and coder training needs vary.

Q10. Where can I get more information?

A. Information is available on the internet regarding ICD-10. Here are links to some key sites:

- Center for Medicare and Medicaid Services (CMS)
  www.cms.gov/ICD10
- AAPC
  www.aapc.com/ICD-10/index.aspx
- American Medical Association (AMA)
- American Health Information Management Association (AHIMA) www.ahima.org/icd10
- American Academy of Family Physicians (AAFP)
  www.aafp.org/online/en/home/practicemgt/codingresources/icd10cm.html