ICD-9 to ICD-10 Conversion

Countdown To October 1, 2015
84 Days To Go
Goals of this Webinar

- Overview of ICD-10
  - Who, What and Why of ICD-10
  - The Basics
  - Overview of Changes
  - ICD-10 Code Structure
- DADS role now and ongoing
- Preparing for the Transition
  - Getting Ready for Transition
  - Impact of Non-Compliance
  - Form submission
  - Submission of Claims
- What DADS is doing to help providers prepare for transition
  - Where to find additional resources and information
- Q/A
Overview of ICD-10
What is the ICD?

• The International Classification of Diseases (ICD) is a system for coding diseases, signs, symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases.

• Developed by the World Health Organization (WHO) and is used internationally and maintained by the Centers for Disease Control (CDC), for use in the United States.

• Used world-wide to code and classify morbidity and mortality statistics, reimbursement systems, and automated decision support in health care.
Why is CMS Mandating This Change?

- Provides diagnosis and procedure codes that better reflect the patient's medical conditions and treatments
- Higher quality data to better assess medical care and outcomes and improve patient care and disease management
- Flexible and easier to update as technology, healthcare, and medicine continue to evolve
Who Must Use ICD-10 Codes?

• Required for anyone covered by the Health Insurance Portability and Accountability Act (HIPPA)

• Anyone who submits claims using diagnosis codes must make the switch.

• ICD-9 diagnosis and inpatient procedure codes cannot be used for services provided on or after Oct. 1, 2015.

• Includes State Medicaid Programs
When is the Implementation Date?

   - original compliance date of October 1, 2013.

2. **September 5, 2012** - new compliance date of October 1, 2014.
   - gives providers and other covered entities more time to prepare and fully test their systems to ensure a smooth and coordinated transition among all industry segments.

3. **April 1, 2014 - HR 4302**
   - October 1, 2014, “ICD-10 has been delayed, and may not be adopted prior to October 1, 2015.”

4. **October 1, 2015** - Go Live with ICD-10
   - 84 days to go!
ICD-10 Overview of Changes

- **Diagnosis Codes**
  - ICD-9: 3-5 characters
  - ICD-10: 3-7 characters

- **Procedure Codes**
  - ICD-9: 3-4 numeric digits
  - ICD-10: 7 alphanumeric characters

- **Number of Codes**
  - ICD-9: 15,000 codes
  - ICD-10: 155,000 allowable
ICD-10 Overview of Changes

- Includes new conditions, treatments and technology
- Includes greater specificity and granularity
- Includes details like laterality and obstetrical trimester
- Groups injuries by anatomical site
- Expands diagnosis code from 13,000 to 68,000 codes
- Expands procedure codes from 3,000 to 72,000 codes

Texas Department of Aging and Disability Services
ICD-10 Diagnosis Code Structure Overview

<table>
<thead>
<tr>
<th>Letter</th>
<th>Number</th>
<th>Characters can be letters or numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Category</th>
<th>Etiology, Anatomical site, Severity</th>
<th>Extension</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

Texas Department of Aging and Disability Services
ICD-10 Diagnosis Sample

- S93.401 - Sprain of unspecified ligament of right ankle, initial encounter.
- ICD 9- 845 ankle sprain
- ICD 10 – (required 5th 6th and 7th digits)
ICD-10-CM Code Structure

- A & B: Infectious and Parasitic Diseases
- C: Neoplasms
- D: Neoplasms, Blood, Blood-forming Organs
- E: Endocrine, Nutritional, Metabolic
- F: Mental and Behavioral Disorders
- G: Nervous System
- H: Eye and Adnexa, Ear and Mastoid Process
- I: Circulatory System
- J: Respiratory System
- K: Digestive System
- L: Skin and Subcutaneous Tissue
- M: Musculoskeletal and Connective Tissue
ICD-10-CM Code Structure

- N: Genitourinary System
- O: Pregnancy, Childbirth and the Puerperium
- P: Certain Conditions Originating in the Perinatal Period
- Q: Congenital Malformations, Deformations and Chromosomal Abnormalities
- R: Symptoms, Signs and Abnormal Clinical and Lab Findings
- S: Injury, Poisoning, Certain Other Consequences of External Causes
- T: Injury, Poisoning, Certain Other Consequences of External Causes
- U: no codes listed, will be used for emergency code additions
- V, W, X, Y: External Causes of Morbidity (homecare will only have to code how patient was hurt; other settings will also code where injury occurred, what activity patient was doing)
- Z: Factors Influencing Health Status and Contact with Health Services (similar to current "V-codes")
Impact on DADS and Programs
Services and Systems
All of DADS Programs and Services Providers Will Be Affected By ICD-10

- Home and Community-based Services (HCS)
- Texas Home Living (TxHmL)
- Community Living Assistance Supports and Service (CLASS)
- Deaf-Blind with Multiple Disabilities (DBMD)
- Medically Dependent Children’s Program (MDCP)

- Intermediate Care Facility for Individuals with Intellectual Disabilities or related conditions (ICF/IID)
- State Supported Living Centers (SSLC)
- Local IDD Authorities (LIDDA)
- Assisted Living Facilities (ALF)
- Community Care for the Aged and Disabled Programs
- Nursing Facilities (NF)
- Hospice
- HCSSA Providers
- Families
## DADS Systems Changes

### Systems Remediated

- Service Authorization System (SAS)
- Service Authorization System online (SASO)
- SAS Batch
- Intellectual Disabilities Client Assessment REgistration (ID CARE)
- Hospice/Smartforms
- Aged & Disabled (A&D) Data Mart
- Claims II
- QAI Datamart (not yet deployed)
- Impacts for CARE and AVATAR

### Forms

- ID/RC: Intellectual Disability / Related Conditions Assessment (Form 8578; CFC-8578)
- MN/LOC: Medical Necessity / Level of Care
- MDS: Minimum Data Set
Information For HCS and TxHmL Providers
&
What You Need to Know to Prepare
Intellectual Disability / Related Conditions (ID/RC) Submissions

- All ID/RCs (form 8578) submitted with effective dates prior to 10/1/15 will be required to have ICD-9 diagnostic codes only.

- All ID/RCs (form 8578) submitted with effective dates of 10/1/15 or later be required to have ICD-10 diagnostic codes only.

- ID/RCs with multiple diagnoses will be required to have diagnosis codes of the same version for each diagnosis included (e.g. ICD-9 or ICD-10).
C23/L23 ID/RC Assessment Data Entry

From August 3, 2015 to September 30, 2015 the Requested Begin Date can be specified directly on the C23/L23 Header Screen instead of requesting from DADS Central Office.

If the Requested Begin Date is before October 1, 2015 then the ICD Version will be set to 9 and an ICD-9 Code must be entered on the first Data Entry Screen.

If it is not a PC2 then the ICD-9 Codes will be displayed from the previous Assessment.

*Note: do not use decimals.

*Note: Field 27 Psychiatric Diagnosis, (DSM-IV) must be ICD-9 code before October 1, 2015.
C23/L23 ID/RC Assessment Data Entry

If the Requested Begin Date on or after October 1, 2015 then the ICD Version will be set to 10 and an ICD-10 Code must be entered on the first Data Entry Screen.

If it is not a PC2 then the ICD-9 Codes will be displayed from the previous Assessment.

*Note: do not use decimals.

*Note: Field 27, Psychiatric Diagnosis, (DSM-5) must be ICD-10 code on or after October 1, 2015.
Because the version shows as 10, the Diagnosis Codes must be a valid ICD-10 diagnosis codes.

If the code entered is not a valid ICD-10 Code there will be an Error Message stating that it is invalid.

The user will not be able to move to the next screen.

*Note: do not use decimals.*

*Note: Field 27, Psychiatric Diagnosis, (DSM-5) must be ICD-10 code on or after October 1, 2015.*
Code Conversions

- For some ICD-9 codes, there will be an ICD-10 code that directly corresponds to the individual’s established diagnosis.
  - One-to-one or many-to-one

- Some do not directly convert. Providers must obtain the ICD-10 code from a physician who must attest to the individual’s diagnosis by signing the ID/RC.
  - One-to-many and one-to-approximate
# Intellectual Disability Codes

<table>
<thead>
<tr>
<th>Diagnosis</th>
<th>ICD-9 code</th>
<th>ICD-10 code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mild ID</td>
<td>317</td>
<td>F70</td>
</tr>
<tr>
<td>Moderate ID</td>
<td>318.0</td>
<td>F71</td>
</tr>
<tr>
<td>Severe ID</td>
<td>318.1</td>
<td>F72</td>
</tr>
<tr>
<td>Profound ID</td>
<td>318.2</td>
<td>F73</td>
</tr>
<tr>
<td>Unspecified ID</td>
<td>319</td>
<td>F79</td>
</tr>
</tbody>
</table>
Code Conversions (cont.)

- DADS has developed a conversion widget for codes that have a direct match: “ICD Conversion Code Lookup for Related Conditions”
  - Can be found at the DADS ICD-10 webpage [http://www.dads.state.tx.us/providers/icd10/index.cfm](http://www.dads.state.tx.us/providers/icd10/index.cfm)
- For all other ICD diagnostic does, including codes not found on the DADS-approved related conditions list, DADS is not providing a conversion chart.
Claims Submission Beginning Oct. 1

- Program providers will be required to submit any forms with ICD-10 codes for any services or authorizations effective October 1, 2015 and after.

- For LTC, as opposed to acute care, claims are not tied to diagnosis code. However, all claims have to have valid ICD codes.

- Providers can submit claims between October 1, 2015 and October 1, 2016, using the following ICD-10 code:
  - \textbf{Z76.89} - Persons encountering health services in other specified circumstances

- Once an individual’s ID/RC contains a valid ICD-10 code, program providers can use that established ICD-10 code for claims submission.
Resources for Providers
DADS ICD-10 Webpage
http://www.dads.state.tx.us/providers/icd10/
Code Look up for Related Conditions

ICD-10 Conversion Code Lookup for Related Conditions

ICD Conversion Code Lookup for Related Conditions

This code lookup is a tool for program providers to find ICD-10 codes that directly correspond to ICD-9 codes on the DADS-approved Diagnostic Codes for Persons with Related Conditions List. It is not intended as a comprehensive conversion chart for all ICD codes. You can find more information on code mapping and conversion on the CMS website.

ICD-9 Diagnosis Code:  

Some codes do not have a direct conversion. If the ICD-9 code you enter does not show up in the code lookup, it does not have a direct ICD-10 match. For codes not found in this code lookup, please coordinate with a physician to obtain a valid ICD-10 diagnosis code.

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Other Resources For Providers

- General Information on ICD-10
- Q&A
- Resources and Handbooks
- Training Resources
- Communications
  - Information Letters
  - Physician Letter
- Webinars
- Provider Alerts
- Can be accessed from DADS Providers Webpage
ICD10@DADS.STATE.TX.US
HTTP://WWW.DADS.STATE.TX.US/PROVIDERS/ICD10/