CMS ICD-10
Official CMS Industry Resources for the ICD-10 Transition
www.cms.gov/ICD10

ICD-10.
COMPLIANCE DATE OCTOBER 1, 2015

News Updates | October 9, 2015

Use ICD-10 Now – Here's How

On October 1 the United States health care community transitioned to ICD-10. CMS wants providers to be successful in using ICD-10 and remains committed to working with industry on the transition.

To give providers a quick reference, we've posted the Use ICD-10 Now infographic below on our website. (To access the links in the infographic, please use the version on our website.)

ICD-10

Effective Date October 1, 2015

For details, see the CMS Quick Start Guide, Road to 10, and more at cms.gov/ICD10

Use ICD-10 Now – Here's How

1 Coding Claims

You must use **ICD-10** on claims for services provided on or after October 1

You must use **ICD-9** on claims for services provided before October 1

2 Splitting Claims

Many health plans require claims with dates of service spanning October 1 to be split into two claims:

Code services before Oct 1 with ICD-9

Code services on and after Oct 1 with ICD-10

For Medicare FFS requirements, see MLN Matters articles SE1325 and SE1408

3 Accessing Codes

Free code lists and ICD-9/ICD-10 mappings are available from CMS, vendors, and trade associations, for example:

- 2016 ICD-10-CM and GEMs (CMS)
- 2016 ICD-10-PCS and GEMs (CMS)
- CMS ICD-10 Code Lookup
- ICD-10 Code Translator (AAPC)

For more info see CMS list of ICD-10 Coding Resources

4 Free Resources

Resources to help you at no cost include:

1. Official CMS website
2. Road to 10, a CMS online tool at roadto10.org
   - See common codes, documentation tips, and clinical scenarios for your specialty
   - Build a customizable action plan

Many medical and trade associations also offer resources at low or no cost

Get More Info Visit the CMS website at cms.gov/ICD10

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Use ICD-10 Now. Find Out How.

Coding Claims: When to Use ICD-10 versus ICD-9

Use of ICD-10 versus ICD-9 on claims is based on dates of service—not on dates that claims are submitted.

- For dates of service before October 1, 2015, use ICD-9 codes.
- For dates of service on or after October 1, 2015, use ICD-10 codes.

For example, if you submit a claim for services provided on September 30, 2015, use ICD-9, even if you are submitting the claim in October 2015 or beyond.

For hospital inpatient claims, use date of discharge rather than date of service to determine whether to code in ICD-10 or ICD-9.

> **Important Note About Physician's Orders**
>
> For orders written with ICD-9 codes before October 1, CMS is *not* requiring the ordering provider to rewrite the original order with the appropriate ICD-10 code for lab, radiology services, or any other services. For more see the new Physician's Orders FAQ 12625.

Splitting Claims

Many health plans require claims with dates of service spanning October 1 to be split into two claims, one with ICD-9 and the other with ICD-10 codes.

A Medicare fee-for-service (FFS) claim cannot contain both ICD-9 codes and ICD-10 codes. Medicare will not pay claims containing both ICD-9 and ICD-10 codes. CMS has issued guidance for providers dealing with claims spanning the compliance date.

Accessing Codes

See the ICD-10 Coding Resources fact sheet to find out about accessing ICD-10 codes, ICD-9/ICD-10 mappings, and clinical documentation tips.

Other Resources

- Find the latest resources at the official CMS ICD-10 website.
- Visit Roadto10.org to build a customizable action plan, and to see common codes, documentation tips and clinical scenarios for your specialty.
- Find additional ICD-10 resources at low or no cost through medical and trade associations.

Keep Up to Date on ICD-10

Visit the CMS ICD-10 website and Roadto10.org for the latest news and resources, including the ICD-10 Quick Start Guide. Sign up for CMS ICD-10 Email Updates and follow us on Twitter.

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