



# MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

This document contains FAQs derived from Michigan Department of Community Health (MDCH) DCH. If you are unable to find the answer to your question in the FAQ, please send your question to [MDCH-ICD-10@michigan.gov](mailto:MDCH-ICD-10@michigan.gov). Click on the Table of Contents to link to the answer to the question.

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### *IMPACT ASSESSMENT, SYSTEM/BUSINESS PROCESS REMEDIATION, TRAINING, TESTING, IMPLEMENTATION*

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#### **Do I really have to conduct an Impact Assessment?**

- Yes.
- In order to understand how ICD-10 is going to impact your Practice, you will need to analyze all of your business operations to determine the magnitude of ICD-10 Implementation.

#### **What's the best way to get started?**

- Identify all areas currently impacted by ICD-9 and assess how it will need to be changed to ICD-10!
- A great way to get started is to visit CMS's website for a lot of useful ICD-10 information @ [www.cms.gov/icd10](http://www.cms.gov/icd10).

#### **Are there checklists or guidelines available to make sure we've covered everything?**

- Absolutely. Our primary recommendation is to direct Providers to the CMS website:
  1. Provider Resources @ <http://www.cms.gov/ICD10>
  2. Provider Timelines @ <http://www.cms.gov/Medicare/Coding/ICD10/ICD10ImplementationTimelines.html>
- Additional Resources are:
  1. AHIMA @ [http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1\\_049753.hcsp?dDocName=bok1\\_049753](http://library.ahima.org/xpedio/groups/public/documents/ahima/bok1_049753.hcsp?dDocName=bok1_049753)
  2. AAPC @ <http://www.aapc.com/memberarea/ICD10/intro.aspx>

#### **Is it safe to rely on my billing/practice management/EHR vendor?**

- No
- You should be in contact with all of your vendors in order to determine their ICD-10 readiness from now through implementation.



## **MDCH Specific ICD-10 Frequently Asked Questions (FAQs)**

### **What are some potential issues I am likely to run into as I get ready for the cutover date (or afterwards)?**

- ICD-10 Implementation:
  1. Sufficient training for all staff in the practice
  2. Documentation specific enough to support ICD-10 codes
  3. ICD-9 codes most commonly used in the practice have been accurately translated to ICD-10
- Post-Implementation: Delays and/or disruption in payment process

### *MDCH REMEDIATION STATUS*

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#### **What MDCH systems are affected by ICD-10 and need to be remediated?**

- As with Providers, all systems and software programs that are currently impacted by ICD-9 will be impacted by ICD-10.

#### **In CHAMPS, what transactions/functions are affected?**

- Any area that now uses diagnosis or inpatient procedure codes including but not limited to:
  1. HIPAA 837 (Dental, Institutional, Professional formats)
  2. HIPAA 837 (Encounters)
  3. HIPAA 277 (Claim Status Response)
  4. HIPAA 835 (Claim Payment/Advice)
  5. Claims Processing and benefits administration

#### **When will CHAMPS remediation be completed?**

- Testing will be ongoing; implementation to include ICD-10 Codes is scheduled for 10/1/2015.

#### **How will providers find out what they need to do to avoid surprises after October 1, 2015?**

- Ideally, testing with Payers is the best way to determine if Providers are ready for ICD-10 implementation.

### *HEALTH PLAN REMEDIATION*

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#### **Are Health Plans responsible for the ICD-10 remediation of their claims processing systems?**

- Yes – MDCH is currently conducting Business Partner Readiness assessment and monitoring activities to ensure our Health Plans are ICD-10 compliant with their contracted systems and information processing functions by October 1, 2015.



## **MDCH Specific ICD-10 Frequently Asked Questions (FAQs)**

- This includes Medicaid Health Plans, Mental Health Plans, Substance Abuse Agencies, County Health Plans and other managed care plans.

### **Are Health Plans responsible for communicating, training and testing with their network providers to ensure they are ICD-10 compliant?**

- Yes – This is a critical process for the successful remediation of their claims processing systems to ensure they are capable of sending ICD-10 coded encounters to MDCH by October 1, 2015.

### **What is the strategy to include the Health Plans' remediation of Encounter submission to MDCH?**

- A B2B test plan is in place and health plans will be contacted and help provided to ensure that they can submit encounters containing ICD-10 codes.

### **Will the 820 & 834 transactions be impacted by ICD-10?**

- There is no impact of ICD-10 directly on the 834 and 820.

## *BILLING AGENT REMEDIATION*

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### **What has 5010 implementation already accomplished relative to processing of ICD-10 coded transactions?**

- 5010 has provided a platform on which electronic ICD-10 claims can be submitted which includes increased field lengths for ICD-10 diagnoses, inpatient procedure codes and the new qualifiers.

### **What is the potential need for changes in how claims data is captured and forwarded to Billing Agents**

- There will need to be more upfront edits to validate qualifiers and diagnosis codes based on date of service.
- Billing agents (BA) should work with providers to be certain whatever software the provider is using will meet the needs of their BA system.

### **What 837 Claim changes will need to be made?**

- Diagnosis code lengths and qualifiers will change in the HIPAA 837 format for all Professional, Institutional and Dental claim submissions for both fee for service claims and encounters.

### **Are there any 835 Changes on the horizon? How about changes related to Warrant Rollup?**

- Billing agents (BA) should work with providers to be certain whatever software the provider is using will meet the needs of their BA system
- The 835 will continue to be created by tax id number.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### PROVIDER REMEDIATION

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#### Will my new EHR solve everything?

- No - The EHR is only as accurate as the individual who programmed the software. Therefore, it may be prone to errors and deficiencies.
- It is the Physician's responsibility to accurately document the patient's clinical condition to the highest level of specificity on the chart so that the ICD-10 code can be accurately reflected on the claim.

#### What will my billers and coders need to do in order to prepare adequately for ICD-10 implementation?

- For optimal results, it is suggested they obtain training through their certifying association (AAPC, AHIMA, etc.) and pass an exam for ICD-10.
- Additionally, it is recommended that they accurately translate your practice's most common diagnoses from ICD-9 to ICD-10 and apply that transaction within any appropriate system.

#### How can I prepare my billing systems for ICD-10?

- Check with your software vendor and billing agent to be certain the system(s) is ready to accept ICD-10 codes.

### POLICY CHANGES

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#### Will you be publishing a new Medicaid Provider Manual? What types of changes will be included in the new Manual?

- Yes – MDCH will publish a new version of the Medicaid Provider Manual to include changes necessary for the implementation of ICD-10.
- The online version will be revised to update policies associated with ICD-9 and ICD-10 codes and will be available closer to the October 1, 2015 implementation date.

#### Will you publish a crosswalk?

- No - MDCH will not publish a crosswalk. Code assignments for ICD-10 should be based on actual clinical documentation.
- CMS has provided General Equivalency Mappings (GEMs) in an attempt to include all valid relationships between the ICD-9 and ICD-10 code classifications. [Click here for 2015 GEMS](#)
- Clinical judgment should be exercised when using the GEMs as they are intended as a reference guide rather than a crosswalk or substitute for complete system changes.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### To what email address should I send any questions related to Michigan Medicaid's ICD-10 coding policies and practices?

- **Implementation:** MDCH-ICD-10-Policy@michigan.gov
- **Post Implementation:** MSAPolicy@michigan.gov

### CLAIMS PROCESSING

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#### What does it mean that ICD-10 is based on Date of Service?

- ICD-10 is date of service driven. All dates of service after the national implementation date, scheduled for October 1, 2015, should use ICD-10 codes.
- For Reporting of ICD-10 CM Diagnosis Codes To date/From date spanning 10/1/2015, refer to the following MSA Bulletin document @: [http://www.michigan.gov/documents/mdch/MSA\\_13-33\\_432318\\_7.pdf](http://www.michigan.gov/documents/mdch/MSA_13-33_432318_7.pdf)

*NOTE: Please refer to MSA Bulletin MSA 14-32 (July 2014) in reference to Date of Service regarding the new ICD-10 compliance deadline of October 1, 2015.*

#### Can ICD-9 and ICD-10 be submitted on the same claim?

- No - MDCH will not accept both ICD-9 and ICD-10 codes on one claim.
- Claims must be split so that all ICD-9 codes are submitted on one claim and all ICD-10 codes on another.

#### Will ICD-10 coded claims adjudicate the same as an equivalent ICD-9 coded claim?

- The processes should not significantly change from current processes once ICD-10 is implemented; MDCH is working toward payment neutrality.

#### Are all claims affected by the change to ICD-10?

- No - Non - HIPAA entities, i.e., Workman's Comp, will not be impacted by ICD-10.
- However, the ICD-9 code set will no longer be maintained as of October 01, 2015. Therefore, these entities may likely switch over to ICD-10.

#### What types of claims and what types of providers are most affected by the change to the use of the ICD-10 coding standard?

- Any provider who currently uses ICD-9 will be impacted by ICD-10.
- ICD-10-CM is used to identify and report diagnoses; however, ICD-10-PCS only impacts inpatient hospital providers because the code classification identifies inpatient procedure codes.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### *ENCOUNTER PROCESSING*

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#### **Are the edits being applied on our encounter transactions going to change as we transition from ICD-9 to ICD-10 in October 2015?**

- There will be several new edits set on encounters:
  1. Reject ICD-9 codes submitted for dates of service **on or after** 10/1/15
  2. Reject ICD-10 codes submitted for dates of service **before** 10/1/15 **and**
  3. Reject if ICD-9 and ICD-10 codes are submitted on the same encounter.
- The current edit validating the codes may change to a new edit number, but the logic will remain the same.

#### **Our clinicians use DSM-V codes for mental health diagnostic coding. We translate those codes to ICD-9 codes for billing and encounter reporting functions. Will that continue to be the process with ICD-10?**

- The same translation will need to occur.

### *AWARENESS AND TRAINING SESSIONS*

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#### **How are you planning on connecting with all the providers who bill Michigan Medicaid?**

- MDCH will be reaching out to our Provider community by: Awareness & Training activities.
  1. Awareness: Listserv messaging/updates, Policy Bulletins and Postcard Mailings
  2. Training: Live and Virtual ICD-10 trainings, Webcasts, Resource Documents to include PowerPoint Presentations published on our website.

#### **Where can I find out when you'll be providing a training session in my area?**

- Please check our website @ [www.michigan.gov/medicaidproviders](http://www.michigan.gov/medicaidproviders)
- Click the Medicaid Provider Training Sessions Button

#### **Can Practitioners who provide services to a Medicaid Health Plan participate in training sessions with MDCH?**

- Yes - Understanding that ICD-10 Implementation is a national initiative, MDCH would like to encourage anyone seeking knowledge in order to be successful during this transition.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### Are your training sessions accessible as webinars, for subsequent viewing if I can't attend a scheduled session?

- No - However, we have produced some informative Webcasts for your convenience which can be found on our website @ [www.michigan.gov/5010icd10](http://www.michigan.gov/5010icd10), click ICD-10 then click "Awareness and Training" button in MDCH Links.

### Are your presentation materials published on the MDCH web site?

- Yes - [www.michigan.gov/5010icd10](http://www.michigan.gov/5010icd10), click ICD-10 then click "Awareness and Training" button in MDCH Links.

## GENERAL TESTING QUESTIONS

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### I'd like to become a Billing Agent and send electronic claims to MDCH. What sort of testing do I need to perform in order to do that?

- If you are a new Billing Agent or provider, please contact [AutomatedBilling@Michigan.gov](mailto:AutomatedBilling@Michigan.gov) to pursue enrollment and/or setup in our B2B Test System and obtain authorization to send electronic claims to MDCH.
- If you are currently enrolled in the MDCH Medicaid system (CHAMPS), you may contact [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov) to begin B2B Testing of ICD-10 coded transactions with MDCH.

*NOTE: Providers must be "Associated" to their Billing Agent to enable the Billing Agent to submit transactions on behalf of the provider.*

### Where can I find more information, including ICD-10 testing instructions and protocols?

- Click on the HIPAA Implementation/ICD-10 button at [www.michigan.gov/tradingpartners](http://www.michigan.gov/tradingpartners).
- Detailed testing instructions and reference material are located under the Business-to-Business (B2B) Testing section near the bottom of the page.

### What's the difference between 'Stage 1 - Integrity Testing' and 'Stage 2 - B2B Testing'?

- Stage 1 - Integrity Testing focuses on transaction format and syntax testing and is available using the Ramp Manager tool for both new and existing Billing Agents. Transaction validation through Ramp Manager is optional for existing Billing Agents and is not a pre-requisite for CHAMPS ICD-10 B2B Testing activities.
- Stage 2 - B2B Testing allows providers and Billing Agents the opportunity to test claim, encounter and query transactions, and review transaction processing results, using either ICD-9 codes or ICD-10 codes, in the CHAMPS B2B Test environment.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### Whom should I contact with any general testing questions?

- Please contact [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov) for any questions related to ICD-10 Testing activities.
- You are also welcome to contact [MDCH-ICD-10@Michigan.gov](mailto:MDCH-ICD-10@Michigan.gov) if you have any questions regarding Michigan's ICD-10-related practices or policies not specifically related to testing activities.

## RAMP MANAGER

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### What is Ramp Manager?

- Ramp Manager is available for use by current or prospective Billing Agents who wish to validate the format of their v5010 837 transaction files. This validation, which is part of our Stage 1 - Integrity Testing, is performed using the EDIFICS Ramp Manager automated testing website.
- This tool provides an easy-to-use, self-service environment to test 837 v5010 ICD-10 claims and encounters for HIPAA syntax and format compliance.
- Ramp Manager does not verify data such as NPIs or beneficiary IDs, which are verified during Stage 2 – B2B Testing.

### Who needs to test using Ramp Manager?

- All new Billing Agents wishing to send 837 claims or encounters to MDCH must complete Stage 1 - Integrity Testing in order to be approved Billing Agents in CHAMPS.
- Existing Billing Agents wishing to participate in B2B Testing of ICD-10 coded 837 transactions may elect to use Ramp Manager to test the syntax and integrity of their 837 file. This is most appropriate when our Billing Agents implement new software or code sets and wish to ensure that those changes have not affected the integrity of their EDI files.

### How do I get access to Ramp Manager?

- The B2B Test team prepares an email invitation which includes your login information and reference materials. If you have not yet received an invitation and you are interested in testing with Ramp Manager, our B2B Test team can be contacted at [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov).

### I have used Ramp Manager before. Do I still have access to the test programs that I previously used?

- If you were previously enrolled in the Ramp Manager testing community by the MDCH B2B Test Team to verify your HIPAA 5010 test transactions, you may continue to use Ramp Manager to validate the structural integrity of your 5010 test files, which may contain ICD-10 codes.
- You may need to contact [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov) if you don't remember your login credentials.
- New Billing Agents wishing to start sending electronic transactions to MDCH should contact [AutomatedBilling@michigan.gov](mailto:AutomatedBilling@michigan.gov) for first-time submitter testing instructions.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### Whom should I contact with any Ramp Manager related questions?

- The MDCH B2B Test team is available for questions. Contact us at [MDCH-B2B-Testing@michigan.gov](mailto:MDCH-B2B-Testing@michigan.gov).

## B2B TESTING WITH MDCH FOR ICD-10

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### What is MDCH's goal for ICD-10 B2B testing?

- MDCH's goal is to encourage as many of our partners as possible to test their ability to submit and our ability to process ICD-10 coded transactions, to ensure that claims and encounters prepared using ICD-10 codes will process correctly after the 10/1/2015 compliance date.

### When can we start testing with MDCH?

- External Testing is currently underway; you can start testing with MDCH as soon as you are ready. If you are a Trading Partner with MDCH and have not received an invitation to test, or you have any questions related to ICD-10 B2B Testing, please contact us at [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov).

### What other types of ICD-10 testing is available if I'm not ready to send you test 837 EDI files?

- Scenario-based testing is encouraged, using 66 outpatient medical scenarios within 11 provider specialty areas, as noted on the MDCH ICD-10 website. This testing can be performed by billers and coders using ICD-10 diagnosis coding assignments for the defined medical scenarios. (There is no need to create test claim transactions to perform scenario-based testing with MDCH.)
- Scenario-based testing of inpatient claims is also in process. For these types of services, we are contacting our enrolled hospitals and other inpatient providers, referencing a sample of specific claims transactions submitted by those providers in production using ICD-9 codes, and requesting they recode the claims using ICD-10 codes, based on information noted in their medical records.
- Providers may also submit test ICD-10 claim transactions, coded using ICD-10 codes, through our Provider Portal to our B2B Test environment. These transactions may either be submitted via DDE or by adjusting and resubmitting paid claims that exist in our B2B Test environment.

### Why should I test with MDCH?

- Testing with MDCH allows you to verify that your ICD-10 coded claims process successfully.
- In addition, providers who test with MDCH will gain insight into claim adjudication results and the potential for claims to be suspended for further review or denied.

### Where is the testing process documented?

- Test Instructions are published on the MDCH ICD-10 website, which is accessible via the HIPAA Implementation/ICD-10 button at [www.michigan.gov/tradingpartners](http://www.michigan.gov/tradingpartners).
- Detailed testing instructions and reference material is located under the Business-to-Business (B2B) Testing section near the bottom of the page.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### Do I really need to perform ICD-10 End-to-End Testing?

- Although formal approval or certification is not required, CMS has requested that all HIPAA-covered entities test the use of ICD-10 codes, from clinical presentation through payment, prior to the compliance date of October 1, 2015; this is referred to as End-to-End (E2E) Testing.

### When do I need to start using ICD-10 codes for my production transactions?

- On or after October 1, 2015. Any transaction with a date of service or discharge date on after the 10/1/2015 national compliance date and coded using ICD-9 code(s) will be rejected.

### How can I access the ICD-10 B2B Test environment?

- Billing Agents may submit batches of test ICD-10 837 claim or encounter transactions, using the regular Data Exchange Gateway (DEG) file submission procedure. Billing Agents who submit 837 transaction files through the State's Data Exchange Gateway (DEG) should identify test files with a "T" (for "test") suffix, with a value of T in the ISA15 segment, as per normal testing practice.
- Additional information is available in the MDCH Electronic Submissions Manual, available at [www.michigan.gov/tradingpartners](http://www.michigan.gov/tradingpartners) >> HIPAA - Companion Guides >> Electronic Submissions Manual
- We provide adjudication summary reports and periodic 835 remittance advice transactions to your DEG mailbox as a result of claim processing in our CHAMPS B2B Test environment. Adjudication summary reports will be provided shortly after adjudication for testing only.
- If an 835 is requested, a 4987T file will be delivered during the next scheduled, bi-weekly run to the same DEG mailbox as used for 835 delivery in production.
- If you have any questions, email [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov).

### What are the enrollment/credentialing policies required for testing?

- If you are currently a Billing Agent or provider who sends claims or encounter transactions to MDCH in production, your enrollment information has been carried over into our ICD-10 B2B Test System.
- If you are a new billing agent or provider, please contact [AutomatedBilling@Michigan.gov](mailto:AutomatedBilling@Michigan.gov) to pursue enrollment and/or setup in our ICD-10 B2B Test System.

**NOTE: Providers must be "Associated" to their Billing Agent to enable the Billing Agent to submit transactions on behalf of the Provider.**

### In what environment will MDCH be testing?

- ICD-10 testing can be performed in our CHAMPS ICD-10 B2B Test environment. This test environment contains the version of CHAMPS (R8-5.0) which will be deployed in production in September of 2014.
- Screens in the B2B environment may look different than in production CHAMPS, but retain the same functionality.
- History data in the B2B Test environment is a snapshot of our production data as of a "snapshot date" (which may change over time, as data in that environment is refreshed). The current "snapshot date" is June 6th, 2014.
- The CHAMPS ICD-10 B2B Test system includes transaction history from January 1st, 2013 through June 6th, 2014.



## **MDCH Specific ICD-10 Frequently Asked Questions (FAQs)**

- Eligibility data in the B2B Test environment is refreshed from production on a nightly basis, effective July 1st, 2014.
- Our ICD-10 B2B Test environment currently accepts ICD-10 codes for dates of service on or after June 1<sup>st</sup>, 2014 and ICD-9 codes for dates of service on or before this “dummy compliance date.”
- Further details are available in the B2B Testing Instructions.

### **Will MDCH require approval before allowing me to send ICD-10 encoded transactions?**

- Although formal approval or certification is not required, CMS has requested that all HIPAA-covered entities test the use of ICD-10 codes, from clinical presentation through payment, prior to the compliance date of October 1, 2015 this is referred to as End-to-End (E2E) Testing.

### **Do I need to be an approved Billing Agent in order to participate in ICD-10 E2E Testing?**

- No - Providers may also participate in ICD-10 testing, via the Provider Portal to our B2B Test environment.

### **Do I need to be enrolled in the CHAMPS system in order to participate in Michigan's ICD-10 E2E Testing?**

- Yes.

### **My Clearinghouse, Billing Agent, or Service Bureau is not yet ready to accept ICD-10 test transactions from me and forward them on to MDCH. Is there any way that Medicaid providers can test with MDCH directly?**

- Providers are able to test directly in the CHAMPS B2B Test environment by submitting claims through the CHAMPS screens. This can be done either using the Direct Data Entry (DDE) screens or by adjusting a previously submitted claim (that exists in the test environment) and resubmitting it with new diagnosis and procedure codes and dates of service.

### **What is the best way for Trading Partners to receive updates on MDCH ICD-10 implementation?**

- Click on the HIPAA Implementation/ICD-10 button at [www.michigan.gov/tradingpartners](http://www.michigan.gov/tradingpartners).
- Sign up for the ALL\_PROV Email distribution list, which is available at: [http://www.lsoft.com/scripts/wl.exe?SL1=ALL\\_PROV&H=LISTSERV.MICHIGAN.GOV](http://www.lsoft.com/scripts/wl.exe?SL1=ALL_PROV&H=LISTSERV.MICHIGAN.GOV)

### **Will MDCH be ready to accept and process live ICD-10 claims on 10/01/15?**

- MDCH will be ready to accept and process live ICD-10 claims on 10/1/15. Internal MDCH Testing activities are nearly complete and External Testing of test claim transactions has started with Providers, Billing Agents, and other Trading Partners.



## **MDCH Specific ICD-10 Frequently Asked Questions (FAQs)**

### **When will MDCH begin external testing for ICD-10?**

- External Testing is currently underway. If you are a Trading Partner with MDCH and have not received an invitation to test, or you have any questions related to ICD-10 B2B Testing, please contact us at: [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov).

### **Will MDCH offer transaction format and syntax testing?**

Yes - MDCH encourages any Billing Agents wishing to test the format of their HIPAA transactions to make use of the Ramp Manager testing tool. Please refer to the ICD-10 Test Instructions on the MDCH website, under "Stage 1 –Ramp Manager" for detailed information.

### **Will MDCH be testing institutional, professional and dental transactions?**

- Yes - MDCH supports testing of institutional, professional, and dental fee for service claims and encounter transactions.

### **Will MDCH be testing both inpatient and outpatient transactions?**

- Yes - MDCH supports testing of both inpatient and outpatient fee for service claims and encounter transactions.

### **Is it possible for those providers who send MDCH paper claims to send test paper claims through for test processing?**

- B2B Testing of paper claims is not available.
- Providers who use paper claims are advised to convert to electronic claims submission, starting by testing using the CHAMPS B2B Test environment via the internet.
- Please contact Provider Support at 1-800-292-2550 or [ProviderSupport@michigan.gov](mailto:ProviderSupport@michigan.gov) for information on how to submit claims electronically to CHAMPS.

### **Many of my Medicaid clients also have Medicare. I generally bill Medicare for covered services; they process my claims and forward the claims on to MDCH if the beneficiary is eligible for Medicaid. How will I be able to test those types of 837 claims with you?**

- Please coordinate your ICD-10 testing of Medicare claims with your Medicare contact. MDCH is planning to test with Medicare, processing crossover claims as part of our overall ICD-10 testing activities.

### **If I submit claims or encounters information to a Clearinghouse or Service Bureau, will MDCH provide direct feedback to me?**

- Not via electronic transactions.
- You should coordinate with your clearinghouse or Service Bureau for feedback. Fee for service providers are able to review processing results via the Provider Portal to our B2B Test environment.



## **MDCH Specific ICD-10 Frequently Asked Questions (FAQs)**

### **What is the minimum or maximum number of claims or encounters that Billing Agents can test?**

- We recommend that you start with test files containing no more than 50 claims or encounters. Please contact [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov) if you're interested in testing larger files with us, before uploading them to our test environment.

### **Will MDCH convert my ICD-9 to an ICD-10 code for me?**

- No - There will be no mapping within our system as claims are processed and no conversion between ICD-9 and ICD-10 codes. It is the responsibility of the Trading Partner to report diagnosis and procedure codes using native ICD-10 codes.
- If the claim does not contain the correct code set for the date of service/discharge date, it will be denied.

### **Will MDCH still accept ICD-9 codes after 10/01/15 for appropriate DOS?**

- Yes - We will expect and process using ICD-9 codes for claims or encounters with date of service prior to 10/1/2015 in Production.
- We will employ a "dummy compliance date" for ICD-9 vs. ICD-10 coding in our B2B Test environment, to allow our Trading Partners to submit ICD-10 coded transactions using valid, current eligibility data.

### **How will MDCH handle claims or encounters with DOS spanning the conversion deadline?**

- Inpatient claims are governed by the discharge date and professional services may need to be split-billed onto two claims, with ICD-9 diagnosis codes on one claim and ICD-10 diagnosis codes on another claim.
- Please consult our web site and/or contact [MDCH-ICD-10@Michigan.gov](mailto:MDCH-ICD-10@Michigan.gov) for further details.

### **Will MDCH accept 837 batch files with both ICD-9 and ICD-10 transactions spanning the conversion deadline?**

- The same batch file may contain both ICD-9 and ICD-10 claims/encounters; however, each claim or encounter must contain only ICD-9 or ICD-10 codes, as required by the date of service or discharge date.
- There must be no claims or encounters which contain both ICD-9 and ICD-10 codes.

### **Do the Medicaid Health Plans, Mental Health Plans, Substance Abuse Agencies and other managed care plans need to test their ability to send ICD-10 coded transactions to MDCH before October 1, 2015?**

- CMS has requested that all HIPAA-covered entities test the use of ICD-10 codes, from clinical presentation through payment, prior to the compliance date of October 1, 2015; this is referred to as End-to-End (E2E) Testing.



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### What happens if I am not ready to submit ICD-10 coded transactions on 10/1/2015?

- Any transaction submitted with ICD-9 codes with the date of service or discharge date after the 10/1/2015 national compliance date will be rejected.
- To avoid any interruption in transaction processing, do everything possible to be ready for the ICD-10 implementation deadline of 10/1/2015.

### Where can I go for further information?

- Additional information, including the MDCH Electronic Submission Manual, Companion Guides for HIPAA transactions, and links to information sources related to ICD-10 are available on the MDCH ICD-10 website, at [www.Michigan.gov/tradingpartners](http://www.Michigan.gov/tradingpartners) >> HIPAA Implementation/ICD-10.

### Whom should I contact with any ICD-10 testing related Questions?

- Please contact [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov) with questions related to ICD-10 B2B Testing activities.
- You are also welcome to contact [MDCH-ICD-10@Michigan.gov](mailto:MDCH-ICD-10@Michigan.gov) if you have any questions regarding Michigan's ICD-10-related practices or policies.

## CLAIMS TESTING

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### After I submit my test claim, what sort of test feedback is returned?

- We provide adjudication summary reports, 999s, TA1, and, if requested, 835s to our fee-for-service providers.
- We provide adjudication summary reports and, if requested, 835 remittance advice transactions to your DEG mailbox as a result of claim processing in our CHAMPS B2B Test environment. Adjudication summary reports are provided shortly after adjudication in our B2B Test environment.
- If an 835 is requested, a 4987T file will be delivered during the next scheduled, bi-weekly run to the same DEG mailbox as production.
- If you have any questions, email [MDCH-B2B-Testing@Michigan.gov](mailto:MDCH-B2B-Testing@Michigan.gov).

### I don't understand why my test claim was rejected? Whom can I contact?

- First you should consult the TR3 and Michigan Companion Guide. The Michigan Companion Guide is available at [www.michigan.gov/tradingpartners](http://www.michigan.gov/tradingpartners).
- New Billing Agents should reference the ASC X12N 837I, 837D and 837P v5010 Technical Reports Type 3 (TR3s, formerly known as the Implementation Guides) to create v5010 837 transaction files. MDCH does not provide the TR3 documents, which are available for purchase from Washington Publishing Company, at: <http://www.wpc-edi.com/>.
- If you have further testing questions, please feel free to contact us at [MDCH-B2B-Testing@michigan.gov](mailto:MDCH-B2B-Testing@michigan.gov).
- For production related issues, please contact [AutomatedBilling@Michigan.gov](mailto:AutomatedBilling@Michigan.gov).



## MDCH Specific ICD-10 Frequently Asked Questions (FAQs)

### Whom should I contact with any Claims technical questions?

- If you have testing questions, please feel free to contact us at [MDCH-B2B-Testing@michigan.gov](mailto:MDCH-B2B-Testing@michigan.gov).
- For production related issues, please contact [AutomatedBilling@Michigan.gov](mailto:AutomatedBilling@Michigan.gov).

## ENCOUNTERS TESTING

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### After I submit my test encounter, what sort of test feedback is returned?

- Our managed care plans who submit test encounter transactions receive an ETRR (4950T) transaction processing report.

### Whom should I contact with any Encounters technical questions?

- If you have questions regarding testing of ICD-10 coded encounters, please feel free to contact us at [MDCH-B2B-Testing@michigan.gov](mailto:MDCH-B2B-Testing@michigan.gov).
- For issues related to production encounter processing, please contact [MDCHEncounterData@michigan.gov](mailto:MDCHEncounterData@michigan.gov).