

## **Financial Services Group**

---

**May 13, 2014**

Implementation of Medicare Secondary Payer Mandatory Reporting Provisions in Section 111 of the Medicare, Medicaid, and SCHIP Extension Act (MMSEA) of 2007  
(See 42 U.S.C. 1395y(b)(7) & (8))

**Technical ALERT: Delay in transition from ICD-9-CM diagnosis codes to ICD-10-CM diagnosis codes for Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation**

***NOTE: This document supersedes the June 11, 2013 Alert and applicable language in the MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide (Version 4.2) regarding the transition date from ICD-9-CM to ICD-10-CM diagnosis codes.***

On April 1, 2014, the Protecting Access to Medicare Act of 2014 (PAMA) (Pub. L. No. 113-93) was enacted, which said that the Secretary may not adopt ICD-10 prior to October 1, 2015. Accordingly, the U.S. Department of Health and Human Services (HHS) expects to release an interim final rule in the near future that will include a new compliance date that would require the use of ICD-10 beginning October 1, 2015. The rule will also require HIPAA covered entities to continue to use ICD-9-CM through September 30, 2015.

Effective immediately, Responsible Reporting Entities (RREs) are to postpone reporting ICD-10-CM diagnosis codes on their production Claim Input File and Direct Data Entry (DDE) submissions until October 1, 2015. RREs may continue to submit ICD-10-CM diagnosis codes on test Claim Input File submissions. The MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide will be updated to reflect these changes. There will be no modifications to the defined field and file formats.

### **Postponement Requirements Summary**

#### Prior to October 1, 2015:

- RREs may only submit ICD-9-CM diagnosis codes on their production Claim Input Files and DDE submissions. The ICD Indicator field must contain a space or a '9' on Claim Input File Detail Records. The Diagnosis Code Indicator field must be set to ICD-9 for DDE submissions.
- ICD-10-CM diagnosis codes ***will not*** be accepted on ***production*** Claim Input File Detail Records or DDE submissions.
- ICD-10-CM diagnosis codes ***will*** be accepted on ***test*** Claim Input File Detail Records.
- The compliance flag, previously identified in the June 11, 2013 Alert, will not be returned if an RRE submits an ICD-9-CM diagnosis code between October 1, 2014 and March 31, 2015.

#### Beginning October 1, 2015:

- ICD-10-CM diagnosis codes will be required on all production Claim Input Files and DDE add and update records with a CMS Date of Incident (DOI) of October 1, 2015 and subsequent.

- ICD-9-CM or ICD-10-CM diagnosis codes will be accepted on all add and update records with a CMS DOI prior to October 1, 2015.
- The ICD Indicator field must contain a zero when ICD-10-CM diagnosis codes are submitted on Claim Input File Detail Records.
- The Diagnosis Code Indicator field must be set to ICD-10 when ICD-10-CM diagnosis codes are submitted via DDE.

*The information included in this Alert supersedes the applicable language in the MMSEA Section 111 Medicare Secondary Payer Mandatory Reporting Liability Insurance (Including Self-Insurance), No-Fault Insurance, and Workers' Compensation User Guide (Version 4.2) and will be incorporated into a subsequent version of the User Guide.*