



ICD-10

Official CMS Industry Resources for the ICD-10 Transition
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Payers

ICD-10 Transition Checklist

The following is a checklist of ICD-10 tasks, including estimated timeframes for each task. Depending on your organization, many of these tasks can be performed on a compressed timeline or performed at the same time as other tasks.

This checklist is designed to provide a viable path forward for organizations just beginning to prepare for ICD-10. CMS encourages those who are ahead of this schedule to continue their progress forward.



Planning, Communication, and Assessment Actions to Take Immediately

To prepare for testing, make sure you have completed the following activities. If you have already completed these tasks, review the information to make sure you did not overlook an important step.

- Review ICD-10 resources** from CMS, trade associations, payers, and vendors
- Inform your staff/colleagues** of upcoming changes (1 month)
- Create an **ICD-10 project team** (1 month)
- Identify **how ICD-10 will affect your organization** (3 months)
 - Identify business areas, policies, processes and systems, and trading partners that may be affected
 - Review cost benefit analysis
 - Consult CMS and National Center for Health Statistics General Equivalence Mappings and other reimbursement crosswalks and mapping tools
 - Determine impact on reimbursement practices
 - Review trading partner agreements
- Develop **ICD-10 project plan** for your organization (1 month)
 - Identify each task, including deadline and who is responsible
 - Establish a timeline and share with staff and business partners
 - Develop plan for communicating with staff and business partners about ICD-10
- Determine **changes to coverage policies and contracts** and identify who will need ICD-10 coding training (2 months)

Payers ICD-10 Transition Checklist

- Estimate and **secure budget** for ICD-10 transition (2 months)
- Provide **ICD-10 coding training** for case managers and staff who translate coverage policies (ongoing)
- Work with vendors and internal IT staff **to integrate ICD-10 into all systems that currently use ICD-9** (9 months)



Transition and Testing

April 2013 to September 2014

- Revise **coverage policies for the ICD-10 codes**; develop a strategy to coordinate versions of coverage policies to maintain consistency (12+ months)
- Develop and complete internal system design and development (9 months)
- Determine changes to **provider contracts**
- April 1, 2013: Start testing ICD-10 systems within your organization; this is a coordinated effort among internal coding and technical staff and your vendor (9 months)**
- Monitor vendor/clearinghouse preparedness, identify and address gaps (ongoing)
- October 1, 2013: Begin testing transactions using ICD-10 codes with providers (10 months minimum)**
- Work with vendors/clearinghouses to complete transition to production-ready ICD-10 systems



Complete Transition/Full Compliance

October 1, 2014

- Complete ICD-10 transition for full compliance
 - ICD-9 codes continue to be used for services provided *before* October 1, 2014
 - ICD-10 codes required for services provided *on or after* October 1, 2014
 - Monitor systems and correct errors if needed

CMS consulted resources from the American Medical Association (AMA), the American Health Information Management Association (AHIMA), the North Carolina Healthcare Information & Communications Alliance (NCHICA) and the Workgroup for Electronic Data Interchange (WEDI) in developing this timeline.