Florida Blue-specific ICD-10 Readiness
Frequently Asked Questions

The Frequently Asked Questions (FAQs) below were developed to assist physicians, providers and electronic trading partners in understanding how Florida Blue is preparing for ICD-10. Responses to questions below are subject to change. Florida Blue makes every effort to update FAQs and responses on a regular basis. Responses are based on a compliance date of Oct. 1, 2015.

Communication
1. Will Florida Blue complete Payer ICD-10 Readiness Survey requests?
   Florida Blue asks that anyone needing information on our ICD-10 status or preparedness to please first visit our website (www.floridablue.com/ICD-10) and refer to these FAQ’s. If you are unable to find an answer to your question(s), please feel free to send us an e-mail with your question to ICD10-providerquestions@floridablue.com. We also encourage you to attend our monthly ICD-10 Open Line Friday teleconference call (see www.floridablue.com/ICD-10 for additional information.

2. Does Florida Blue have an ICD-10 provider liaison?
   Yes. Email us at ICD-10providerquestions@floridablue.com. If your inquiry is testing-related, email us at ICD-10testing@floridablue.com.

3. Will Florida Blue have dedicated support resources (e.g., website, hotline, etc.) for ICD-10 related issues pre- and post-implementation?
   Yes, physicians, providers and any electronic trading partner may access valuable ICD-10 information and resources including a physician/provider ICD-10 toolkit, teleconference details, podcasts, FAQs, and testing information at www.floridablue.com/icd-10. General ICD-10 questions may be emailed to ICD-10providerquestions@floridablue.com. Questions related to ICD-10 testing may be emailed to ICD-10testing@florida.com. Closer to the ICD-10 compliance date, a toll-free number will be available for ICD-10 pre and post-implementation support.

Education
1. Does Florida Blue have any ICD-10 educational programs for providers?
   Yes. Florida Blue offers a live, one-hour, complimentary ICD-10 teleconference series, ICD-10 Open Line Friday. The program, which offers ICD-10 guidance for physicians, providers, clearing houses, billing services and other entities, takes place the third Friday of each month at 9:30 a.m. ET. Special guests and a panel of industry stakeholders including individual physicians, small and large providers, a billing service, health plans and other electronic trading partners, participate in the dialogue each month. Open Line Friday is also recorded and transcribed each month and available as a podcast. For more information, visit www.floridablue.com/ICD-10 and look for the Open Line Friday and Podcast icons.

   Florida Blue also sponsors ICD-10 informational sessions at national and local medical associations and society meetings and events and co-sponsors educational programs with other payers and entities to maximize ICD-10 collaboration. Florida Blue is sometimes a co-sponsor of ICD-10 educational programs with Availity®. Many are free, eligible for CEUs, and recorded. Visit the http://www.availity.com/resources/availity-learning-center/ for more information.
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**Education (Continued)**

2. **Does Florida Blue offer any guidance to providers for preparing for ICD-10?**
   Yes. Florida Blue collaborates with professional organized medicine groups to offer physicians and providers ICD-10 guidance. Florida Blue also sponsors ICD-10 webinars and teleconferences, and posts a physician/provider ICD-10 toolkit, FAQs, podcasts and testing details on its website. Be sure to visit [www.floridablue.com/icd-10](http://www.floridablue.com/icd-10) for more details.

3. **Who is Florida Blue partnering with in regards to your ICD-10 implementation plan?**
   Florida Blue is collaborating with organized medicine organizations, associations and societies (e.g. Florida Hospital Association (FHA), Florida Medical Association (FMA), Medical Group Management Association (MGMA), the Professional Association of Health Care Office Managers (PAHCOM), the Healthcare Financial Management Association (HFMA), Blue Cross and Blue Shield Association and many others).

4. **What is Florida Blue’s plan to keep customers informed of its progress towards ICD-10 compliance?**
   Florida Blue will keep physicians, providers, electronic trading partners and other external stakeholders informed of progress toward ICD-10 compliance through traditional communication channels including monthly provider teleconference, “Open Line Friday” and its website ([www.floridablue.com/icd-10](http://www.floridablue.com/icd-10)).

**Remediation**

1. **What is Florida Blue’s overall solution/approach to remediation?**
   A full remediation approach is being deployed.

2. **Describe Florida Blue’s current ICD-10 implementation phase.**
   We have successfully completed our internal Compliance Level 1 testing and are now engaged in Compliance Level 2 Testing for ICD-10 which includes but is not limited to end-to-end testing with physicians, providers, electronic trading partners, delegated entities and others.

3. **When will Florida Blue be ready to receive ICD-10 codes for claims processing, adjudication and reimbursement?**
   Florida Blue will be ready to receive ICD-10 codes for claims processing, adjudication and reimbursement consistent with federal regulatory guidelines.

4. **When will Florida Blue have all claim edits uploaded, tested and readied?**
   Florida Blue has all claim edits uploaded, tested and ready. The company is maintaining claim edits and testing for readiness prior to the compliance date.

5. **Will clients of Florida Blue be required to purchase any additional hardware, software license and/or subscription fees to support their ICD-10 changes or enhancements?**
   No. Florida Blue will not require the above.
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Remediation (Continued)

6. Regarding prior authorization requests for procedures scheduled on Oct. 1, 2015 or later, will you require providers to submit ICD-10 codes and/or detailed diagnosis/procedure descriptions to verify eligibility and authorizations (e.g., office visit, lab, radiology, etc.)?
   
   There are three scenarios to the prior authorization question that are described below. Please keep in mind that the ICD code set in effect at the time of the authorization request or when the medical service is delivered will determine which ICD code to use in the authorization and claim transactions:
   
   a. If a prior authorization is requested and the medical service is delivered before Oct. 1, 2015, the physician or provider must use ICD-9 diagnosis and procedure codes in both the authorization request and the claim;
   
   b. If a prior authorization is requested and the medical service is delivered on or after Oct. 1, 2015, the provider must use ICD-10 diagnosis and procedure codes in both the authorization request and the claim;
   
   c. If the prior authorization is requested before Oct. 1, 2015 but the medical service is delivered on or after Oct 1, 2015, the authorization request will use ICD-9 codes while the claim will use ICD-10 codes.
   
   d. The eligibility and benefit transaction does not use ICD codes.

7. Does Florida Blue expect delays in time-sensitive procedures/processes related to admission notifications/outpatient authorizations associated with the move from ICD-9 to ICD-10?
   
   No delays are expected.

8. Does Florida Blue expect delays in reimbursement/adjudication for ICD-9 claims processing in the period following the move to ICD-10 (i.e., anytime post Oct. 1, 2015)?
   
   No delays are expected.

9. Is Florida Blue planning to use the CMS-provided GEMS/reimbursement mappings to crosswalk ICD codes during claim adjudication/reimbursement?
   
   No. We will not convert or map any ICD code.

10. Is Florida Blue planning to make any changes to the GEMS/reimbursement mappings provided by CMS?
   
   No.

11. Is there an alternative vendor-supplied reimbursement mapping to crosswalk that Florida Blue is sourcing?
   
   No.

12. How will Florida Blue amend its medial policies?
   
   Florida Blue’s medical policies (Medical Coverage Guidelines) have been updated to reflect ICD-10 codes.
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Remediation (Continued)

13. Will Florida Blue's amended medical policies be applied to all of its plans?
   Yes.

14. How will the transition from ICD-9 to ICD-10 work with Florida Blue referral/authorization transactions and subsequent episode of care?
   Please see response to Remediation FAQ number 6 above. These transactions will be handled the same as today. There will be no impacts to provider or member. If a prior authorization is requested before Oct. 1, 2015, the provider must use ICD-9 codes; if requested on or after Oct. 1, 2015, the provider must use ICD-10 codes.

15. Will ICD-10 codes be required by Florida Blue for authorization of services that occur after Oct. 1, 2015?
   Yes. ICD-10 codes will be required for services occurring on or after Oct. 1, 2015.

16. Does Florida Blue intend to maintain revenue neutrality with all affected providers during the move from ICD-9 to ICD-10?
   Yes.

17. Once ICD-10 is in effect, does Florida Blue intend to work with providers to validate the payment outcomes to ensure revenue neutrality for both parties?
   Florida Blue will be working with providers to validate and verify any claim payment changes through our three-phase ICD-10 end-to-end testing approach. Phase I testing has been on-going since early 2012; Phases II and III testing is currently deployed and available to “any willing physician or provider” and will continue through August 2015. For more information on testing with Florida Blue, visit www.floridablue.com/icd-10 and select the “Test ICD-10” icon.

Claims Processing/Reimbursement

1. How will Florida Blue handle claims with dates of service that span the conversion deadline?
   Florida Blue will process claims that span the mandated compliance date consistent with the regulatory mandate. For outpatient claims, the date of service will determine the correct ICD code to place on the claim; for inpatient claims, the patient discharge date will determine the correct ICD code to place on the claim. We will not accept claims coded with different ICD versions (both ICD-9 and ICD-10 codes).

2. What is Florida Blue’s policy for processing split claims for fee-for-service encounters that span the ICD-10 implementation date (that is, when ICD-9 codes are effective for that portion of the services rendered on Sept. 30, 2015, and earlier, and when ICD-10 codes are effective for that portion of the services rendered on Oct. 1, 2015, and later)?
   We will not split claims containing different ICD versions and will process claims that span the mandated compliance date consistent with the regulatory mandate guidelines. For outpatient claims, the date of service will determine the correct ICD code to place on the claim; for inpatient claims, the patient discharge date will determine the correct ICD code to place on the claim. We will not accept claims with both ICD-9 and ICD-10 codes.

3. For claims with dates of service on or after Oct. 1, 2015, what diagnosis and inpatient procedure code sets will Florida Blue accept?
   We will only accept ICD-10 code sets consistent with federal regulatory guidelines.
4. Will Florida Blue still accept ICD-9 codes after Oct. 1, 2015 for appropriate dates of service?
Yes. Claims with dates of service prior to Oct. 1, 2015 should be coded using ICD-9.

5. After Oct. 1, 2015, how long will Florida Blue continue to process claims submitted in ICD-9 with a date of service prior to the code change?
Florida Blue will process claims in accordance with the timely filing requirements to which the physician or provider is subject. For example, if a provider has a 180-day timely filing limit, then this provider would not receive payment on claims submitted 180 days beyond the date of service regardless whether it is an ICD-9 or ICD-10 claim.

6. Will Florida Blue accept 837 batches with both ICD-9 and ICD-10 claims spanning the conversion deadline?
Yes. ICD-9 and ICD-10 can be transmitted in a file, but not on the same claim.

7. Will Florida Blue accept ICD-10 codes in advance of the Oct. 1, 2015 deadline?
No. ICD-10 coded claims will not be accepted prior to Oct. 1, 2015.

8. Will Florida Blue allow unspecified ICD-10 codes that map to equivalent ICD-9 codes?
Florida Blue does not anticipate unspecified coding impacts to differ between ICD-9 and ICD-10 coding. To promote the maximum benefits of the ICD-10 system, we encourage physicians and providers to:
• Utilize appropriate detailed medical documentation for accurate coding
• Code to the highest level of specificity and use unspecified codes ONLY when there is no other alternative

9. What will Florida Blue’s appeals process be for resubmission of ICD-9-based claims with ICD-10 codes on or after the ICD-10 compliance date?
Appeals will be handled based on the date of service or discharge date.

10. What DRG Grouper will Florida Blue be using for Medicare claims?
Florida Blue will use the most current MS-DRG Grouper for Medicare claims.

11. What DRG Grouper will Florida Blue be using for commercial claims?
We will use the most current MS-DRG Grouper for commercial claims.

12. How do you anticipate Florida Blue’s reimbursement methodology will be impacted by ICD-10?
Florida Blue’s reimbursement methodology will not change.

13. Please specifically identify any DRG reimbursement methodology changes Florida Blue expects to see.
Florida Blue’s DRG reimbursement methodology will not change.

**Systems**

1. Will Florida Blue use one integrated system to process ICD-9 and ICD-10 claims?
Yes.

2. Will Florida Blue test its functional ICD-10 adjudication system?
Yes.
3. **Will Florida Blue be prepared to support dual formatting/mapping and processing between ICD-9/ICD-10 versions? For how long?**
   Florida Blue is following CMS regulatory requirements on implementing ICD-10. We will not be converting (mapping) any ICD versions. As we progress toward implementing ICD-10, periodic updates will be provided @ [www.floridabluem.com/ICD-10](http://www.floridabluem.com/ICD-10). Florida Blue will be ICD-10 compliant on Oct. 1, 2015.

4. **How will the move from ICD-9 to ICD-10 work with Florida Blue referral/authorization transactions and subsequent episode of care?**
   These types of transactions will be handled as they are today. There will be no impacts to provider or member. If a prior authorization is requested before Oct. 1, 2015, the provider must use ICD-9 diagnosis and procedure codes; if requested on or after Oct. 1, 2015, the provider must use ICD-10 diagnosis and procedure codes. Please see FAQ number 6 for additional information.

5. **Will ICD-10 codes be required by Florida Blue for authorization of services that occur after Oct. 1, 2015?**
   Please see FAQ number 6.

6. **How will the move from ICD-9 to ICD-10 work at Florida Blue with eligibility transactions?**
   Eligibility transactions (HIPAA transactions 270/271) are not impacted by the transition from ICD-9 to ICD-10.

7. **Does Florida Blue require/support “Interim” billing?**
   Florida Blue does not accept interim/split billing.

8. **What, if any, new front-end edits (LCD/CCI, etc.) will Florida Blue implement for 837’s on Oct. 1, 2015?**
   Effective Oct. 1, 2015, Florida Blue will implement new compliance adherence front-end edits that are related to the implementation of ICD-10. The new edits will ensure that the ICD indicator and the ICD code are populated correctly relative to the Oct. 1, 2015 ICD-10 implementation date.
   
   For medical services delivered prior to Oct. 1, 2015, the ICD indicator and ICD code must be ICD-9; for medical services or inpatient discharge dates that occur on or after Oct. 1, 2015, the ICD indicator and ICD code must be ICD-10. If not, the transaction will be rejected based on an out-of-compliance condition.

9. **In anticipation that some health plans may not be ICD-10 ready by Oct. 1, 2015, the processing of crossover/secondary claims could be problematic. For each of the scenarios outlined below, will Florida Blue adjudicate the claim, deny that claim, or take some other action?**

   **Scenario 1:**
   Florida Blue receives a crossover claim from a health plan that is not ICD-10 ready. The claim was submitted in ICD-10 and translated to ICD-9 or it was submitted in ICD-9. How will you process it?
   At this time, Florida Blue will reject the transaction due to an out-of-compliance condition. Also, it would be impossible to know if an ICD code has been “translated” or not.
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Systems (Continued)

Scenario 2:
Florida Blue sends a crossover claim to a health plan that is not ICD-10 ready. In what ICD versions will you send it?
At this time, Florida Blue will adhere to the mandated ICD-10 electronic transaction rules. Florida Blue will not translate ICD codes since the health plan cannot accurately determine the intent of the physician, coder or the clinical condition of the patient.

Testing

1. How will Florida Blue conduct ICD-10 provider end-to-end testing?
   Florida Blue is conducting a three-phased ICD-10 provider testing approach: Phase I is a self-service capability that allows a provider off the opportunity to perform an ICD-9 and ICD-10 codes comparison. This can be accomplished by utilizing scenarios provided by specialty on our ICD-10 website. Phase II involves the electronic receipt and internal processing of ICD-10 coded electronic claim transactions that were previously processed by Florida Blue using ICD-9 codes; Phase III is the "round-trip" (end-to-end) processing of ICD-10-coded electronic claims and remittance advice transactions. If you are interested in testing with Florida Blue, please visit www.floridablue.com/icd-10 and select "learn more" in the Test ICD-10 box in the right margin.

2. When does Florida Blue anticipate it will begin to test ICD-10 with providers?
   Please refer to Testing Question 1 above. Phase I testing began in early 2012 and is ongoing. Phases II and III are also ongoing, Claims adjudication testing with providers began in January 2014 and will continue through August 2015.

3. When does Florida Blue anticipate it will begin to test ICD-10 with clearinghouses?
   Since the beginning of 2014, Florida Blue has been testing with Clearinghouses whose providers are engaged in testing.

4. What does Florida Blue hope to accomplish by testing ICD-10 with providers, clearinghouses, and other stakeholders?
   Our ICD-10 provider testing objective is to minimize and eliminate potential business disruptions due to the ICD-10 mandate.

5. How do providers, clearinghouses, and other stakeholders register to test ICD-10 with Florida Blue?
   Please visit www.floridablue.com/icd-10 and select “learn more” in the “Test ICD-10” banner located in the right margin. Testing details, instructions and a self-service option is available.

6. What type of reports will Florida Blue return for ICD-10 testing?
   All current standard electronic reporting will be provided during Florida Blue’s Phase III (end-to-end) ICD-10 Testing approach.

7. How will Florida Blue communicate its ICD-10 testing results to providers, clearinghouses, and other stakeholders?
   Our ICD-10 testing team will communicate provider testing results via email and phone contact as appropriate.

8. In what environment will Florida Blue test (mirror of production, test environment)?
   We will use an ICD-10 test environment that contains production data.
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**Testing (Continued)**

9. **How many claims will providers be able to test with Florida Blue?**
   This will be determined once an ICD-10 testing relationship has been established with Florida Blue.

10. **Will Florida Blue follow WEDI’s testing timeline?**
    Our ICD-10 testing timeline will follow WEDI’s timeline as a general guideline as long as they remain in alignment with CMS timelines.

**Contracting**

1. **Will Florida Blue renegotiate contracts or require modifications to any terms related to existing contracts, payment schedules and/or reimbursement to client for ICD-10 prior to Oct. 1, 2015?**
   No.

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1 Availity, LLC is a multi-payer joint venture company. For more information or to register, visit [www.availity.com](http://www.availity.com)