

This FAQ provides additional information on Independence Administrators compliance preparation for the transition to ICD-10.

1. When will Independence Administrators be ICD-10 compliant?

Independence Administrators will be in compliance by the Department of Health and Human Services mandated implementation date of October 1, 2015.

2. What is the overall testing strategy for Independence Administrators?

A dedicated ICD-10 team is beginning testing in September with various external entities.

3. How will Independence Administrators handle pre-certification of services that occur on or after the ICD-10 compliance date of October 1, 2015?

Independence Administrators will follow its current process — issue pre-certifications based on the request date.

All precertification requests *up to and including September 30, 2015*, must use *ICD-9 codes*.

All pre-certification requests submitted *on or after October 1, 2015*, must use *ICD-10 codes*.

4. Can providers bill with ICD-10 codes before the October 1, 2015, compliance date?

Providers should not bill with ICD-10 codes prior to the October 1, 2015, compliance date. Claims using ICD-10 codes prior to October 1, 2015, will be rejected.

5. Will Independence Administrators accept ICD-9 codes after October 1, 2015, for dates of service prior to October 1, 2015?

Yes. ICD-9 codes should only be submitted on claims with dates of service prior to October 1, 2015. Current regulations require ICD-9 codes for dates of service prior to October 1, 2015, implementation date. Inpatient claims with discharge dates on or after October 1, 2015, must use ICD-10 codes. All outpatient and professional claims with dates of service on or after the implementation date must contain ICD-10 diagnosis codes.

6. How does the ICD-10 implementation affect providers that file paper claims?

The ICD-10 code set must be used on all claims with dates of service — and inpatient claims with a date of discharge — on or after October 1, 2015. The method used to submit the claim (paper or electronic) has no effect on the code set that should be used on the claim.

7. Will Independence Administrators need to re-contract with network providers?

No. Current contract language supports ICD-10.

8. What will happen if a doctor or hospital is not prepared for ICD-10?

Our provider networks have been communicating with network hospitals and doctors ensuring they are aware of upcoming change. However, if a health care provider submits a claim using the old ICD codes for services on or after October 1, 2015, the claim will be rejected, in line with HHS guidelines. The claim will be rejected and returned to the provider stating that they need to resubmit the claim with the new ICD-10 codes.

9. How can I help?

When visiting a provider's office or health care facility after October 1, 2015, ask the provider or facility to make sure all codes are submitted properly using ICD-10. If a claim is denied, they should ask whether the claim was submitted with the appropriate ICD-10 code for claims submitted on or after October 1, 2015.

10. How should practices and facilities prepare for the transition to ICD-10?

The complexity of the transition requires immediate action to address the business and clinical issues associated with the transition. The ICD-10 transition will affect nearly all provider systems and business processes.