

Notes

Opening Remarks

- ▶ **Renee:** Internal ICD-10 call for Medi-Cal Stakeholder groups, off the record.
- ▶ **Jason:** No WebEx due to technical difficulties.

Modern Healthcare Article: Clarification

- ▶ Medi-Cal is ready to process Medicaid claims containing ICD-10 codes. Medi-Cal successfully implemented system changes for ICD-10 in September 2014, and has been ready to receive ICD-10 codes since that implementation.
- ▶ California MMIS is ready and fully compliant with the CMS requirement to accept only ICD-10 codes for claims with dates of service/dates of discharge on or after October 1, 2015.
- ▶ Medi-Cal is working on a system replacement effort which, upon implementation, will process natively using ICD-10. As an interim solution, Medi-Cal implemented ICD-10 on our legacy system in September 2014 utilizing a crosswalk internally in order to reduce the cost and system changes to a system which is being replaced. Using a crosswalk allowed for implementation using the current system rules and payment methodology. This approach allowed California to minimize risks and impact to our providers by reducing the chances for payment variances between ICD-9 and ICD-10.
- ▶ The Medi-Cal crosswalk is not going to be used for DRG grouping purposes. The 3M Corp. APR-DRG module will accept the submitted ICD code, whether ICD-9 or ICD-10, to determine a DRG code.

What Can Providers Do to Reduce Payment Delays?

In order to decrease the likelihood of delays in claim processing and payment following the ICD-10 implementation on October 1, 2015 providers should verify their billing system and processes:

- ▶ Claims with dates of service/dates of discharge prior to 10/1/2015 contain ICD-9 codes and the ICD code indicator/qualifier is set for ICD-9.
- ▶ Claims with dates of service/dates of discharge on or after 10/1/2015 contain ICD-10 codes and the ICD code indicator/qualifier is set for ICD-10.
- ▶ Reviewed the updated provider manuals for ICD-10 on the Medi-Cal website (scheduled for publication on 9/16/2015).

Outreach Activities

Road to 10 Workshops

- ▶ **In-Person**
Date: September 24, 2015
Time: 9:00 AM-11:00 AM or 1:00 PM- 3:00 PM (Select One)
Location: Dignity Health, Shasta Senior Nutrition Program, Mercy Oaks Campus, 100 Mercy Oaks Drive, Redding, CA 96003
- ▶ **Via Webinar**
Date: September 25, 2015
Time: TBA
Location: Webex Online

End-to-End Testing

- ▶ Testing window July 22 through August 17 to submit claims
- ▶ Conducted Q&A conference calls each week during testing
- ▶ Nearly complete adjudicating claims
- ▶ Initial analysis of the test results shows a low variance rate between ICD-9 coded claims and ICD-10 coded claims

Objective: *Test for variance in adjudication or payment between an ICD-9 coded claim and an ICD-10 coded claim for the same medical scenario.*

- ▶ 31% of submitted claims do not appear to have followed the testing instructions resulting in invalid test scenarios.
- ▶ 94% of valid test claims (satisfying the test objective) saw no unexplainable variance
- ▶ 6% of valid test claims (satisfying the test objective) appear to have resulted in a payment variance.
 - ▶ All DRG claims
 - ▶ Further analysis required prior to posting final results

Questions & Answers

Updated Provider Manuals Coming Soon

For a draft of the upcoming Family PACT manual section changes for ICD-10-CM, click on the [Draft ICD-10 Code Release Disclaimer](#) link on the ICD-10 page of the Medi-Cal website.

- ▶ *“We did post a draft version in June; we have received some feedback particularly in the FFACT area, we have taken all of that input into consideration and made the appropriate updates. We have paid additional attention to ensure the manual is accurate. We are scheduled to publish the manuals on Wednesday, September 16th. We are moving the ICD-9 current policy to a holding library where it will be maintained for up to one year in case providers need to reference it.”*

Family Pact Superbill

Family Pact has stated that the superbill will be updated prior to October 1st but has not shared any additional details as to when providers can expect to see the updated document.

Will there be a contact person or email address for issues with timely processing of ICD-10 claims?

If there are specific claims questions, we will continue to use the same process we do today, by contacting the CMC help desk. If you have a general ICD-10 question or you are as an association hearing of trends that you'd like to report, you can contact us at the ICD-10 mailbox. We will also hold the stakeholder council calls more frequently in order to allow stakeholder groups to raise concerns and discuss progress.

