



ICD-10 is a new code set for reporting medical diagnoses & inpatient procedures.

Ohio Department of Medicaid

ICD-10 TIPS

ICD-10 Transition Information for Providers & Staff

> Date

May 22, 2015

> Document ID

7_2015ODMICD

> Title

Professional and Outpatient Prior Authorizations

> Providers Types Impacted

All professional and outpatient service providers

> Description

Prior authorization (PA) requests for all professional and outpatient service providers will continue to use Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS), and Current Dental Terminology (CDT). If a diagnosis code is included on the PA request, the following *ICD-10 TIPS* apply:

- If the anticipated date of service is prior to 10/1/15, use the ICD-9 diagnosis code with the procedure or service code on the PA request.
- If the anticipated date of service is on or after 10/1/15, use the ICD-10 diagnosis code with the procedure or service code on the PA request.

Professional and outpatient PA requests are being accepted with ICD-10 diagnosis codes prior to 10/1/15 for services that will be provided on or after 10/1/15.

If a diagnosis code is not required on the PA request now, it will NOT be required when ICD-10 is implemented.

> Managed Care Considerations

This *ICD-10 TIPS* applies to **ONLY fee-for-service billing**. If you are enrolled with a managed care plan, please contact the plan directly for their billing requirements.