

All Provider Types

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Attention: ICD-10 is less than 80 days away! Are you ready? Starting October 1, 2015, New York State Medicaid will begin accepting and processing claims using ICD-10 diagnosis and procedure codes.

What does ICD-10 mean for everyone?

- Claims for Dates of Service on and after October 1, 2015 require ICD-10 Codes
- ICD-10 is an expanded code set and eMedNY will not publish an ICD-9 to ICD-10 crosswalk: Use the many resources available through <u>https://www.emedny.org/icd</u> to explore your options and train your office.
- All provider types who bill Medicaid are impacted: See the <u>FAQs</u> to see how your NY Medicaid claims will need to be submitted.
- ICD-9 and ICD-10 coding are not allowed within the same claim.
- **Possible interruption in payment**: Submitting claims with ICD-9 codes for dates of services on and after October 1 will be rejected by pre-adjudication edits.

In the meantime...

- Electronic Claims Submitters: After researching your applicable ICD-10 codes, don't hesitate to test using eMedNY's Provider Test Environment with the detailed instructions on emedny.org.
- Paper and ePACES Claims Submitters: eMedNY does not provide a method to test claims submitted with these methods. ePACES features an ICD Version radio button which you will be required to select after October 1. This field currently defaults to ICD-9 as shown in our <u>ePACES</u> <u>Claim Quick Reference Guides</u>.
- Submitters using Vendors, Clearing Houses and Service Bureaus: Be sure to communicate with your vendors to understand what steps you will need to complete to be ready on October 1 and coordinate testing in eMedNY's Provider Test Environment.

Contact Details: 1-800-343-9000 emednyalert@csc.com If you are having problems viewing content within this newsletter, please email emednyalert@csc.com for further assistance.

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