



ICD-10

Official CMS Industry Resources for the ICD-10 Transition
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ICD-10. COMPLIANCE DATE OCTOBER 1, 2015

News Updates | September 1, 2015

Get Ready Now: Be Sure Your Systems Are Ready

With ICD-10 less than 30 days away, now is the time to get ready. You can make sure your practice is prepared by following the ABCs of ICD-10:

- [Assess how ICD-10 will affect your practice](#) and [make a plan](#)
- [Be sure your systems are ready](#)
- [Contact your vendors](#)

Today, we'll explore "B" – "Be sure your systems are ready."

You'll want to verify that you can:

- Generate and submit claims
- Schedule outpatient procedures
- Perform eligibility and benefits verifications
- Prepare to submit quality data
- Schedule office visits
- Update patient histories and encounters
- Code a patient encounter

Get the **ABCs** and Get Ready Now!

B

BE SURE your systems are ready

Test your systems and processes

Can you generate an ICD-10 claim?



Can you submit an ICD-10 claim?



Hint

Check out the [ICD-10 Testing Infographic](#)

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Testing

The best way to ensure your systems are ready is to test. Focus on your highest-risk scenarios like claims processing and the diagnoses you see the most often as you test any system that stores, processes, sends, receives, or reports diagnosis code information.

You can test:

- Inside your practice
- With clearinghouses, billing services, and health plans

And **you can test even if your system is not ready**. If you don't have an ICD-10-ready system installed yet, you can still conduct meaningful testing. One good way to start is to look at ICD-10 codes for the top 10 conditions you see:

1. Consider the volume of conditions and those that account for most of your revenue.
2. Look at recent medical records for patients with these conditions and try coding them in ICD-10 for practice. Do the records include the documentation needed to supply select the correct ICD-10 code(s)?
3. Use any cases of insufficient documentation to create a checklist for clinicians to consult.

All Medicare fee-for-service (FFS) providers who submit electronic claims can conduct acknowledgement testing with their [Medicare Administrative Contractor \(MAC\)](#) at any time until September 30:

- You do not need to register to participate
- You may submit an unlimited number of claims
- You can acknowledgement test claims directly or through a clearinghouse or billing agency

To submit claims for testing, you must use:

- Current dates of service
- The test indicator "T" in the Interchange Control Structure (ISA) 15 field

For more information about testing your systems, check out the [ICD-10 Testing Infographic](#).

Alternate Claims Submission Methods

- Explore alternate ways to submit claims to health plans if you think your systems will not be ready for ICD-10 by October 1. For Medicare providers, options include:
 - Free billing software available from every [MAC website](#)
 - Part B claims submission by online provider portal (in about ½ of MAC jurisdictions)
 - Paper claims for providers who meet [Administrative Simplification Compliance Act Waiver](#) requirements
 - Each of these options requires you to code in ICD-10
- Ask other health plans you work with about the options they offer

Keep Up to Date on ICD-10

Visit the CMS [ICD-10 website](#) and [Roadto10.org](#) for the latest news and resources to help you prepare. Sign up for [CMS ICD-10 Email Updates](#) and [follow us](#) on Twitter.



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