



**Commonwealth of Massachusetts**  
**Executive Office of Health and Human Services**  
**Office of Medicaid**  
*www.mass.gov/masshealth*

**MassHealth**  
**All Provider Bulletin 253**  
**September 2015**

**TO:** All Providers Participating in MassHealth

**FROM:** Daniel Tsai, Assistant Secretary for MassHealth 

**RE: Transition to ICD-10**

**October 1<sup>st</sup> Transition**

On October 1, 2015, MassHealth will implement the International Classification of Diseases, 10th Edition (ICD-10-CM) and the inpatient hospital procedure coding standards known as ICD-10-PCS (collectively referred to as ICD-10) for transactions that require ICD codes. The U.S. Department of Health and Human Services (HHS) requires that all HIPAA-covered entities use the ICD-10 code set on claims and other health care transactions with dates of service or dates of discharge on or after October 1, 2015.

Over the past year, affected providers were strongly encouraged to take the necessary steps to prepare for MassHealth's implementation of ICD-10. This included, but was not limited to, updating and testing HIPAA transactions, modifying practice-management systems (where applicable), and transitioning from the MassHealth proprietary Management Minutes Questionnaire (MMQ) software to an alternative submission method. Additionally, providers were encouraged to train their staff and leverage MassHealth billing guides, as well as CMS and other industry resources, to ensure that their organizations are ready for the implementation.

The following chart outlines key MassHealth transition guidance that all providers should be aware of and must incorporate into billing practices in order to ensure a smooth transition to ICD-10.

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**October 1<sup>st</sup> Transition (cont.)**

Functionality	Effective through September 30, 2015	Effective on or after October 1, 2015
Claims (batch, direct data entry – (DDE), paper)	<ul style="list-style-type: none"> <li>▪ Claims with dates of service through 9/30/2015 must contain ICD-9 codes.</li> <li>▪ Claims for inpatient stays with discharge dates through 9/30/2015 must contain ICD-9 codes.</li> <li>▪ The UB-04 (CMS -1450) form must be submitted with ICD-9 codes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Claims with dates of service on or after 10/1/2015 must contain ICD-10 codes.</li> <li>▪ Claims for inpatient stays with discharge dates on or after 10/1/2015 must contain ICD-10 codes.</li> <li>▪ The UB-04 (CMS -1450) form must be submitted with an ICD qualifier to differentiate between ICD-9 and ICD-10 claim submissions.</li> <li>▪ Each individual claim submitted can only contain a single code set (either ICD-9 or ICD-10) based upon the date of service or date of discharge. Do not combine the code-sets in any single claim.</li> <li>▪ Only valid ICD-10 codes will be accepted on claim submissions. All relevant characters must be included.</li> <li>▪ Resubmittals, adjustments, and voids for claims with dates of service or dates of discharge through 9/30/2015 may continue to be modified using the ICD-9 code set.</li> <li>▪ Claims that do not comply with the MassHealth claim submission guidelines and the ICD-10 standard requirements will be denied upon submission. In order for the claim to be processed, providers must correct the error and resubmit the claim.</li> </ul>
Referrals	<ul style="list-style-type: none"> <li>▪ If providers choose to submit an optional diagnosis code, an ICD-9 code must be used.</li> </ul>	<ul style="list-style-type: none"> <li>▪ If providers choose to submit an optional diagnosis code, an ICD-10 code must be used.</li> </ul>
Management Minutes Questionnaire (MMQ)	<ul style="list-style-type: none"> <li>▪ MMQs submitted with an effective date through 9/30/2015 must include ICD-9 codes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ Proprietary MassHealth MMQ Software is no longer accepted or supported.</li> <li>▪ Providers must submit MMQs via DDE on the Provider Online Service Center (POSC), file upload, or through a billing intermediary.</li> <li>▪ MMQs submitted with an effective date on or after 10/1/2015 must include ICD-10 codes.</li> <li>▪ MMQ submissions that do not comply with the HHS mandated ICD-10 requirements and MassHealth transition guidelines will be denied upon submission.</li> <li>▪ MMQs with an effective date through 9/30/2015 may continue to be submitted using ICD-9 codes.</li> </ul>

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**October 1<sup>st</sup> Transition (cont.)**

Functionality	Effective through September 30, 2015	Effective on or after October 1, 2015
Pre-Admission Screening (PAS)	<ul style="list-style-type: none"> <li>▪ PAS requests submitted for admissions through 9/30/2015 should include ICD-9 codes.</li> <li>▪ PAS requests submitted for admissions that are scheduled take place on or after 10/1/2105 must include ICD-10 codes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ PAS requests submitted on or after 10/1/2015 must include ICD-10 codes. MassHealth intends to issue additional clarifying subregulatory guidance to affected providers prior to the 10/1/2015 effective date of this requirement.</li> <li>▪ PAS requests that do not comply with the HHS mandated ICD-10 requirements and MassHealth transition guidelines will be denied upon submission. In order for the PAS request to be processed, providers must correct the error and resubmit the PAS request.</li> </ul>
Prior Authorization (PA)	<ul style="list-style-type: none"> <li>▪ PA requests submitted through 9/30/2015 must include ICD-9 codes.</li> </ul>	<ul style="list-style-type: none"> <li>▪ PA requests submitted on or after 10/1/2015 must include ICD-10 codes.</li> <li>▪ Existing PAs issued prior to 10/01/2015 will remain active until the PA has been exhausted, <i>even if those services span the transition period.</i> A new authorization will NOT be required.</li> <li>▪ PAs submitted prior to 10/1/2015 with ICD-9 codes can be modified using the ICD-9 code set.</li> <li>▪ PA requests that do not comply with the HHS mandated ICD-10 requirements and MassHealth transition guidelines will be denied upon submission. In order for the PA request to be processed, providers must correct the error and resubmit the PA request.</li> </ul>

MassHealth’s claims processing requirements have been configured based upon the timelines outlined in the ICD-10 guidance provided by CMS. Please refer to MLN Matters #MM7492 for a complete list of claims processing guidance from CMS at [www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1408.pdf](http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/SE1408.pdf)

**Implementation Support and Contingency Planning**

MassHealth will not accept any claims with ICD-9 codes for dates of service or dates of discharge on or after October 1, 2015. MassHealth strongly encourages providers to ensure that they have sufficient cash reserves on hand during the transition to ICD-10 to mitigate any delays in payment that may be caused by incorrect claim submissions or other billing issues related to the transition. It is equally important that providers have a contingency plan in place to submit ICD-10-compliant transactions to MassHealth in the event they encounter problems with their claims submissions.

Providers that do not have the ability to submit claims using ICD-10 codes with dates of service or dates of discharge on or after October 1, 2015, may use MassHealth’s claims submission Direct Data Entry (DDE) functionality on the Provider Online Service Center (POSC), or acquire the services of a third party that does have the ability to submit claims using ICD-10 codes to submit transactions on your behalf.

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## Implementation Support and Contingency Planning (*cont.*)

Please see the MassHealth [approved vendors list](#), to assist in selecting a third-party vendor. Providers must ensure that staff have access to the POSC and are aware of how to use the functionality prior to the transition. Please view MassHealth's "Get Trained" page for job aids to assist providers with DDE on the POSC. MassHealth Customer Service is also available to support the implementation of ICD-10. MassHealth will work with providers to address claims and other implementation related issues that arise on a case-by-case basis. If you have any questions about the preparation and/or transition to ICD-10, please contact the MassHealth Customer Service Center at 1-800-841-2900, e-mail your inquiry to [providersupport@mahealth.net](mailto:providersupport@mahealth.net), or fax your inquiry to 617-988-8974.

### Reminder

Since the initiation of the ICD-10 project, MassHealth has issued a number of provider bulletins notifying providers of certain diagnosis codes that should be used (where applicable) to ensure that specific services are appropriately accounted for in key reports and measures (e.g., Healthcare Effectiveness Data and Information Set – (HEDIS)). In order to ensure that providers use ICD-10 codes when reporting these measures, MassHealth reminds providers that effective October 1, 2015, when billing for these specific services, providers must use the appropriate ICD-10 diagnosis codes that correspond with the ICD-9 codes that would have been submitted prior to the transition to ICD-10.

The following bulletins issued in July 2013 list diagnosis codes that should be used for a member's postpartum visit. Please be sure to utilize the appropriate ICD-10 codes in place of these codes on or after October 1, 2015.

<a href="#">Acute Outpatient Bulletin 30</a>	<a href="#">Home Health Agency Bulletin 49</a>
<a href="#">Community Health Center Bulletin 77</a>	<a href="#">Physician Bulletin 95</a>
<a href="#">Family Planning Agency Bulletin 12</a>	

The following bulletins issued in August 2013 list billing codes that should be used to identify treatment for members related to a diagnosis of alcohol and other drug dependencies (AOD). Please verify codes used. Please be sure to use the appropriate ICD-10 codes in place of these codes on or after October 1, 2015.

<a href="#">Community Health Center Bulletin 78</a>	<a href="#">Limited Services Clinic Bulletin 3</a>
<a href="#">Day Habilitation Program Bulletin 9</a>	<a href="#">Mental Health Center Bulletin 29</a>
<a href="#">Family Planning Agency Bulletin 13</a>	<a href="#">Physician Bulletin 96</a>
<a href="#">Home Health Agency Bulletin 50</a>	

### Trading Partner Testing (TPT)

September 18, 2015, is the last date that MassHealth will accept a test file from providers (except newly enrolled providers) for evaluation and approval to submit ICD-10 transactions to MassHealth on October 1, 2015. During the month of September, MassHealth will close out all remaining tests and prepare for the transition to ICD-10. If you do not test your transactions with MassHealth, it is possible that you may encounter billing issues that could result in payment delays for your organization.

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### **Trading Partner Testing (TPT) (cont.)**

You may contact the MassHealth EDI testing team toll free at 1-855-295-4047 or by e-mail [edi@mahealth.net](mailto:edi@mahealth.net) if you have any questions about TPT.

### **Information, Education, and Training**

MassHealth is currently conducting a series of ICD-10 information, education, and training sessions in-person and via webinar through early fall. These sessions provide an overview of MassHealth's implementation plans, POSC modifications, and provider preparedness for the October 1, 2015 transition. Please visit [www.masshealthtraining.com](http://www.masshealthtraining.com) to register for one of the upcoming sessions. For live events in your community, register under the live events tab.

### **Implementation Readiness Checklist**

It is imperative that providers are ready to implement ICD-10 with MassHealth on October 1, 2015. The following check list should be used to assist provider organizations in determining if they are ready to implement ICD-10 with MassHealth.

### **Implementation Readiness Checklist**

- ✓ Complete trading partner testing (where applicable) and/or ensure that your billing intermediary and/or clearinghouse has tested on your behalf.
- ✓ Adhere to MassHealth billing instructions and transition guidance.
- ✓ Adopt the new UB-04 (CMS-1450) requirements.
- ✓ Ensure that you have sufficient cash reserves on hand during the transition to ICD-10 to mitigate any potential delays in payment that may be caused by incorrect claim submissions or other billing issues related to the transition.
- ✓ Ensure that you have a contingency plan in place to submit transactions to MassHealth in the event your organization is not ready to submit ICD-10 transactions on October 1, 2015.
- ✓ Update systems, documentation, and other business processes affected by ICD-10.
- ✓ Train internal staff on ICD-10 and ensure that billing staff have access to the POSC and are trained to data enter claims as required. Please see MassHealth's "[Get Trained](#)" page for job aids to assist providers with DDE on the POSC.
- ✓ Attend a MassHealth ICD-10 information, education, and training session.
- ✓ Review and monitor MassHealth communications and the ICD-10 website at [www.mass.gov/masshealth/icd-10](http://www.mass.gov/masshealth/icd-10). Also monitor industry resources such as CMS and WEDI.

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**Implementation Readiness Checklist (*cont.*)**

- ✓ Transition from MassHealth MMQ software to an alternative option no later than September 30, 2015.

For additional resources and updated information, please visit the ICD-10 Implementation web page at [www.mass.gov/masshealth/icd-10](http://www.mass.gov/masshealth/icd-10).