



Date: April 14, 2014

All Lines of Business

Important Provider Notice #160

Subject: Delay in the implementing ICD-10

The implementation of the new coding, ICD-10, scheduled for October 1, 2014 has been delayed one year to October 1, 2015. ICD-9 should continue to be used until implementation has occurred in 2015.

What this means for you the provider – Don't Delay Your Test of ICD-10

Partnership HealthPlan of California (PHC) will not be delaying the testing process of ICD-10 and will continue to accept all tests submitted. To ensure that ICD-10 is fully ready, providers and vendors are strongly encouraged to test early. Test files will be handled in the order in which they are received; those in first will be reviewed and completed first. Once a successful test has been completed providers will not need to do so again.

For additional information regarding the transition to ICD-10 please contact the EDI department at (707) 863-4527 or EDI-Enrollment-Testing@partnershiphp.org.

Frequently Asked Questions regarding ICD-10 Testing is found on the following pages.

Frequently Asked Questions – ICD-10 Testing: EDI

1. Q: Who is required to test?

A: PHC requires test claims with ICD-10 codes for all Billing Providers whether they are submitting electronic claims directly to PHC or through a third party vendor.

2. Q: I am already submitting electronic claims directly to PHC; do I still need to go through ICD-10 Testing?

A: Yes, PHC requires test claims with ICD-10 codes for all Billing Providers whether they are submitting electronic claims directly to PHC or through a third party vendor.

3. Q: I am using a third party to submit electronic claims to PHC already; do I still need to go through ICD-10 Testing?

A: Yes, PHC requires test claims with ICD-10 codes for all Billing Providers whether they are submitting electronic claims directly to PHC or through a third party vendor.

PHC wanted to make sure the billing provider uses appropriate ICD-10 code sets.

Hence, we need a separate file for each billing NPI #.

4. Q: Will PHC accept claims with ICD-9 codes if the date of service is before October 1, 2015?

A: Yes.

5. Q: Will PHC accept claims with ICD-10 codes if I have not passed ICD-10 testing?

A: No, if you submit any claims with ICD-10 codes but you have not completed ICD-10 testing with PHC, those claims will be rejected and reported via the 277CA response transactions.

6. Q: Will PHC accept ICD-9 codes that have a date of service on or after October 1, 2015?

A: No, Any claims that are submitted with ICD-9 codes that have a date of service on or after October 1, 2015 will be rejected and reported via the 277CA response transactions.

7. Q: How do I submit the test file?

A: If you are submitting directly, as a Trading Partner, you would submit the file to our secure server either using the secure online option or through secure FTP option.

If you submit through a clearing house, you would submit your claims to your clearing house (as you normally submit claims), and coordinate with them so that they will submit your file to our secure server.

8. Q: Can we send test files in for some NPI numbers and you can group the rest of our providers with those successful tests?

A: No, we will need a test for each new billing NPI number.

9. Q: Can we send multiple NPIs in one test file?

A: No, for testing purposes, they will need to be submitted separately for each new billing NPI number.

10. Q: How many claims do you want us to send in the test file for ICD-10 Testing?

A: We recommend at least 10 claims (for each billing NPI number) but we are able to accept less if you don't have enough samples for each service that you provide.

11. Q: What type of claims do you want in the test file?

A: The claims you would normally bill. However, the claims must have ICD-10 codes not ICD-9 codes.

12. Q: What members should I use?

A: You can use any Medi-Cal members as long as you are using ICD-10 codes.

13. Q: Who do I notify after submitting my test?

*A: Please send an email notification with the name of the test file to the following email addresses: **EDI-Enrollment-Testing@partnershiphp.org***

Example:

File name prefix here_ICD-10_NPI#_submission date

If you are submitting through a clearing house please coordinate your test files with them, and have your clearing house send the email notification.

Please ensure that you or your clearinghouse informs PHC that the test file is for ICD-10 Testing.

14. Q: Who is the Trading Partner?

A: The entity (on behalf of the provider) who will be sending the claims files to PHC.

15. Q: What format should I use?

A: We accept electronic files in the HIPAA compliant 837 Professional or Institutional file format (5010 version).

16. Q: What software should I use?

A: We don't have any recommendation. However, if you want to bill PHC directly, your software should be able to produce HIPAA compliant 837 files (5010 version).

If you are using a 3rd party, please contact them to find out if your software can work with their systems to produce HIPAA compliant 837 files to send to PHC.

17. Q: What are the next steps after submitting the test?

A: The test will go through a few stages. The first stage is the EDI compliance check. At this stage, we check to confirm your file(s) are 837 HIPAA compliant. The second stage is our claims check. Our Claims Department will run your claims through adjudication, as test, to ensure that the claims are processed correctly. After testing is complete, you will be notified via email about when you have completed ICD-10 testing.

18. Q: How long does the test file take to be approved?

A: It can take a minimum of 1 week and a maximum of 2-3 weeks.

Please contact the EDI Team if you have any questions or concerns regarding testing:

707-863-4527 or EDI-Enrollment-Testing@partnershiphp.org

*Please contact the Claims Customer Service Department for any questions regarding coding:
(707) 863-4130*