

PROVIDER BULLETIN No. 13-67

September 25, 2013

TO: All Providers Participating in the NE Medicaid Program
All Medicaid EDI Trading Partners

FROM: Vivianne M. Chaumont, Director 
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Medicaid IT Initiatives

RE: **Medicaid ICD-10 Implementation Project
September 2013 Update**

Please share this information with Clinical, Coding, Billing, and IT Staff

The United States Department of Health and Human Services requires that all HIPAA covered entities use the International Classification of Diseases, 10th Revision (ICD-10) codes beginning October 1, 2014. This bulletin provides information regarding the Nebraska Medicaid ICD-10 Implementation Project.

ICD-10 Readiness

One of the frequently heard comments from Medicaid providers when asked if they will be ready to implement ICD-10 on October 1, 2014, is “depends on our software upgrade” or “waiting for our clearinghouse to tell us.” While the software upgrades and clearinghouse readiness are extremely important to the successful submission of ICD-10 codes, clinical documentation and diagnosis coding are just as critical.

Each provider is responsible for the needed changes to their clinical documentation and diagnosis coding. Additionally, reimbursements will be impacted if ICD-10 is not implemented timely and accurately by providers.

According to the CMS website at [CMS ICD-10 Planning Check List](#), critical steps for providers to follow are:

- **Assess staff training needs.** Identify the staff in your office who code, or have a need to know the new codes. There are a wide

variety of training opportunities and materials available through professional associations, online courses, webinars, and onsite training. Coding professionals recommend that training take place approximately six months prior to the ICD-10 compliance deadline.

- **Identify potential changes to work flow and business processes.** Consider changes to existing processes including clinical documentation, encounter forms, and quality and public health reporting.
- **Identify your current systems and work processes that use ICD-9 codes.** This could include your clinical documentation, encounter forms/superbills, practice management system, electronic health record system, contracts, and public health and quality reporting protocols. It is likely that wherever ICD-9 codes now appear, ICD-10 codes will take their place.

Please review the remaining planning steps, which include:

- **Talk with your practice management system vendor about accommodations for ICD-10 codes.**
- **Discuss implementation plans with all your clearinghouses, billing services, and payers to ensure a smooth transition.**
- **Talk with your payers about how ICD-10 implementation might affect your contracts.**
- **Budget for time and costs related to ICD-10 implementation, including expenses for system changes, resource materials, training, and potential slowdown of reimbursement if claims cannot be submitted or processed timely.**
- **Conduct test transactions using ICD-10 codes with your payers and clearinghouses.**

To assist providers in a successful transition to ICD-10 by October 1, 2014, Nebraska Medicaid will continue to publish monthly Provider Bulletins with helpful information and links to resources.

Resources

Check out the Nebraska Health Information Management Association website at: <http://www.nhima.org> for some training opportunities in Nebraska.

The Nebraska Medicaid ICD-10 Project website also has a number of Frequently Asked Questions at <http://dhhs.ne.gov/medicaid/Pages/ICD-10.aspx> .

The Centers for Medicare & Medicaid Services (CMS) has resources to help prepare for a smooth transition. Visit www.cms.gov/ICD10 to find out more.

Questions?

Please submit questions about this bulletin or about ICD-10 to DHHS.ICD-10Implementation@nebraska.gov.