

ICD-10 FAQ

1. Q: Who is required to test?

A: PHC requires all Trading Partners to submit test claims with ICD-10 codes.

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 all Trading Partners to complete ICD-10 testing.

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: No, PHC requires ICD-10 testing for all Trading Partners. Billing Providers who submit through a third party vendor is not required to test.

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. Trading Partners who submit any claims with ICD-10 codes but have not completed ICD-10 testing with PHC will have those claims 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: You would submit the test file to our secure server either using the secure online option or through secure FTP option.

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

A: Yes, test files can contain more than one billing NPI.

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

A: A minimum of 10 claims.

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

A: The claims should reflect the services/specialties that you would normally bill. However, the claims must have ICD-10 codes not ICD-9 codes. For example, if you are submitting both Professional and Institutional file types, you will need to submit test claims for both.

11. Q: What members should I use?

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

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

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

Example: File name prefix here ICD-10_NPI#_submission date

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

13. Q: Who is the Trading Partner?

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

14. Q: What format should I use?

A: We accept electronic files in the HIPAA compliant 837 Professional or Institutional file format (5010 version). If you are submitting both Professional and Institutional file types, you will need to submit test claims for both.

15. 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).

16. 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.

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

A: It can take a minimum of 1 week and a maximum of 2-4 weeks.

If you have any questions or concerns regarding testing, please contact the EDI Team at:

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

If you have any questions regarding coding, please contact the Claims Customer Service Department at:

707-863-4130