

Provider Specific ICD-10 Changes: *Non-Diagnosing Providers*

ICD-10 is “Date of Service” driven. This means the ICD version used is dependent on the date of service for the claim you are submitting. When a claim is submitted with a date of service on or before September 30th, 2015, it should be filed with an ICD-9 diagnosis code. Any claim submitted on or after October 1st, 2015 should be submitted with an ICD-10 diagnosis code.

Service authorization requests may contain both ICD-9 and ICD-10 diagnosis codes. However, claims may not contain both ICD-9 and ICD-10 codes.

We have supplied examples of how common non-diagnosing provider ICD-9 diagnosis codes may translate to ICD-10. The ICD-10 diagnosis codes below may be used on claims where applicable. However, if a provider has a specific diagnosis code that more accurately reflects a member’s medical condition, that diagnosis code should be used in place of these suggested codes.

With ICD-9 codes, a diagnosis of 780.99 - *Other general symptoms* is the most relevant diagnosis code for some conditions. Unfortunately, this ICD-9 code is very limited. With ICD-10, it is now possible for providers to find a code that more accurately represents the member’s medical condition and justification for services. Below are examples of how ICD-10 diagnosis codes provide a more relevant description for a medical condition than their ICD-9 counterpart.

Provider/Service Description	ICD-9 Code	ICD-9 Description	ICD-10 Code	ICD-10 Description
Residential Habilitation	780.99	Other general symptoms	Z73.6	Limitation of activities due to disability
Day Habilitation	780.99	Other general symptoms	Z60.4	Social exclusion and rejection
Intensive Active Treatment	780.99	Other general symptoms	Z73.9	Problem related to life management difficulty, unspecified
Supported Employment (Individual/Group)	780.99	Other general symptoms	Z73.6	Limitation of activities due to disability
Pre-Employment (Individual/Group)	780.99	Other general symptoms	Z73.6	Limitation of activities due to disability
Chore	780.99	Other general symptoms	Z74.2	Need for assistance at home and no other household member able to render care
Adult Day Service	780.99	Other general symptoms	Z74.3	Need for continuous supervision
Home Delivered Meals	780.99	Other general symptoms	Z74.2	Need for assistance at home and no other household member able to render care
Congregate Meals	780.99	Other general symptoms	Z74.8	Other problems related to care provider dependency
Transportation	780.99	Other general symptoms	Z73.6	Limitation of activities due to disability
Respite	780.99	Other general symptoms	Z74.2 or Z75.5	Need for assistance at home and no other household member able to render care; holiday relief care
Care Coordination	780.99	Other general symptoms	Z02.9	Encounter for administrative examinations, unspecified
Lifeline Waiver	780.99	Other general symptoms	Z75.4	Unavailability and inaccessibility of other helping agencies

Below are more examples of how other common ICD-9 diagnosis codes may translate to ICD-10 codes for non-diagnosing providers. Again, providers are responsible for using the most appropriate diagnosis code that accurately reflects the member's medical condition.

Provider/Service Description	ICD-9 Code	ICD-9 Description	ICD-10 Code	ICD-10 Description
Personal Care Agency	799.9	Other unknown and unspecified cause	Z74.1	Need for assistance with personal care
Residential Supported Living Arrangements	V60.6	Person living in residential institution	Z74.8	Other problems related to care provider dependency
Environmental Modifications	V60.1	Inadequate housing	Z59.1	Inadequate housing
Pre-Maternal Home	V22.2	Pregnancy state, incidental	Z75.8	Other problems related to medical facilities and other health care
Taxi Services	V63.0	Residence remote from hospital or other health care facility	Z75.3	Unavailability and inaccessibility of health care facilities
Hotel/Motel	V63.0	Residence remote from hospital or other health care facility	Z75.3	Unavailability and inaccessibility of health care facilities