



Department of Health
and Human Services
*Maine People Living
Safe, Healthy and Productive Lives*

ICD-10 Preparation for Dental Providers

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What is ICD-10?

The International Classification of Diseases (ICD) is a set of codes used worldwide to classify medical diagnoses and inpatient procedures.¹ ICD codes are primarily used for patient health records, provider reimbursement, and public health reporting and monitoring.

- The World Health Organization (WHO) is responsible for managing and publishing revisions to the ICD code set.
- The United States health care system currently uses the ninth version of the ICD code set known as ICD-9. ICD-10 is the tenth version, which was adopted by the WHO in 1990.²
- The WHO has been updating and publishing revisions to the ICD code set periodically since 1948. However, the ICD-10 revision is a much more significant change than previous revisions. This means that upgrading to ICD-10 has far-reaching impacts on the health care industry.
- WHO member countries began using ICD-10 in 1994. Most industrialized countries have adopted it, with the exception of the U.S. The U.S. federal government has mandated that the health care industry upgrade from ICD-9 to ICD-10 by [October 1, 2015].

1. <http://www.cms.gov/Medicare/Coding/ICD10/index.html?redirect=/ICD10>

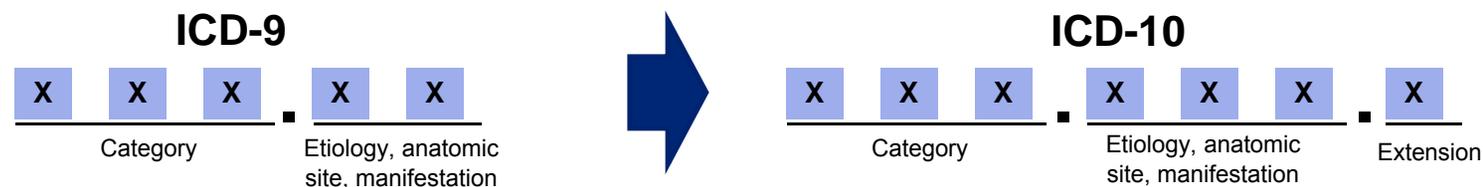
2. <http://www.aapc.com/icd-10/faq.aspx>

Key Changes from ICD-9 to ICD-10

The new coding system is significantly different than the ICD-9 system and provides much more specific information about medical conditions and procedures performed.

Key Changes from ICD-9 to ICD-10

- 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.

ICD-10 Impacts for Dental Providers

The ICD-10 transition will impact the forms, systems and processes utilized by dental providers.

General ICD-10 Impacts

Coding Changes

- ICD-9 based forms, such as the 1500 claim form, must be replaced by ICD-10 based forms to accommodate new, longer codes.
- CPT codes and HCPCS codes will not be impacted by ICD-10.

Vendors & Software

- The ICD-10 transition will affect all systems that use ICD-9, such as claims payment systems and Electronic Health Record (EHR) systems.
- Providers should consult with vendors, including clearinghouses, billing agencies, and software vendors, to confirm ICD-10 readiness of their systems.
- In billing agent/clearinghouse relationships, the following HIPAA transactions will be affected:
 - 270/271 Healthcare Eligibility Inquiry and Response
 - 276/277 Claims Inquiry
 - 278 Healthcare Services Review
 - 834 Benefit Enrollment Transaction
 - 837 Professional, Institutional and Dental Claims

ICD-10 Impacts for General Dentists and Dental Specialists

General dentists and dental specialists will be impacted by ICD-10 differently based on the forms, systems and processes they use.

Provider-Type Specific Impacts

General Dentists

- General dental practices use the American Dental Association (ADA) claim form, which does not require the use of diagnosis codes.
 - Therefore, they will see fewer impacts as a result of ICD-10.
- Once MaineCare transitions from the ADA 2006 form to the ADA 2012 form, dental practices will see an optional diagnosis code field on the ADA 2012 form.
- All systems involved in processing the 1500 form, which general dentists use to bill for translator services, must be analyzed and updated for ICD-10 readiness.

Dental Specialists

- Providers that frequently treat temporomandibular disorders, facial pain and sleep apnea will see the most changes with respect to diagnosis codes.
- ICD-10 also impacts smaller specialty groups such as pediatric dentists, oral pathologists and oral radiologists.
- Other dental specialists treating patients in a hospital or outpatient surgical center and those who offer more specialized services, such a periodontal surgeries, will also be affected.

ICD-10 Impacts to the ADA Claim Form

Areas of the ADA claim form that will be impacted by the ICD-10 transition are highlighted below.

Sample American Dental Association 2012 Claim Form for Dental Services

ADA American Dental Association® Dental Claim Form

HEADER INFORMATION																							
1. Type of Transaction (Mark all applicable boxes)																							
<input checked="" type="checkbox"/> Statement of Actual Services <input type="checkbox"/> Request for Predetermination/Preauthorization																							
RECORD OF SERVICES PROVIDED																							
	24. Procedure Date (MM/DD/CCYY)	25. Area of Oral Cavity	26. Tooth System	27. Tooth Number(s) or Letter(s)	28. Tooth Surface	29. Procedure Code	29a. Diag. Pointer	29b. Qty.	30. Description	31. Fee													
1	02/28/2013					D0120			Periodic oral exam	XX.XX													
2	02/28/2013			6	DF	D2331			Resin — two surfaces, ant	XXX.XX													
3																							
4																							
5																							
6																							
7																							
8																							
9																							
10																							
33. Missing Teeth Information (Place an "X" on each missing tooth.)						34. Diagnosis Code List Qualifier		(ICD-9 = B; ICD-10 = AB)		31a. Other Fee(s)													
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	A			C			32. Total Fee	XX.XX
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	(Primary diagnosis in "A")	B			D				

Enter a letter ("A" through "D") to point to a diagnosis entered in 34a.

Enter "AB" in #34 to indicate ICD-10-CM codes.

Enter ICD-10-CM diagnosis codes on lines A-D in box 34a.

The ICD-10 diagnosis code fields on the ADA 2012 form are optional.

Additional ICD-10 Readiness Considerations

Dental providers should assess their staff's readiness level and training needs in order to prepare for the transition to ICD-10.

Staff Readiness and Training

- Inform staff about the mandate to upgrade to ICD-10 and the compliance date of [October 1, 2015].
- Analyze staff training needs based on current or future roles and begin to prepare training materials.
 - Dental specialists need to understand the detailed documentation required to code ICD-10 appropriately, especially when using procedure codes.
- Provide training on how ICD-10 codes differ from ICD-9 codes, which forms and documents will be impacted by ICD-10, and how to look up ICD-10 codes.
- Provide staff with opportunities to ask questions on how ICD-10 will impact their day-to-day responsibilities.

Dental specialist staff will likely require more detailed training on ICD-10 than general dentist staff.

How Dental Providers Can Prepare for ICD-10

Awareness and Assessment

- Build awareness of the ICD-10 transition among staff.
- Create a project management structure.
- Perform an impact assessment and identify potential changes to business processes, forms, policies, and systems.
- Identify vendors to contact to discuss updates for ICD-10.
- Develop an implementation plan, including a plan for communicating with staff.
- Assess which staff will require what type of training (e.g., coding, clinical documentation, etc.).

Requirements and Design

- Map commonly used ICD-9 codes to ICD-10 codes.
- Document changes that need to be made to business processes, policies, software, and paper and electronic forms.
- Consider opportunities to make coding more efficient.
- Assess how many staff will need each type of training and develop/search for training programs and tools.
- Contact vendors (e.g., clearinghouses, trading partners, software) to discuss readiness steps.
- Refine the timeline for implementing changes and conducting training as needed.

Implementation and Testing

- Make changes to business processes, policies, software, and paper and electronic forms.
- Ensure that staff attend/complete necessary training.
- Continue close coordination with vendors to confirm vendor readiness.
- Contact payers and other business partners to arrange for testing ICD-10 claims.
- Conduct testing; if issues arise, work with payers, business partners, and vendors to identify and fix problems.

Identifying Commonly Used Codes

There are many sources available for identifying commonly used ICD-9 codes.

- The ICD-10 code set is a full replacement of the ICD-9 code set.
- While in some cases, there is an approximate one-to-one match between ICD-9 and ICD-10 codes, this is not always the case. One ICD-9 code may correspond to multiple ICD-10 codes.
- Providers are encouraged to search for code mapping sources.

General Equivalence Mappings (GEMs)

- The Centers for Medicare and Medicaid Services has provided a tool, called General Equivalence Mappings (GEMs), that can assist providers in determining which ICD-10 codes to use.
- GEMs defines reasonable matches for mappings between ICD-9 and ICD-10.
- GEMS is available for free on the [CMS website](#).

Other Tools

- Providers are encouraged to conduct research independently to identify specific ICD-10 codes related to their service type.
- Some example sources including the following options:
 - [AAPC](#)
 - [AMA](#)

Resources For Dental Providers

For additional information, please refer to the resources below.

American Dental Association	http://www.ada.org/en/
American Health Information Management Association	http://www.ahima.org/topics/icd10
Centers for Medicare and Medicaid Services	http://cms.gov/Medicare/Coding/ICD10/ProviderResources.html
MaineCare ICD-10 Webpage	http://www.maine.gov/dhhs/oms/icd-10/
MaineCare ICD-10 Email Box	MaineCareICD10@MolinaHealthCare.com