



From: Ted Dallas, Secretary, Department of Human Services

Date: July 13, 2015

Re: ICD-10 Implementation – October 1, 2015

In just 80 days, all providers and vendors that use ICD-9 codes will transition to ICD-10. This transition will affect every part of your practice, from software upgrades, to patient registration and referrals, to clinical documentation and billing.

With the compliance date quickly approaching, the Department of Human Services (DHS) wants to ensure you have all of the information you need to smoothly transition to ICD-10 on October 1, 2015. Claims for dates of service and for inpatient claims for dates of discharge of October 1, 2015 and later, must use ICD-10 codes. Please do not bill ICD-10 codes for claims with dates of service before October 1st, 2015, as that will cause a denial. If you are an electronic billing provider DHS suggests that you check with your clearinghouses to confirm you are ready for ICD-10.

DHS has also prepared for the transition, and our PROMISE™ system changes to accommodate ICD-10 are complete. PROMISE™ will accept claims with ICD-10 procedure and diagnosis codes beginning on October 1, 2015, and APR/DRG Version 31 was implemented earlier this month – this allows us to use ICD-10 diagnosis codes for inpatient claims.

The implementation of ICD-10 will:

- accommodate new procedures and diagnoses unaccounted for in the ICD-9 code set;
- allow for greater specificity of diagnosis-related groups and preventive services; and
- allow for improved accuracy in reimbursement, fraud detection, historical claims and diagnoses analysis for the health care system.

As you prepare for ICD-10 implementation, we wanted to share some facts that CMS gathered to address common questions and concerns heard about the transition:

1. You don't have to use 68,000 codes.

Your practice does not use all 13,000 diagnosis codes available in ICD-9. Nor will it be required to use the 68,000 codes that ICD-10 offers. As you do now, your practice will use a very small subset of the codes.

2. You will use a similar process to look up ICD-10 codes that you use with ICD-9.

Increasing the number of diagnosis codes does not necessarily make ICD-10 harder to use. As with ICD-9, an alphabetic index and electronic tools are available to help you with code selection.

3. Outpatient and office procedure codes aren't changing.

The transition to ICD-10 for diagnosis coding and inpatient procedure coding does not affect the use of CPT for outpatient and office coding. Your practice will continue to use CPT.

Additional information regarding the ICD-10 transition is available on the DHS website at www.dhs.state.pa.us/provider/icd10information/index.htm. If you have questions or are in need of assistance, please contact the Office of Medical Assistance Programs at RA-pwomapicd10@pa.gov.