

ICD 10 QUESTION AND ANSWERS RECEIVED FROM DME MACS 05/2015

1. For ICD 9 code that directly crosswalk to an ICD-10 code, will suppliers need any supporting documentation in their files? **The supplier should have verified the ICD-9 code was justified in the medical record and will need to convert this to an ICD-10 code for claims with dates of service on/after 10/1/15. There are tools to help with mappings, including the general equivalent mappings (GEMs), and the LCDs have also been updated to show the covered ICD-10 diagnosis codes. In many cases, ICD-10 diagnoses are more specific than ICD-9 codes, so if documentation listing the diagnosis is general and/or an unspecified or unspecific ICD-10 code does not exist or is not covered, you may have to go back to the ordering healthcare professional for a more specific and/or covered ICD-10 diagnosis code.**
2. Can suppliers update their databases from ICD-9 to ICD-10 where it is a direct match and transmit the cross-walked codes on their claims? **Yes, but many times there is not a one-to-one crosswalk. Sometimes one ICD-9 will crosswalk to several ICD-10 codes since the ICD-10 codes are more specific.**
3. If the ICD-9 crosswalks to multiple ICD-10 codes, what are the correct steps for a DMEPOS supplier to follow to determine the correct ICD10 code? **Suppliers should verify the diagnosis with the ordering physician or healthcare professional and be sure to code to the highest level of specificity.**
4. How must the supplier document any communication with the prescriber to determine the correct ICD-10 code? **This is a business practice decision and has not been mandated at this point. The supplier must use the appropriate ICD-10 code that equals the description of the beneficiary's condition listed in the medical records or as listed on an order.**
5. Will the contractors be auditing to verify that ICD-10 codes submitted on DMEPOS claims match the ICD-10 code on other part A and B claims? **The ICD-10 code must be justified in the medical records. Currently, we don't audit for a diagnosis match between the DME claim and A/B claims.**
6. Will current CMN and DIF forms be updated to reflect ICD-10 codes? If so when? **Yes, the CMNs and DIFs have been updated. More information will be coming from your DME MAC on the changes and where to find the new, updated CMN/DIF forms. The forms were updated to be more general in the code descriptions, rather than stating the specific code version.**
7. Please confirm that claims with a "from" date of service prior to 10/1/15 are to be submitted with ICD-9 codes and claims with from dates of service 10/1/15 forward are to be submitted with ICD-10 codes? **Yes, this is correct.**
8. Please confirm that claims for rentals or medical supplies that span 10/1/15 that have a "from" date prior to 10/1/15 are to be submitted with ICD-9 codes and do not need to be split and have 2 claims submitted 1 with ICD-9 that ends 9/30/15 and a second from 10/1/15 with an ICD-10

code. Yes, this is correct. DME claims will only look at the first date in a date range, the “from” date, not the “through” date to determine the code set which should be used.

The following is from MM7492

Supplier Type	Claims Processing Requirement	Use FROM or THROUGH/TO Date
DMEPOS	Billing for certain items or supplies (such as capped rentals or monthly supplies) may span the ICD-10 compliance date of 10/1/13 (i.e., the FROM date of service occurs prior to 10/1/13 and the TO date of service occurs after 10/1/13).	FROM