



ICD-10 Billing and Compliance Tips/FAQs

Billing and Compliance Tips for ICD-10 for dates of service on and after 10/1/15

- ICD-9 and ICD-10 will not be allowed on the same claim.
- On INSTITUTIONAL INPATIENT CLAIMS, if the dates of service span 10/1/15, the entire claim will require ICD-10 coding.
- On PROFESSIONAL CLAIMS, if a global OB procedure code is present AND the dates of service span 10/1/15, the entire claim will require ICD-10 coding.
- For ALL OTHER CLAIMS, if the dates of service span 10/1/15, the provider will be required to split bill.

New Rejections, Error Numbers and Explanations of Benefits

Electronic Claims

- ICD-9 will **NOT** be allowed into the MMIS system with dates of service on or after 10/1/15. You will receive a **999** or **TA1** rejection.
- **ERROR CODE Y830** – Claims must not “mix” ICD-9 and ICD-10 Surgery Codes or Diagnosis Codes.
 - A “mixed” claim could be any of the following:
 - Both ICD-9 and ICD-10 coding,
 - ICD-9 coding with DOS on or after 10/1/15, or
 - ICD-10 coding with DOS before 10/1/15.
- **ERROR CODE Y831** – Must split bill ICD-9 and ICD-10 when dates of service span 10/1/15.
- **ERROR CODE Y832** – Inpatient Claim must be ICD-10 only on or after 10/1/15.
- **ERROR CODE Y833** – Prof Global OB Claim must be ICD-10 only on or after 10/1/15.

Paper Claims

- **ERROR CODE 957** – Claims must not “mix” ICD-9 and ICD-10 Surgery Codes or Diagnosis Codes.
 - **EOB 717** – Claim must not mix ICD-9 and ICD-10 diagnosis codes; Must bill ICD-9 prior to 10/1/15; Must bill ICD-10 on/after 10/1/15 – Rebill with only ICD-9 codes/dates of service or only ICD-10 codes/dates of service.
 - **EOB 725** – Claim must not mix ICD-9 and ICD-10 surgical procedure codes; Must bill ICD-9 prior to 10/1/15; Must bill ICD-10 on/after 10/1/15 – Rebill with only ICD-9 codes/dates of service or only ICD-10 codes/dates of service.
 - A “mixed” claim could be any of the following:
 - Both ICD-9 and ICD-10 coding,
 - ICD-9 coding with DOS on/after 10/1/15, or
 - ICD-10 coding with DOS before 10/1/15.

- **ERROR CODE 948** – Inpatient/Professional Global OB Claim must be ICD-10 only when DOS spans 10/1/15.
 - **EOB 714** – Inpatient Claim must contain only ICD-10 surgical procedure and diagnosis codes when dates of service span 10/1/15.
 - **EOB 715** – Professional Global OB Claim must contain only ICD-10 diagnosis codes when dates of service span 10/1/15.
- **ERROR CODE 949** – Must split bill ICD-9/ICD-10 when dates of service span 10/1/15.
 - **EOB 713** – Dates of service spanning 10/1/15 must be split billed – Rebill (Bill ICD-9 prior to 10/1/15; Bill ICD-10 on/after 10/1/15).

Crosswalk from ICD-9 to ICD-10

A crosswalk from ICD-9 to ICD-10 will **NOT** be provided. Please review the updated [Arkansas Medicaid Provider Manuals](#). The ICD codes have been removed from the provider manuals and DMS forms and replaced with a hyperlink to a corresponding Excel spreadsheet where there is a tab for ICD-9 codes and a tab for the ICD-10 codes. To complete claims, you may need to refer to an ICD-10 coding book or similar reference. Links to vendors of ICD-10-CM Code Books can be found at <http://humanservices.arkansas.gov/dms/Pages/ICD-10.aspx>.

ICD-10 Frequently Asked Questions

Where can I get more information about ICD-10?

Implementation information can be found on the [Arkansas Medicaid website](#) and the [DHS ICD-10 web page](#).

Where can I find ICD-10 codes?

A crosswalk from ICD-9 to ICD-10 will **NOT** be provided. The ICD codes have been removed from the provider manuals and DMS forms and replaced with a hyperlink to a corresponding Excel spreadsheet where there is a tab for ICD-9 codes and a tab for the ICD-10 codes. You may also purchase the ICD-10 book to find codes.

Why can't I enter ICD-10 codes using PES?

If you currently use PES, you **MUST** upgrade to version 2.23 or you will be unable to submit claims with ICD-10 codes. You must upgrade your software in sequential order; each lower version must be upgraded before you can upgrade to the next version. If you are currently using version 2.20, you **MUST** upgrade to 2.21, then 2.22, then 2.23, which is the latest version of PES. [View or print PES upgrade instructions](#) or [download the upgrade](#) now.

Can the Provider Assistance Center help me?

We expect call volume and wait times to increase related to ICD-10 billing issues. In order to expedite your wait time, please have the following information ready when you call:

- MC0* Submitter ID
- Rejection Codes (Edit numbers and EOB numbers)
- ICN (for paper claims)

- Batch number
- Recipient ID Number
- Patient Account Number