ICD-10

Behavioral Health Q+A

The health care industry is preparing for monumental changes as it transitions toward implementing the International Classification of Diseases, Tenth Revision, also known as **ICD-10**.

> I am a provider of behavioral health services. Am I affected?

This question has been asked by a variety of providers, including ancillary service providers, such as transportation providers and waiver providers. The answer is straightforward. All providers required to include ICD-9 codes on claims today will be required to use ICD-10 codes beginning with the date of service or date of discharge of October 1, 2015.

> It is current practice in the addictions treatment and mental health fields for clinicians to use the DSM for diagnosing. Can these clinicians continue their current practice and use the DSM diagnostic criteria after 10/1/15?

Yes. However, neither DSM-IV nor DSM-5 is a HIPAA-mandated code set and therefore may not be used in HIPAA-standard transactions. Clinicians may continue to base their diagnostic decisions using the DSM criteria, but those codes must be translated to an appropriate ICD-10-CM code(s) when billing Ohio Medicaid. See the January 2014 Ohio Department of Mental Health & Addiction Services e-Update ICD-10-CM article on page 4 for additional information:

http://mha.ohio.gov/Portals/0/assets/News/eUpdates/eUpdateJanuary2014.pdf

>What ICD-10 codes should I use?

As with ICD-9, ICD-10 codes are derived from documentation in the medical record. The ICD-10 coding manuals do not address specialty service codes separately.

Specialty service codes are included with all other diagnosis codes, and are not labeled by specialty. If you are a service provider, you must research the codes that will apply to your business. If another provider supplies your ICD-10 codes, you must ensure those providers are ICD-10 compliant. You should consider identifying the most commonly utilized ICD-9 codes in your office and determine the correlating ICD-10 codes. CMS and many national provider associations have published ICD-10 resources to assist providers with this task. You may want to seek the advice of a professional coder. Some Independent providers are permitted to bill with a miscellaneous ICD-9 code today; these providers will be required to bill with the appropriate miscellaneous ICD-10 code beginning with services rendered on or after October 1, 2015.

> Where do I find more information on ICD-10 codes used specifically for behavioral health services?

Information regarding ICD-10 and behavioral health services can be found on page 4 of the Ohio Department of Mental Health & Addiction Services' (OhioMHAS) ICD-10-CM e-Update at:

http://mha.ohio.gov/Portals/0/assets/News/eUpdates/eUpdateJanuary2014.pdf .

OhioMHAS also posted ICD-10 coding information, code lists, and related documents at:

http://mha.ohio.gov/Default.aspx?tabid=240.

Finally, CMS posted guidance on the DSM and ICD at:

https://questions.cms.gov/faq.php?id=5005&faqId=1817.

question & answer information provided by these partners:

Ohio Department of Medicaid
John R. Kasich, Governor
John B. McCarthy, Director

Ohio MHAS
MENTAL HEALTH & ADDICTION SERVICES
Promoting wellness and recovery

> Are a list of ICD-10 codes & mapping information available?

Mapping ICD-9 to ICD-10 codes is addressed in CMS' GEMs publications available on the CMS website: **www.cms.gov/ICD10**. Many code maps may be accessed online by searching for "ICD-10 codes." Please keep in mind mapping from ICD-9 to ICD-10 is not always one-to-one. Additionally, the Medicaid claims payment systems will not automatically map an ICD-9 coded claim to ICD-10. It is your responsibility to submit the appropriate code based on the date of service or date of discharge. Claims may not contain a combination of ICD-9 and ICD-10 codes; individual claims may only contain one code set.

> ICD-10 and Span Date Billing

Some providers that submit claims for outpatient and/or professional services bill in span dates (multiple dates of service on a single claim). Claims may not contain a combination of ICD-9 and ICD-10 codes; individual claims may only contain one code-set. If ICD-9 and ICD-10 codes are submitted on the same claim, the entire claim will be rejected/denied.

ODM has published an *ICD-10 TIPS* document to assist providers that will submit outpatient and/or professional claims with from/through dates that will span the compliance date of October 1, 2015. In summary, the *ICD-10 TIPS* document states:

Two claims should be submitted:
1. One claim with ICD-9 codes should be submitted for outpatient and professional services with dates of service prior to October 1, 2015; and
2. One claim with ICD-10 codes should be submitted for outpatient and professional services with dates of service on or after October 1, 2015.

> What is the cost of non-compliance?

While no penalty will be assessed by Ohio Medicaid, the penalty for lack of preparedness is inherent; your claims cannot process and will deny or reject. Also, consider the cost of recoding and resubmitting claims that have denied or rejected because of incorrect coding – whether done by your office or through a Clearinghouse/Billing Service.

> Does the new ICD-10 code change affect the current Medicaid rates?

No changes are anticipated at this time by the ODM nor has CMS provided any reimbursement rules or rate changes for the ICD-10-CM or ICD-10-PCS codes.

> I contract with a Managed Care Plan. What do I need to do?

Managed Care Plans (MCPs) are required to comply with the ICD-10 changes. However, each MCP may have specific requirements for billing; therefore, providers are encouraged to contact the MCP with whom they contract for specific ICD-10 billing information.

> I use an Electronic Health Record (EHR)/Practice Management system. What do I need to do?

Contact the vendor that supports your system to ensure they have updated, or will be updating, the system to accommodate ICD-10.

> I use a Clearinghouse/Billing Service. What do I need to do?

You need to ensure your vendors will be ready to accommodate ICD-10. You may want to consider sending test claims to ensure their readiness. You should contact your Clearinghouse/Billing Service directly to determine their readiness and potential for testing with them.

Have More Questions? ICD10questions@medicaid.ohio.gov

question & answer information provided by these partners:

Ohio Department of Medicaid
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