ICD-10 Preparation for Dental Providers

July 2014
The International Classification of Diseases (ICD) is a set of codes used worldwide to classify medical diagnoses and inpatient procedures. 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.

- 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].

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.

<table>
<thead>
<tr>
<th>ICD-9</th>
<th>ICD-10</th>
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<tbody>
<tr>
<td>Category</td>
<td>Category</td>
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<tr>
<td>Etiology, anatomic site, manifestation</td>
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<tr>
<td></td>
<td>Extension</td>
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- 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.
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.*

<table>
<thead>
<tr>
<th>Provider-Type Specific Impacts</th>
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<tbody>
<tr>
<td><strong>General Dentists</strong></td>
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<tr>
<td>- General dental practices use the American Dental Association (ADA) claim form, which does not require the use of diagnosis codes.</td>
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<td>- Therefore, they will see fewer impacts as a result of ICD-10.</td>
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<td>- 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.</td>
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<td>- 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.</td>
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<tr>
<td><strong>Dental Specialists</strong></td>
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<tr>
<td>- Providers that frequently treat temporomandibular disorders, facial pain and sleep apnea will see the most changes with respect to diagnosis codes.</td>
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<td>- ICD-10 also impacts smaller specialty groups such as pediatric dentists, oral pathologists and oral radiologists.</td>
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<td>- Other dental specialists treating patients in a hospital or outpatient surgical center and those who offer more specialized services, such as periodontal surgeries, will also be affected.</td>
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</table>
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.

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

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

Enter a letter (“A” through “D”) to point to a diagnosis entered in 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.

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<tr>
<th>General Equivalence Mappings (GEMs)</th>
<th>Other Tools</th>
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<tr>
<td>- 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.</td>
<td>- Providers are encouraged to conduct research independently to identify specific ICD-10 codes related to their service type.</td>
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<tr>
<td>- GEMs defines reasonable matches for mappings between ICD-9 and ICD-10.</td>
<td>- Some example sources including the following options:</td>
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| - GEMS is available for free on the CMS website. |   - AAPC  
   - AMA |
# Resources For Dental Providers

*For additional information, please refer to the resources below.*

<table>
<thead>
<tr>
<th>Resource</th>
<th>URL</th>
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<tbody>
<tr>
<td>American Health Information Management Association</td>
<td><a href="http://www.ahima.org/topics/icd10">http://www.ahima.org/topics/icd10</a></td>
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<tr>
<td>Centers for Medicare and Medicaid Services</td>
<td><a href="http://cms.gov/Medicare/Coding/ICD10/ProviderResources.html">http://cms.gov/Medicare/Coding/ICD10/ProviderResources.html</a></td>
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<tr>
<td>MaineCare ICD-10 Email Box</td>
<td><a href="MaineCareICD10@MolinaHealthCare.com">MaineCareICD10@MolinaHealthCare.com</a></td>
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