



CABINET FOR HEALTH AND FAMILY SERVICES
Department for Medicaid Services

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Dear Medicaid Provider:

On January 16, 2009, the Department of Health and Human Services released the HIPAA Administrative Simplification: Modifications to Medical Data Code Set Standards to Adopt ICD-10-CM and ICD-10-PCS Final Rule (CMS-0013-F). The compliance date for implementation of the ICD-10-CM/PCS Coding System is October 1, 2013 for all covered entities.

To prepare for the transition the Department for Medicaid Services (DMS) recommends that you ask your software vendors to establish a comprehensive approach that will deliver compatible products well ahead of the transition deadlines. Questions to consider discussing with your vendors include:

- Will they be able to accommodate the need to move to ICD-10?
- What systems' upgrades/replacements are needed to accommodate ICD-10?
- What costs are involved with the transition to ICD-10 and are upgrades covered by existing contracts?
- When will upgrades or new systems be available for testing and implementation?
- What customer support and training will be provided?
- How do their products and services accommodate both ICD-9 and ICD-10 as you work with claims for services provided both before and after the transition deadline?
- What plans do they have in place for implementation?
- Is new hardware needed or is the current hardware sufficient?

DMS strongly encourages you to discuss **your** business needs with your vendor specifically; do not wait for them to come to you with their plans and make them aware of your implementation schedule. DMS recommends you acquire commitments from vendors as early as possible for delivery of their ICD-10 products. Since testing with trading partners is the only way to determine if your ICD-10 implementation is successful, be sure to schedule enough time to allow the necessary system corrections before the compliance implementation date.

NOTE: Please be aware all inpatient claims with a discharge date on or after 10/01/2013 and outpatient claims with the date of service on or after 10/01/2013 must be submitted with ICD-10 diagnosis and procedure codes. Claims submitted with ICD-9 codes for services provided on or after 10/01/2013 cannot be processed.

For more information regarding Kentucky Medicaid's approach to this transition, please visit the DMS ICD-10 Web site at <http://chfs.ky.gov/dms/ICD10.htm>.