October 1, 2015 - ICD-10 Implementation

For healthcare services provided on and after October 1, 2015, the ICD-9-CM code set used to document healthcare diagnosis will be replaced by ICD-10 code set. The transition to ICD-10 is required for all healthcare entities covered under the Health Insurance Portability and Accountability Act (HIPAA). This includes alcohol and other drug programs and mental health agencies certified by the Ohio Department of Mental Health and Addiction Services (OhioMHAS) that submit health care claims to payors, including the Ohio Medicaid program, Boards that continue to receive and process healthcare claims, Medicare, private insurance companies, Bureau of Workers Compensation, etc. Please note, the change to ICD-10 does not affect CPT/HCPCS (procedural service) coding for behavioral healthcare services.

Behavioral health providers have historically used the Diagnostic and Statistical Manual (DSM) system for diagnosing behavioral healthcare conditions. With the implementation of standardized code sets under HIPAA, which Ohio’s public behavioral health system transitioned to in State Fiscal Year (SFY) 2004, all claims submitted to MACSIS were processed using the ICD-9-CM code set. From the agency/behavioral health professional perspective, the ICD-9-CM and DSM-IV code sets were similar enough that agencies/behavioral health professionals that continued to use DSM-IV for diagnosing and submitted them on healthcare claims were still likely to be paid. With the publishing of the DSM-V and the HIPAA transition to ICD-10, the question has arisen about how the two code sets relate to each other, i.e. is there a crosswalk. These questions have even been posed to the Centers on Medicare and Medicaid (CMS). CMS provides resource information on their website located at http://www.cms.gov/Medicare/Coding/ICD10/ProviderResources.html.

In addition to the DSM-V/ICD-10 issue, there is not a simple one-to-one cross walk between ICD-9-CM and ICD-10 due to increased diagnosing specificity of the ICD-10 code set. OhioMHAS clinical and policy staff have reviewed the “Mental, Behavioral and Neurodevelopmental disorders” (F-codes found in Chapter 5) and the “Factors influencing health status and contact with health services” (Z-codes found in Chapter 21) of the ICD-10 code set and have made payment policy recommendations for use in MITS and MACSIS for Medicaid covered services. These recommendations have also been shared and reviewed with the OhioMHAS clinical roundtable participants.

The ICD-10 diagnosis codes that will be valid for behavioral health claims starting for services provide on or after October 1, 2015, is attached for your use.