

ICD-10 Follow On Class 1 Software Remediation

Fee Basis

Release Notes

FB*3.5*139



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**Department of Veterans Affairs
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Product Development**

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1. Introduction

1.1. Purpose

The purpose of Release Notes is to identify enhancements to the Fee Basis (FB) package contained in patch FB*3.5*139.

1.2. Background

On January 16, 2009, the Centers for Medicare & Medicaid Services (CMS) released a final rule for replacing the 30-year-old International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) code set with International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) and International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS) with dates of service or dates of discharge for inpatients that occur on or after the ICD-10 Activation Date.

The classification system consists of more than 68,000 codes, compared to approximately 13,000 ICD-9-CM codes. There are nearly 87,000 ICD-10-PCS codes, while ICD-9-CM has nearly 3,800 procedure codes. Both systems also expand the number of characters allotted from five and four respectively to seven alpha-numeric characters. This value does not include the decimal point, which follows the third character for the ICD-10-CM code set. There is no decimal point in the ICD-10-PCS code set. These code sets have the potential to reveal more about quality of care, so that data can be used in a more meaningful way to better understand complications, better design clinically robust algorithms, and better track the outcomes of care. ICD-10-CM also incorporates greater specificity and clinical detail to provide information for clinical decision making and outcomes research.

ICD-9-CM and ICD-10-CM Comparison

ICD-9-CM	ICD-10-CM
13,000 codes (approximately)	68,000 codes (approximately)
3-5 characters	3-7 characters (not including the decimal)
Character 1 is numeric or alpha (E or V)	Character 1 is alpha; character 2 is numeric;
Characters 2 - 5 are numeric	Characters 3-7 are alpha or numeric (alpha characters are not case sensitive)
Decimal after first 3 characters	Same

ICD-9-CM and ICD-10-PCS Comparison

ICD-9-CM Procedure Codes	ICD-10-PCS
3-4 characters	7 alphanumeric characters
All characters are numeric	Characters can be either alpha or numeric. Letters O and I are not used to avoid confusion with the numbers 0 and 1.
All characters are numeric	Each character can be any of 34 possible values. The ten digits 0-9 and the 24 letters A-H, J-N and P-Z may be used in each character.
Decimal after first 2 characters	Does not contain decimals

1.3. Scope of Changes

NOTE: Existing ICD-9 functionality has not changed.

Patch FB*3.5*139 makes the following changes to the FB application for the ICD-10 Diagnosis and Procedure Code Set implementation:

- Search Functionality for ICD-10-CM Diagnosis Code and ICD-10-PCS Procedure Code
- Add/Edit/Store and Display ICD-10-CM Diagnosis and ICD-10-PCS Procedure Code
- Print Information for ICD-10-CM Diagnosis and ICD-10-PCS Procedure Code
- Transmissions to the Central Fee and Non-VA-Hospital System (NVHS) Pricer systems to contain ICD-10-CM Diagnosis and ICD-10-PCS Procedure Code

The Product Development 508 Compliance Office Director, Patrick Sheehan, has determined that Fee Basis is a MUMPS roll-and-scroll application developed before 2004. A Section 508 CVS Application Form is in the process of being submitted to the VA for additional assessment.

1.4. Documentation

The FB manuals are posted on the VistA Documentation Library (VDL) [Fee Basis](#) page.

- The following FB manuals are updated with changes for FB*3.5*139.
 - FB V. 3.5 Technical Manual
 - FB V. 3.5 User Manual
- The following manuals do not contain changes relating to FB*3.5*139.
 - FB V. 2.0 Package Security Guide
 - FB V. 2.0 Installation Guide

2. General Enhancements

The Fee Basis package provides the ability to search on ICD-10-CM diagnosis codes and ICD-10-PCS procedure codes. In addition, the Fee Basis package provides add/edit/store, display, print and transmission capability for ICD-10 codes.

NOTE: Existing ICD-9 functionality has not changed.

2.1. ICD-10-CM Diagnosis Code Search

The Fee Basis ICD-10 diagnosis code search functionality allows the end user to select a single, valid ICD-10 diagnosis code and display its description. The Fee Basis user interface prompts the user for input, invokes the Lexicon utility to get data, and then presents that data to the end user.

This search method provides a “decision tree” type search that uses the hierarchical structure existing within the ICD-10-CM code set, as defined in the ICD-10-CM Tabular List of Diseases and Injuries, comprising categories, sub-categories, and valid ICD-10-CM codes.

ICD-10-CM diagnosis code search highlights include:

- Text-based search using one or more words as search terms, finding matches based on full descriptions, synonyms, key words, and shortcuts associated with ICD-10-CM diagnosis codes, which are inherently built into the Lexicon coding system.
- The more refined the search criteria used (i.e., the more descriptive the search terms), the more streamlined the process of selecting the correct valid ICD-10 diagnosis code will be.
- The user is presented with a manageable list of matching codes with descriptions, consisting of any combination of categories, sub-categories, and valid codes. The length of the list of items that is presented is set to a default of 20,000. If the list is longer, the user is prompted to refine the search.
- The user can “drill down” through the categories and sub-categories to identify the single, valid ICD-10-CM code that best matches the patient diagnosis.
- Short descriptions for the valid ICD-10-CM codes display.
- Partial code searches are also possible, as is full ICD-10-CM code entry, for situations where all or part of the code is known.

Example of ICD-10 Diagnosis Code Search

ICD1: S62

7 matches found

- | | | |
|----|--------|---|
| 1. | S62.0- | Fracture of navicular [scaphoid] bone of wrist (147) |
| 2. | S62.1- | Fracture of other and unspecified carpal bone(s) (357) |
| 3. | S62.2- | Fracture of first metacarpal bone (231) |
| 4. | S62.3- | Fracture of other and unspecified metacarpal bone (560) |
| 5. | S62.5- | Fracture of thumb (105) |
| 6. | S62.6- | Fracture of other and unspecified finger(s) (490) |
| 7. | S62.9- | Unspecified fracture of wrist and hand (21) |

Select 1-7: 1

4 matches found

1. S62.00- Unspecified fracture of navicular [scaphoid]
bone of wrist (21)
2. S62.01- Fracture of distal pole of navicular [scaphoid]
bone of wrist (42)
3. S62.02- Fracture of middle third of navicular [scaphoid]
bone of wrist (42)
4. S62.03- Fracture of proximal third of navicular
[scaphoid] bone of wrist (42)

Select 1-4: 4

42 matches found

1. S62.031A Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Initial Encounter
for closed Fracture
2. S62.031B Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Initial Encounter
for open Fracture
3. S62.031D Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Subsequent
Encounter for Fracture with Routine Healing
4. S62.031G Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Subsequent
Encounter for Fracture with Delayed Healing
5. S62.031K Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Subsequent
Encounter for Fracture with Nonunion
6. S62.031P Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Subsequent
Encounter for Fracture with Malunion
7. S62.031S Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of right Wrist, Sequela
8. S62.032A Displaced Fracture of Proximal third of
Navicular [Scaphoid] Bone of left Wrist, Initial Encounter
for closed Fracture

Press <RETURN> for more, "^" to exit, or Select 1-8: 1

2.2. ICD-10-PCS Procedure Code Search

Patch FB*3.5*139 allows the user to continue to search for ICD-10 diagnosis and procedure codes in the same manner as with current ICD-9 diagnosis codes.

NOTE: Existing ICD-9 search functionality has not changed.

2.3. Inactive Code Searches

For both diagnosis and procedure code searches, if the characters entered match an inactive, valid ICD-10 code, the application displays the matching ICD-10 code and short description (up to 60 characters), along with an indication of the inactive status, providing the ability for user to confirm their selection. When the user confirms their selection, a message displays stating the code is inactive for the date of service (i.e. "Date of Interest"), along with the actual date of service. The code is not associated with the patient record, and the system prompts the user to enter a code.

2.4. Add, Edit, Store ICD-10 Codes

Note: Please refer to the FB User Manual for information on ICD-9.

Patch FB*3.5*139 adds, edits and stores ICD-10 diagnosis and procedure codes within the following FB menu options:

- Unauthorized Claim Main Menu
 - Enter/Edit Unauthorized Claim Menu
 - Modify Unauthorized Claims
 - Re-open Unauthorized Claims
 - Payments for Unauthorized Claims
- Civil Hospital Main Menu
 - Payment Process Menu
 - Batch Main Menu
 - Generic Pricer Interface
- Community Nursing Home Main Menu
 - Enter/Edit CNH Authorization
- Medical Fee Main Menu
 - Enter Authorization
 - Payment Menu

2.5. Display ICD-10-CM Diagnosis Code

Patch FB*3.5*139 displays ICD-10 diagnosis codes up to 8 characters with a decimal after the third character within the following FB menu options:

- Unauthorized Claim Main Menu
 - Payments for Unauthorized Claims
 - Display Unauthorized Claim
- Civil Hospital Main Menu
 - Payment Process Menu
 - Batch Main Menu

- Output Menu
- Community Nursing Home Main Menu
 - Authorization Main Menu
 - Movement Main Menu
 - Output Main Menu
 - Payment Main Menu
- Medical Fee Main Menu
 - Outputs Main Menu
 - Payment Menu
 - Registration Menu
 - Supervisor Main Menu
- Pharmacy Fee Main Menu
 - Enter Pharmacy Invoice
 - Patient Re-imbursement
 - Review Fee Prescription
- Telephone Inquiry Menu

2.6. Display ICD-10-PCS Procedure Code

Patch FB*3.5*139 displays ICD-10 procedure codes up to 7 characters without a decimal within the following FB menu options:

- Unauthorized Claim Main Menu
 - Payments for Unauthorized Claims
- Civil Hospital Main Menu
 - Payment Process Menu
 - Batch Main Menu
 - Output Menu
- Community Nursing Home Main Menu
 - Output Main Menu
- Telephone Inquiry Menu

2.7. ICD-10-CM Diagnosis Code Reporting

Patch FB*3.5*139 prints ICD-10 diagnosis codes up to 8 characters with a decimal after the third character including short descriptions, and designates whether the diagnosis is ICD-9 or ICD-10 within the following FB menu options:

- Unauthorized Claim Main Menu
 - Add Vendor Payments Output

- Add Veteran Payments Output
- Civil Hospital Main Menu
 - Output Menu
- Community Nursing Home Main Menu
 - Output Main Menu
- Medical Fee Main Menu
 - Outputs Main Menu
 - Print Rejected Payment Items
- Pharmacy Fee Main Menu
- Telephone Inquiry Menu

2.8. ICD-10-PCS Procedure Code Reporting

Patch FB*3.5*139 prints ICD-10 procedure codes up to 7 characters without a decimal including short descriptions, and designates whether the diagnosis is ICD-9 or ICD-10 within the following FB menu options:

- Unauthorized Claim Main Menu
 - Payments for Unauthorized Claims
- Civil Hospital Main Menu
 - Output Menu
- Community Nursing Home Main Menu
 - Output Main Menu
- Medical Fee Main Menu
 - Outputs Main Menu
- Pharmacy Fee Main Menu
- Telephone Inquiry Menu

2.9. ICD-10-CM Diagnosis Code Transmission

Patch FB*3.5*139 transmits ICD-10 diagnosis codes up to 8 characters with a decimal after the third character to the Central Fee and the Non-VA Hospital System (NVHS) Pricer systems in Austin, Texas.

NOTE: Existing ICD-9 transmission capability has not changed.

2.10. ICD-10-PCS Procedure Code Transmission

Patch FB*3.5*139 transmits ICD-10 procedure codes consisting of 7 alphanumeric characters without a decimal to the Central Fee and the Non-VA Hospital System (NVHS) Pricer systems in Austin, Texas.

NOTE: Existing ICD-9 transmission capability has not changed.

3. Technical Information

3.1. Routines

Some FB routines were modified to replace direct global reads and old Application Program Interfaces (APIs) with new Standards and Terminology Services (STS) APIs and Lexicon APIs wherever possible.

The following new routines are added to FB:

Routine Name	Function
FBASF	Advanced Search Functionality, asks for full or partial ICD-10 Diagnosis code and calls the Lexicon ICD-10 diagnosis search function to display the results.
FBASFL	Advanced Search Functionality – displays a listing of ICD-10 diagnosis codes based on search entry.
FBASFU	Advanced Search Functionality utilities.
FBICD9	ICD-9 Diagnosis Code Utilities
FBICDP	ICD-9 & 10 Procedure Code Utilities

3.2. New Fields

The following new fields are added to FB:

Field Name	Modifications
ICD Diagnosis field (#.087)	Add the ICD DIAGNOSIS field (#.087), a pointer field to the ICD DIAGNOSIS file (#80), to the AUTHORIZATION multiple field (#161.1) of the FEE BASIS PATIENT file (#161) for ICD-10.
ICD Diagnosis field (#5.1)	Add the ICD DIAGNOSIS field (#5.1), a pointer field to the ICD DIAGNOSIS file (#80), to the FEE BASIS UNAUTHORIZED CLAIMS file (#162.7) for ICD-10.

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