

TEN THINGS TO KNOW ABOUT ICD-10

Affinity Health Plan has issued this fact sheet to create greater awareness of the shift to ICD-10, and to help our provider and vendor networks prepare for the impending transition.

1 ICD-10 IS HERE

The adoption of the ICD-10 code set represents a major shift for the healthcare industry. The ICD-10 code set was created in 1994 to replace ICD-9; the United States is one of the few countries still using ICD-9 codes.

The Centers for Medicaid and Medicare Services (CMS) mandated the use of ICD-10 codes starting on **October 1, 2015**. Affinity will require use of the new code set for both electronic and paper claims.



2 WHO IS AFFECTED

All HIPAA-covered entities are required to implement ICD-10. This includes payers such as Affinity; a broad range of providers; and any party involved in adjudicating provider claims. The affected parties include:

- Hospital groups
- FQHCs
- Facility-based practices
- IPAs
- Other multiple-provider offices, including multi-specialty groups
- Individual practitioners
- Clearing houses (e.g., Emdeon)
- Testing laboratories
- Pharmacies
- Vendors

3 COMPLYING WITH ICD-10

Per CMS regulations, as of October 1, 2015, Affinity will process claims only if they are compliant with ICD-10.

- Both electronic and paper claims must be submitted using the new code set.
- Claims cannot contain both ICD-9 and ICD-10 codes.
- Per CMS, health care providers and payers must use ICD-10 codes for services provided on or after October 1, 2015. Affinity expects claims to contain the ICD-10 code set as follows:

TYPE	CRITERIA
Outpatient/ Professional	Date of service of 10/1/2015 or later; excluded are “run-out” claims (those submitted to Affinity on or after 10/1/15, but with a date of service of 9/30/15 or earlier)
Inpatient/ Institutional	Discharge date of 10/1/2015 or later; included are “cross-over” claims (patient is admitted prior to 10/1/15, but discharged after 10/1/15)

Note: Affinity expects our providers and hospitals to independently perform “crosswalks” between ICD-9 and ICD-10 codes; we recommend GEMs (General Equivalence Mappings) as the preferred tool for this purpose. (See “Preparing for Implementation”)



4 BENEFITS OF THE NEW ICD-10 CODE SET

The upgrade to ICD-10 is necessary because the ICD-9 code set has reached its limits in terms of detail, completeness and capacity. In contrast, ICD-10 codes allow for greater coding detail, and will:

- Improve overall claims handling, including payment accuracy
- Decrease the frequency of denied claims
- Improve analysis and tracking of care outcomes, severity of diseases and conditions
- Allow better assessment of:
 - New treatments, including drugs and procedures
 - Technology for approval of reimbursement

5 ICD-10 MILESTONES

Affinity completes ICD-10 testing exercises with its providers and vendors

Affinity begins accepting authorization requests with ICD-10 code set for service on or after October 1, 2015

Latest date of service (outpatient) or discharge date (inpatient) for acceptance of claims using the ICD-9 code set

ICD-10 code set mandated for use by CMS

6 PREPARING FOR IMPLEMENTATION: HOW AFFINITY IS ENSURING A SMOOTH TRANSITION

Affinity will undertake these measures to remediate all non-ICD-10 compliant systems, policies and processes:

- Work with providers, suppliers and partners to implement the ICD-10 conversion
- Ensure we can properly accept and adjudicate claims containing ICD-10 codes
- Train our internal staff to ensure continuity of current processes
- Implement processes to help ensure claims are not improperly rejected

To ensure both Affinity and its contracted providers are fully prepared for the shift, Affinity is conducting ICD-10 testing exercises and expects to complete

testing in Q3 2015. Affinity strongly recommends all contracted practitioners and facilities to conduct testing with their trading partners at the earliest date possible in advance of the 10/1/15 implementation date.

Also, during Q1 of 2014, Affinity posted to its web portal (<https://affinityportal.affinityplan.org/portal/>) its ICD-10 impacted policies. These policies map current ICD-9 diagnosis codes to the new ICD-10 diagnosis codes using GEMs (General Equivalence Mappings) as a tool.

Note: GEMs are not software, but a translation dictionary available from CMS in a downloadable file format.

7 WHAT YOU NEED TO DO

Affinity's contracted practitioners and facilities can do a number of things right now to prepare for the ICD-10 transition, including:

- 1. Make a Plan** Obtain access to ICD-10 codes. The codes are available from many sources and in many formats:
 - Code books
 - CD/DVD and other digital media
 - Online (e.g., go to cms.gov/ICD10 and select "2016 ICD-10-CM and GEMS" to download 2016 code tables and index)
- 2. Train Your Staff** Train staff on ICD-10 fundamentals using the wealth of free resources from CMS, which include:
 - [The ICD-10 website](#)
 - [Road to 10](#)
 - [Email Updates](#)
 - [National Provider Calls](#)
 - [Webinars](#)
- 3. Update Your Processes** Update hard-copy and electronic forms (e.g., superbills, CMS 1500 forms)
 - Resolve any documentation gaps identified while coding top diagnoses in ICD-10
 - Make sure clinical documentation captures key new coding concepts
- 4. Talk to Your Vendors and clearinghouses**
 - Call your vendors to confirm the ICD-10 readiness of your practice's systems
 - Ask vendors, clearinghouses and third party billers about testing opportunities
- 5. Test Your Systems and Processes** Verify that you can use your ICD-10-ready systems to
 - Generate a claim
 - Schedule an office visit
 - Schedule an outpatient procedure
 - Prepare to submit quality data
 - Update a patient's history and problems
 - Code a patient encounter

8 FINDING MORE INFORMATION FROM AFFINITY ABOUT ICD-10

On the web

Via e-mail: ICD10_info@affinityplan.org

By phone: 1.866.247.5678

9 KEY ICD-10 TERMS: A GLOSSARY

Code mapping The act of creating a document (usually a spreadsheet) listing ICD-9 codes and the equivalent ICD-10 codes. Code mapping is performed by a certified medical coder

GEMs GEMs (General Equivalence Mappings) are the CMS-generated code map for all ICD-9 and ICD-10 codes

Run-out claim Claims with a date of service of 9/30/15, but submitted to Affinity on or after 10/1/15

Cross-walk solution Refers to a payer solution where software automatically maps ICD-9 codes to ICD-10 codes on submitted claims

Cross-over claims Inpatient claims which span the compliance date (i.e., patient is admitted prior to 10/1/15 and discharged on or after 10/1/15)

10 ICD-10 IS HERE TO STAY

As with any change, the implementation of ICD-10 requires our focus and attention to be successful. Our team is prepared to assist your practice with any questions or concerns.

Bob Allen Executive Vice President COO, Information Services & Technology

Sharon Deans Sr. Vice President - CMO

James Sweeney Vice President - Operations, Claims

Satish Kothapalli Sr. Project Manager EPMO