



*Department of Health  
and Human Services*

*Maine People Living  
Safe, Healthy and Productive Lives*

# ICD-10 Webinar

**August 18, 2015**



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# ICD-10 Background

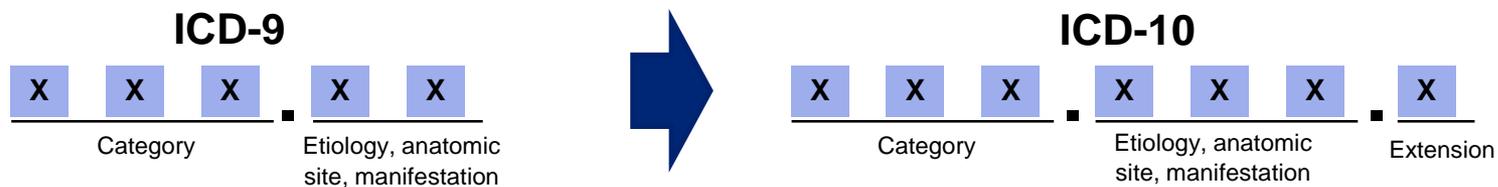


# What is ICD-10?

On **October 1, 2015**, the United States will move from the ICD-9 coding system to the ICD-10 coding system. This change will have a significant impact on provider and MaineCare processes.

## Key Differences and Changes

- ICD-10 is a much more complex scheme of classifying diseases reflecting recent advances in disease detection and treatment.
- ICD-10 involves fundamental coding changes, from 3-5 digit numeric codes in ICD-9 to 3-7 digit alphanumeric codes in ICD-10.



- ICD-9 codes are used by many providers and payers in business processes and technology systems. Changes may be required to support ICD-10.
  - Providers need to make changes to their processes and technology in order to continue uninterrupted transactions with payers, including MaineCare.
  - MaineCare is currently making changes to its processes and systems to be ready for ICD-10.

# Why Switch to ICD-10?

*The World Health Organization (WHO) adopted ICD-10 in 1990 and most industrialized countries have since wholly adopted it, except the U.S.*

## Issues With ICD-9

- Space and structural limitations - ICD-9 has no room for new codes
- Can lead to billing inaccuracy by assigning multiple procedures to a single code
- Lack of detail needed to support emerging needs such as Electronic Health Records (EHRs) and provider Pay for Performance (P4P)
- Does not support mortality reporting and biosurveillance used by the rest of the world
- Poses a barrier to comprehensive global tracking of health data

## ICD-10 Transition

## Benefits of ICD-10

- Better reflects current medical practices
- Supports patient care coordination across clinical settings
- Allows providers to track time spent on procedures
- Provides more specific data from clinical documentation
- Improves public health reporting and tracking
- Can improve research quality

## **MaineCare Updates to Prepare for ICD-10**

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*The office of MaineCare Services is in the process of making updates to our operations in order to accommodate ICD-10 codes.*

The following are changes to MaineCare operations:

- Changes to the Health PAS Online Portal Claim Submission Screen
- New paper claim forms
- Changes to the Prior Authorization (PA) processes

Go to MaineCare's ICD-10 website and listserv for other information and resources regarding ICD-10.

# Provider Impacts



# **Changes Needed by Providers to Prepare for ICD-10**

## **Operational updates required:**

- Business processes and paper and electronic forms may need to be modified to accommodate the new, longer codes.
- System updates, including replacement of all ICD-9 codes are required.
  - ✓ In most cases, there is an approximate one-to-one match, but not always. One ICD-9 code may correspond to many ICD-10 codes.
  - ✓ CMS has provided General Equivalence Mappings (GEMs) as a code tool that can assist providers in determining which ICD-10 codes to use.

## **Changes to claim submissions:**

All services, prior authorizations, and discharges conducted on or after October 1, 2015 must use ICD-10 codes. If ICD-9 codes are submitted for dates of service on or after October 1<sup>st</sup>, claims will be denied. Consult Medicare Learning Network® (MLN) ICD-10 Guidelines for exceptions. These can be found on the [CMS website](#).

## **Training for your employees:**

- Coding
- Documentation

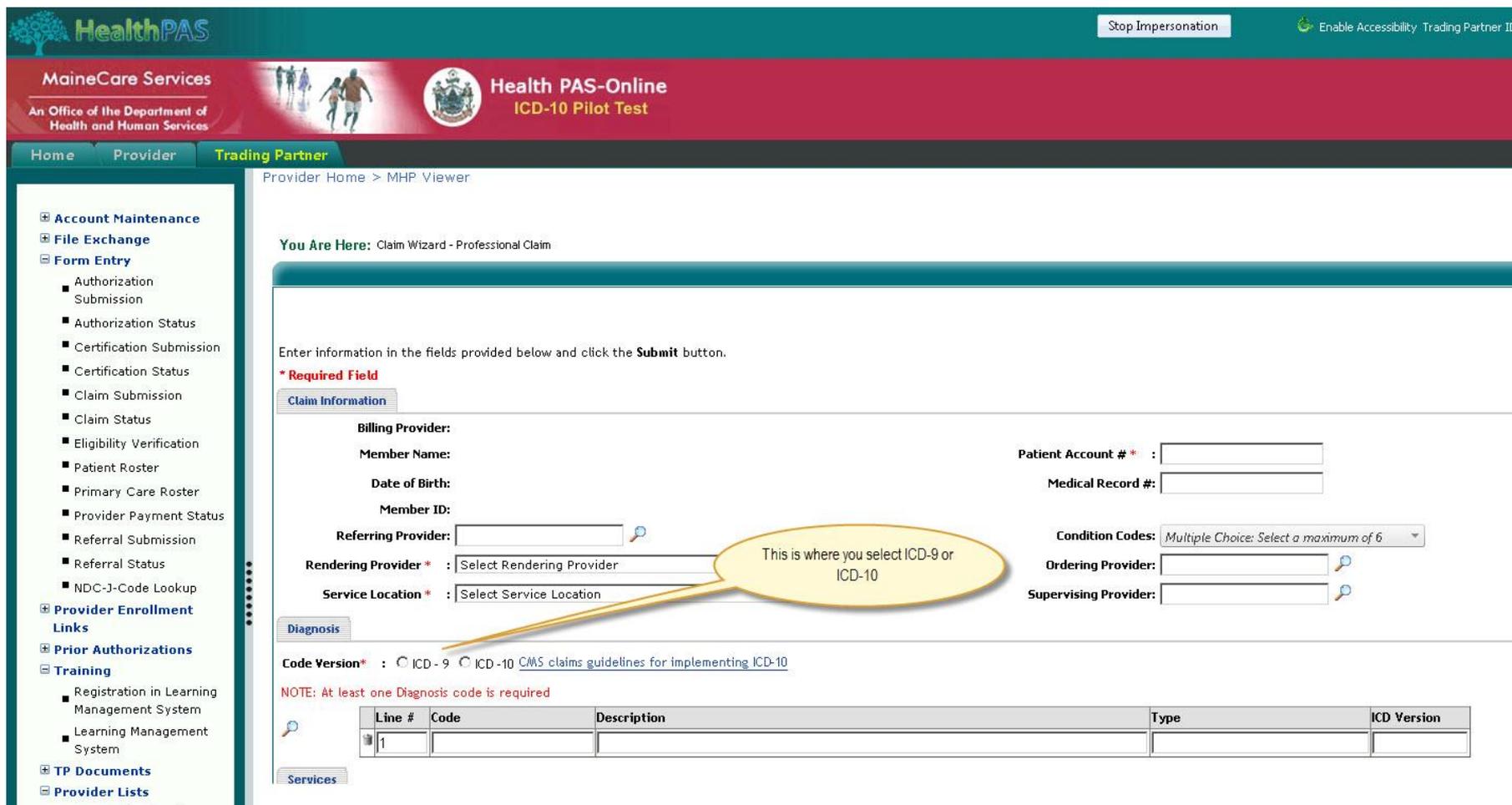
# Claims Submission



# Claims Submission and ICD-10

The below screen is the Health PAS Online Portal Claims Submission screen. This screen will be used to submit ICD-10 codes , for services rendered on or after October 1, 2015.

## Health PAS Online Portal – Claims Submission Screen



HealthPAS  
MaineCare Services  
An Office of the Department of Health and Human Services

Health PAS-Online  
ICD-10 Pilot Test

Home Provider **Trading Partner**

Provider Home > MHP Viewer

**You Are Here:** Claim Wizard - Professional Claim

Enter information in the fields provided below and click the **Submit** button.

**\* Required Field**

**Claim Information**

**Billing Provider:**  
**Member Name:** \_\_\_\_\_ **Patient Account # \*** :   
**Date of Birth:** \_\_\_\_\_ **Medical Record #:**   
**Member ID:** \_\_\_\_\_ **Condition Codes:**  Multiple Choice: Select a maximum of 6  
**Referring Provider:**  **Ordering Provider:**    
**Rendering Provider \*** :  **Supervising Provider:**    
**Service Location \*** :

**Diagnosis**

**Code Version\*** :  ICD - 9  ICD -10 [CMS claims guidelines for implementing ICD-10](#)

**NOTE:** At least one Diagnosis code is required

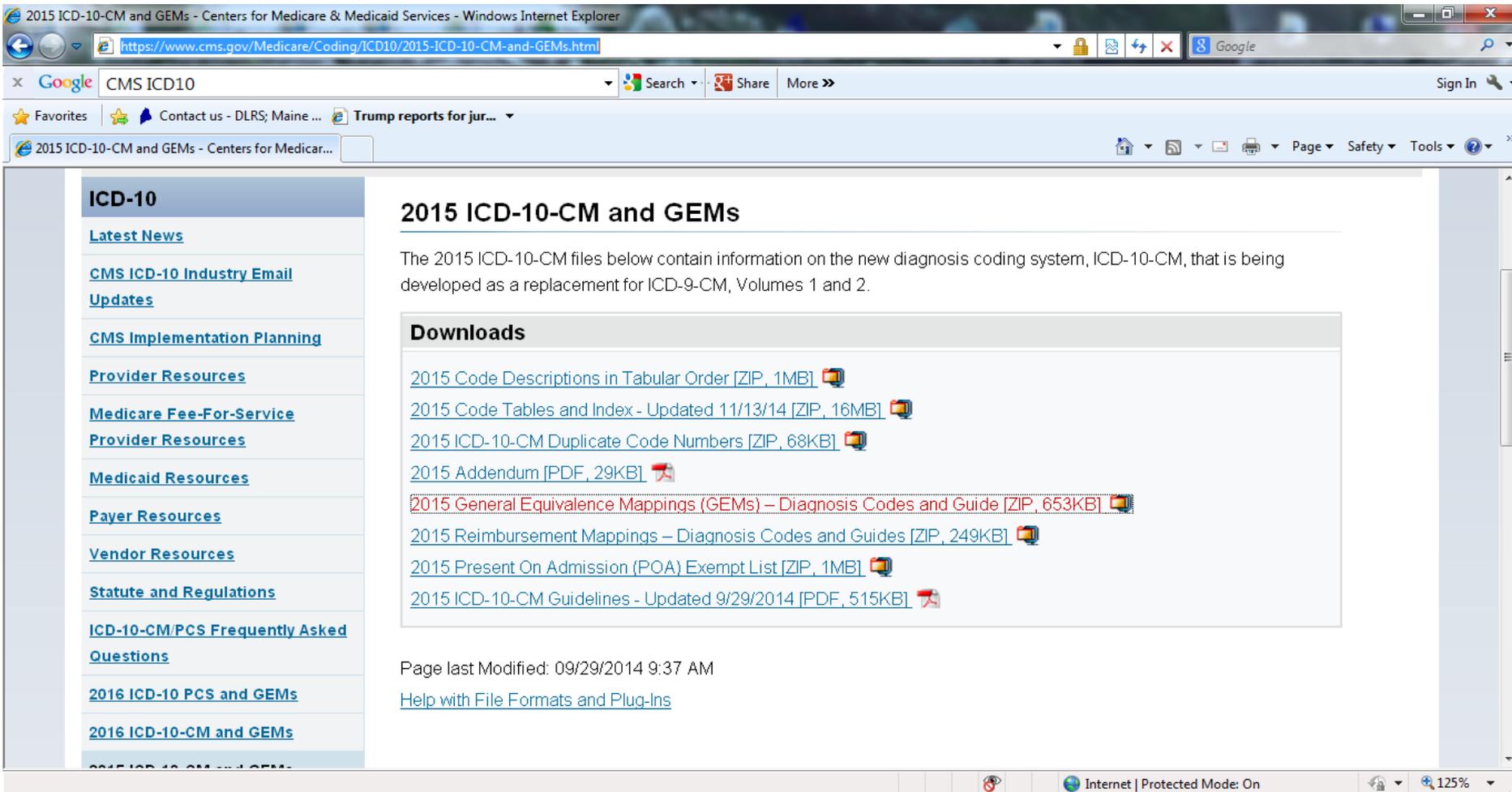
Line #	Code	Description	Type	ICD Version
1				

**Services**

- Account Maintenance
- File Exchange
- Form Entry
  - Authorization Submission
  - Authorization Status
  - Certification Submission
  - Certification Status
  - Claim Submission
  - Claim Status
  - Eligibility Verification
  - Patient Roster
  - Primary Care Roster
  - Provider Payment Status
  - Referral Submission
  - Referral Status
  - NDC-J-Code Lookup
- Provider Enrollment Links
- Prior Authorizations
- Training
  - Registration in Learning Management System
  - Learning Management System
- TP Documents
- Provider Lists

# GEMS for Code Mapping: ICD-9 to ICD-10

## CMS General Equivalence Mapping (GEMS): Code Crosswalk



The screenshot shows a web browser window displaying the CMS website. The address bar shows the URL: <https://www.cms.gov/Medicare/Coding/ICD10/2015-ICD-10-CM-and-GEMs.html>. The page title is "2015 ICD-10-CM and GEMs - Centers for Medicare & Medicaid Services".

The main content area is titled "2015 ICD-10-CM and GEMs". Below the title, there is a paragraph: "The 2015 ICD-10-CM files below contain information on the new diagnosis coding system, ICD-10-CM, that is being developed as a replacement for ICD-9-CM, Volumes 1 and 2."

Below the paragraph is a section titled "Downloads" containing a list of links to various files:

- [2015 Code Descriptions in Tabular Order \[ZIP, 1MB\]](#)
- [2015 Code Tables and Index - Updated 11/13/14 \[ZIP, 16MB\]](#)
- [2015 ICD-10-CM Duplicate Code Numbers \[ZIP, 68KB\]](#)
- [2015 Addendum \[PDF, 29KB\]](#)
- [2015 General Equivalence Mappings \(GEMs\) – Diagnosis Codes and Guide \[ZIP, 653KB\]](#)
- [2015 Reimbursement Mappings – Diagnosis Codes and Guides \[ZIP, 249KB\]](#)
- [2015 Present On Admission \(POA\) Exempt List \[ZIP, 1MB\]](#)
- [2015 ICD-10-CM Guidelines - Updated 9/29/2014 \[PDF, 515KB\]](#)

At the bottom of the page, it says "Page last Modified: 09/29/2014 9:37 AM" and provides a link: [Help with File Formats and Plug-Ins](#).

The left sidebar contains a navigation menu with the following items:

- ICD-10**
- [Latest News](#)
- [CMS ICD-10 Industry Email Updates](#)
- [CMS Implementation Planning](#)
- [Provider Resources](#)
- [Medicare Fee-For-Service Provider Resources](#)
- [Medicaid Resources](#)
- [Payer Resources](#)
- [Vendor Resources](#)
- [Statute and Regulations](#)
- [ICD-10-CM/PCS Frequently Asked Questions](#)
- [2016 ICD-10 PCS and GEMs](#)
- [2016 ICD-10-CM and GEMs](#)
- [2015 ICD-10-CM and GEMs](#)



# ICD-10 Related Error Messaging

If an ICD-10 code is input prior to October 1, 2015, an error message will be displayed.

Trading Partner  
Provider Home > MHP Viewer

This is the error message that will be displayed.

Enter information in the fields provided below and click the Submit button.

**\* Required Field**  
For Professional claims, all diagnosis codes must be active at the claim's service Start (From) Date.

**Claim Information**

**Billing Provider:**

Member Name: TEST, MEMBER998      Patient Account # \* : 123

Date of Birth: 4/30/1995      Medical Record #:

Member ID: |

Referring Provider: |      Condition Codes: *Multiple Choice: Select a maximum of 6*

Rendering Provider \* : |      Ordering Provider: |

Service Location: |      Supervising Provider: |

**Diagnosis**

Code Version\* :  ICD - 9  ICD -10 [CMS claims guidelines for implementing ICD-10](#)

Line #	Code	Description	Type	ICD Version
1	F81.9	Developmental disorder of scholastic skills	1	10

**Services**

Enter NDC Codes

Line #	DOS From *	DOS To *	Place of Service *	Code *	Modifier(s)	Related Diagnosis *	Charge *	Units *	Minutes *	EPSDT	Emergency	Auth #	Rendering
1	09302015	09302015	11	99213		1	\$50.00	1		<input type="checkbox"/>	<input type="checkbox"/>		

# ICD-10 Related Error Messaging

If an ICD-9 code is submitted after October 1, 2015 for services rendered on or after October 1, 2015 and the ICD-10 radio button is selected, you will see an error message displayed.

This is the error message that will be displayed.

Enter information in the fields provided below and click the Submit button.

**\* Required Field**  
Please enter valid Code.

**Claim Information**

**Billing Provider:**

**Member Name:**  **Patient Account # \*** :

**Date of Birth:**  **Medical Record #:**

**Member ID:**

**Referring Provider:**  **Condition Codes:**

**Rendering Provider \* :**

**Ordering Provider:**

**Service Location:**

**Supervising Provider:**

**Diagnosis**

**Code Version\*** :  ICD - 9  ICD - 10 [CMS claims guidelines for implementing ICD-10](#)

Line #	Code	Description	Type	ICD Version
1	327.23	Code Not found		

**Services**

Enter NDC Codes

# Split Billing Rules for Validation

*For claims spanning the October 1, 2015 cutover date, some claims will need to be split billed.*

Validation Item	Claim Types			
	Dental	Professional	Institutional	
<i>Bill Types</i>	N/A	N/A	11x, 18x, 21x, 32x	All other
<i>Date of Service</i>	Start Date	Start Date	Through date	Start date
<i>Spanning</i>	Not allowed: claim must be split billed	Allowed for DME claims only; others must be split billed	Allowed for stays that begin prior to, and extend through, cutover	Not allowed; claim must be split billed

# Prior Authorization



## Changes to Prior Authorization (PA)

*With the upcoming transition to ICD-10 codes on October 1, 2015, changes will be necessary in the PA process.*

- Any PA request must contain ICD-10 codes if the submission date is on, or after, October 1, 2015.
- The PA request must contain ICD-9 codes if the submission date is on, or prior to, September 30, 2015.
- Existing PAs with open service authorizations will be accepted for services provided on, or after, October 1, 2015, until authorized units are used.
  - One exception applies to changing the PA expiration date for out-of-state emergency hospital admissions. MaineCare review staff are able to extend the PA end date on an approved out-of-state emergency inpatient PA.
  - For existing PAs that span across the October 1, 2015 ICD-10 implementation date, MaineCare review staff will continue the existing process to add more units or add new service codes to the PA, as required, but the PA end date cannot be changed. A new PA request must be submitted for additional services after the existing PA is completed, and all authorized units are used.

### Examples:

- A PA is submitted on September 1, 2015. **This scenario would require ICD-9 codes on the request.**
- A PA is submitted on September 30, 2015 for twelve services. **This scenario would require ICD-9 codes, as the PA was submitted on, or before, September 30, 2015.**
- A PA is submitted on October 1, 2015 for twelve services. **This scenario would require ICD-10 codes as the PA was submitted on, October 1, 2015.**
- A PA is submitted on January 12, 2015 for twelve services. On October 1, 2015, five services remain open on the PA. **You can continue to utilize the PA for services after October 1, 2015, until the services expire. Any claims for services on, or after, October 1, 2015 need to be submitted with ICD-10 codes. You do not need a new PA until all services are utilized.**

# Prior Authorization Submission Screen

For more information about how ICD-10 will affect prior authorizations, please contact us through the ICD-10 email box at: [Mainecareicd10@molinahealthcare.com](mailto:Mainecareicd10@molinahealthcare.com)

## Health PAS Online Portal – Authorization Submission screen

**Enter either ICD-9 or ICD-10 diagnosis codes.**

**Diagnosis**

Seq#	Code	Description
1		

**Services**

Seq#	Code	Description	Modifier	Units
1				

**Miscellaneous Information**

**Accident Information**

Type:  Auto Accident  
 Employment  
 Other

Accident Date:

Investigation Required

**Notes**

Submit Cancel

Maine.gov | DHHS Home | Site Policies | Language Access | Copyright Notice | Privacy Statement

# Prior Authorization Form

*There is a minor change to the Prior Authorization form. In Section 1, Question 4, ICD-9 or ICD-10 diagnosis codes may be entered.*



**MaineCare Services**  
An Office of the  
Department of Health and Human Services

Paul R. LePage, Governor      Mary C. Mayhew, Commissioner

## Prior Authorization

PA

\_\_\_ New PA Request
\_\_\_ MEDICALLY URGENT REQUEST

Fax Date: \_\_\_\_\_ Submitter Name: \_\_\_\_\_

Submitter Telephone #: \_\_\_\_\_ Submitter Fax #: \_\_\_\_\_

Submitting Provider Return Address: \_\_\_\_\_

**Section 1: (See Section 3 for instructions)**

1. Submitting Provider Name and NPI or API
2. **ICD-9 OR ICD-10 diagnosis codes will be entered here.**
3.

4. <b>Diagnosis Codes (enter all applicable)</b>	Principal	Secondary	Admitting
	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>
	Code	Modifier	Unit(s)
5. <b>Service Procedure Codes/ J-Codes/ Description or NDC (if applicable)</b> <i>If PAing several service codes please attach them on a separate form</i>	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 20px; height: 25px;" type="text"/>	<input style="width: 20px; height: 25px;" type="text"/>
	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 20px; height: 25px;" type="text"/>	<input style="width: 20px; height: 25px;" type="text"/>
	<input style="width: 100%; height: 25px;" type="text"/>		
	<input style="width: 100%; height: 25px;" type="text"/>		

*McKesson criteria sheets have been updated to reflect the 2014 McKesson changes and to support ICD-10. MaineCare criteria sheets have also been updated to support ICD-10.*



2014 Procedures Criteria  
Breast Reconstruction  
Breast Reconstruction with Autologous Tissue Reconstruction

## 2014 Procedures Criteria Breast Reconstruction<sup>(1, 2, 3)</sup>

### Breast Reconstruction with Autologous Tissue Reconstruction

PATIENT:	Name	D.O.B.	ID#	GROUP#
CPT®/ICD:	Code	Facility	Service Date	
PROVIDER:	Name		Fax#	Phone#
	Signature		Date	NPI/ID#

ICD-9:

ICD-10:

CPT®:

HCPCS:

ICD-9 or ICD-10 codes  
can be input.

# Referral Requests



# Referral Request Form

The Primary Care Case Management (PCCM) Referral Request form will be updated to reflect the transition to ICD-10 codes. It will be possible to input either the relevant ICD-9 or ICD-10 codes.

 <p><b>MaineCare Services</b> An Office of the Department of Health and Human Services</p> <p>Paul R. LePage, Governor      Mary C. Mayhew, Commissioner</p>	<h2>Primary Care Case Management Referral Request</h2> <p>Type or print clearly to create your request:</p>	<div style="border: 1px solid gray; border-radius: 15px; padding: 10px; text-align: center; font-size: 2em; font-weight: bold;">REF</div>
Fax Date: _____ Submitter Name: _____		
Submitter Telephone #: _____ Submitter Fax #: _____		
Submitting Provider Return Address: _____		
<b>Section 1: (See instructions on attached page)</b>		
1. <b>Refer From:</b>	<input type="text"/>	<input type="text"/>
a. PCP Pay-To Name & NPI	<input type="text"/>	<input type="text"/>
b. PCP Rendering Name & NPI	<input type="text"/>	<input type="text"/>
2. <b>Member Name, MaineCare ID# &amp; DOB</b>	<input type="text"/>	<input type="text"/>
3. <b>Referral Dates</b> (unless specified, referral is entered for 6 months)	<b>From</b> <input type="text"/>	<b>To</b> <input type="text"/>
4. <b>Diagnosis Code</b>	<b>Principal</b> <input type="text"/>	<input type="text"/>
5. <b>Number of Referral Visits</b> (unless specified, 3 visits will be entered)	<input type="text"/>	<input type="text"/>

ICD-9 or ICD-10 codes will be entered here.

More Information



## Resources

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*For more information, please refer to the following resources:*

- MaineCare's ICD-10 website:  
<http://www.maine.gov/dhhs/oms/icd-10/>
  - ✓ MaineCare's Frequently Asked Questions webpage:  
<http://www.maine.gov/dhhs/oms/icd-10/faq.shtml>
  
- CMS resources:
  - ✓ ICD-10 Provider Resource webpage:  
<http://cms.gov/Medicare/Coding/ICD10/ProviderResources.html>
  - ✓ CMS General Equivalence Mappings (GEMs):  
<https://www.cms.gov/Medicare/Coding/ICD10/2015-ICD-10-CM-and-GEMs.html>
  
- Contact us:
  - ✓ Email Box: [ICD-10 Email Box](#)

# Questions and Answers



**THANK YOU** for being part of this important initiative!