

1068 Other rheumatic aortic valve diseases
1069 Rheumatic aortic valve disease, unspecified
1070 Rheumatic tricuspid stenosis
1071 Rheumatic tricuspid insufficiency
1072 Rheumatic tricuspid stenosis and insufficiency
1078 Other rheumatic tricuspid valve diseases
1079 Rheumatic tricuspid valve disease, unspecified



ICD-10

Official CMS Industry Resources for the ICD-10 Transition
www.cms.gov/ICD10



ICD-10: Facts for Hospitals

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Centers for Medicare and Medicaid Services

Today's Presentation

Topics

- ICD-10-CM and ICD-10-PCS overview
- ICD-10's impact on hospital claims
- Calculation of hospital quality measures
- CMS testing plans and results
- How to participate in CMS acknowledgement testing
- Tips for participants in CMS end-to-end testing
- CMS resources

075 Other rheumatic tricuspid valve diseases
074 Rheumatic tricuspid valve disease, unspecified
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061 Rheumatic disorders of both mitral and tricuspid valves
062 Rheumatic disorders of both aortic and tricuspid valves
063 Combined rheumatic disorders of mitral, aortic and tricuspid valves



ICD-10 Overview

October 1, 2015 Compliance Date

- ICD-10-CM (diagnosis codes) will be used by all providers in every setting
- ICD-10-PCS (procedure codes):
 - Used only for hospital claims for inpatient procedures
 - **Not** used on physician claims, not even those for inpatient visits

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Single Implementation Date

October 1, 2015 for everyone based on:

- **Date of service** for ambulatory and physician reporting

Use ICD-10 diagnosis codes on or after Oct 1

- **Date of discharge** for hospital claims for inpatient setting

Use ICD-10 diagnosis and procedure codes on or after Oct 1

Continue to use ICD-9 for dates of service or discharge before Oct 1

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CPT and HCPCS

No impact on use of:

- CPT (Current Procedural Terminology) codes
- HCPCS (Healthcare Common Procedure Coding System) codes

CPT and HCPCS will continue to be used for physician and ambulatory services ***including physician visits to inpatients***



ICD-10-CM Structure

ICD-9-CM	ICD-10-CM
<ul style="list-style-type: none">• 3 – 5 characters	<ul style="list-style-type: none">• 3 – 7 characters
<ul style="list-style-type: none">• 1st character numeric or alpha	<ul style="list-style-type: none">• 1st character alpha
<ul style="list-style-type: none">• Characters 2 – 5 always numeric	<ul style="list-style-type: none">• Characters 3 – 7 alpha or numeric
<ul style="list-style-type: none">• Decimal used after 3 characters	<ul style="list-style-type: none">• Decimal used after 3 characters

Note: ICD-10 alpha characters are ***not*** case-sensitive

Example: right ankle sprain, initial encounter

S93.401A, S93.401a, s93.401A, s93.401a

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ICD-10-PCS Structure

ICD-9-CM	ICD-10-PCS
<ul style="list-style-type: none">• 3 – 4 characters	<ul style="list-style-type: none">• 7 characters
<ul style="list-style-type: none">• All characters numeric	<ul style="list-style-type: none">• Characters can be alpha or numeric
<ul style="list-style-type: none">• Decimal used after 2 characters	<ul style="list-style-type: none">• No decimal

Note: ICD-10-PCS codes not case-sensitive



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Impact on Hospital Revenue

CMS analysis using 10 million FY2013 MedPAR records found:

- 0.41% had DRG shift to higher paying DRG
\$13 more per \$10,000 (+0.13%)
- 0.66% had DRG shift to lower paying DRG
\$17 **less** per \$10,000 (-0.17%)
- Net: 1.07% with a DRG shift
\$4 less per \$10,000 (-0.04%)
- **Statistically zero**

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Hospital Quality Measures

<<PLACEHOLDER FOR INFO ON
CALCULATING MEASURES FOR HOSPITAL
QUALITY PROGRAM>>

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Acknowledgement vs End-to-End Testing

Question	Acknowledgement testing	End-to-End testing
How many testers can participate?	Unlimited	Up to 50 end-to-end testers selected per MAC jurisdiction for each testing round.
What dates of services do testers use?	Current dates of service	Future dates of service (see MLN SE1501*)
Will the testing confirm payment and return an ERA to the tester?	No	Yes
Will the testing test National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs)?	No	Yes

*<http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1501.pdf>

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Medicare Acknowledgement Testing

- Available through September 30 to all Medicare FFS electronic submitters:
 - Providers
 - Suppliers
 - Clearinghouses
 - Billing agencies
- No registration required
- Unlimited number of claims can be submitted

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Medicare Acknowledgement Testing

Results

- No Medicare FFS claims systems issues
- Rejections largely due to issues unrelated to ICD-10

Tips

- You may submit directly or via clearinghouse or biller
- Check for valid NPI(s)
- Use current dates of service
- Include test indicator “T” in Interchange Control Structure (ISA) 15 field

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Medicare End-to-End Testing

Tips

- Use future dates of service:
 - Inpatient claims: discharge dates on or after Oct 1, 2015
 - Professional and institutional claims: Oct 1 - Dec 31, 2015
- Submit directly to your MAC with test indicator “T” in the ISA 15 field or through DDE submitters
- January and April end-to-end testers do not need to reapply to test again next week
- Check with your commercial health plans about testing

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Resources

Visit cms.gov/ICD-10

- Videos
- CME/CE opportunities
- Fact sheets
- Latest news
- Road to 10 (roadto10.org)

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[Introduction to ICD-10 Coding Video](#)



[ICD-10 Coding and Diabetes Video](#)

A banner for ICD-10 compliance. It features the CMS logo, the text 'ICD-10 Official CMS Industry Resources for the ICD-10 Transition www.cms.gov/ICD10', and a photo of a doctor. Below this, it states 'ICD-10. COMPLIANCE DATE OCTOBER 1, 2015'.



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Resources

Provider-Initiated Beta Testing Tools

- 1) NCD/LCD conversions to ICD-10
- 2) MS-DRG conversion project
- 3) Integrated Outpatient Code Editor

NCD: National Coverage Determination

LCD: Local Coverage Determination

MS-DRG: Medicare Severity-Diagnosis Related Group

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1409.pdf>

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Questions



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