

ICD-10 TESTING INSTRUCTIONS

MAKING A ICD-10 TEST CLAIMS DOES THE FOLLOWING THINGS:

1. The claim will not be selected when sending production claims.
2. The DOS (Date of Service) may be entered as a future date. Other dates such as Date of Last X-ray, Pickup and Drop Off dates, etc. will also be allowed to be future dates. Some testing rules require this.
3. You will not need to make other changes to make sure a test batch is created.
4. You will need to select the test claims from the new prompts on the Create Transmission File menu. Option A for Medical Claims, Option B for DME claims.
5. Test claims cannot be changed to Production and will never be paid. But if you are testing, be sure to test different situations you find in your practice so you will be comfortable when you start adding production claims for ICD-10.

COPY AN EXISTING PRODUCTION CLAIM TO ICD-10

Begin by opening FastEMC the usual way to get to the Add New Claim screen.

Select option 8-Browse Claims (Alpha) or find the claim you want to duplicate by your favorite method.

Select the claim from list to make ICD-10 Test claim.

Press ENTER to select claim

Press N -Duplicate New Claim and you will see the following question

Are You Sure You Want to Duplicate This Claim <Y> Yes <N> No

Answer Y for Yes

The next message will ask if you want to make an ICD-10 Claim

Make ICD-10 Claim <Y> Yes or <N> No > Answer Y

You Must Fix Diagnosis Codes - ? Enter Y for Yes

Make copy a TEST Claim? (Y/N) > Enter Y for Yes

The next set of prompts you see will ask for the From DOS and To DOS for the Dates of Services for each Procedure Code Line of Service on the Claim: Example

SUPPLY: FROM-DOS for Procedure: 99214>

SUPPLY: TO-DOS for Procedure: 99214>

Once the Dates are put in for the procedure you will see the following message pop up:

Diagnoses Codes Must be Changed and properly added to Services

Press the ENTER key to get you to the Service Lines.

Once on the Service Lines screen, your cursor will blink in the box labeled FROM-DOS for From Date of Service. Press the <Home> key on your keyboard which will move the cursor to 1st Diag box to enter all the ICD-10 diagnoses codes for this claim.

To find the diagnosis code you want to use, press the F3 key on your keyboard to Find ICD-10, which will bring up a Beginning of File Menu in Alphabetical Order starting with A.

Press F on your keyboard to Search Description of ICD-10 you need and this statement will appear

Enter ICD-10 Description for Fuzzy Search:

As an example, if you were looking for the ICD-10 code for Diabetes, just key in Diabetes of Diabetes Mellitus or any description you may use to get an entire list of the ICD-10 codes. The search will find a description with the word "Diabetes" so you just have to be close.

By the way, any ICD-10 codes you select from the full ICD-10 list, will be added to your MyDiag list so you can find your common codes easily in the future. Of course, you can anticipate your needs and load the MyDiag data before you start doing production ICD-10. These instructions will be provided.

Page or arrow down the list to find the one you need and once highlighted by the cursor, just press ENTER and it will be placed in the 1st Diag box for the First or Primary Diagnosis.

Once you have the diagnosis selected, TAB to FROM-DOS and press the F8 key on your keyboard to allow you to ENTER the Diagnosis Code Pointers on the Service Line. Once the Service Line is highlighted, press the letter C to Change and ENTER over to the DIAG1 box to remove the ICD-9 code and replace it with the ICD-10 code.

NOTE: IF YOU ARE USING MORE THAN ONE (1) DIAGNOSIS CODE YOU WILL NEED TO PERFORM THE ABOVE FUNCTION FOR EACH DIAGNOSIS CODE USED.

When all Service Lines have been corrected, press ESC to save the claim and it is now ready to be created and submitted.

ADD A NEW ICD-10 CLAIM FOR TESTING

To add a test claim for ICD-10, just do the same thing you normally do when you add a claim. Be sure to answer Y for ICD-10 and answer Y for test claim. Once you have done those two special things, you will add the claim as normal.

This might be easier than converting an ICD-9 claim to ICD-10 and correcting data, but we offer either way for your convenience.

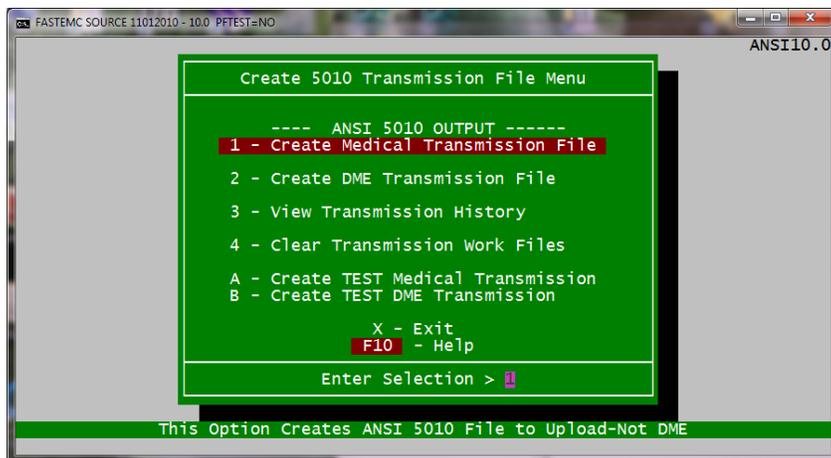
CREATING A TEST PRODUCTION FILE

Any Test claims you create must be collected for a Transmission file using the new choices on the Create Transmission File Menu.

A - Create TEST Medical Transmission (Medical Claims Only)

B - Create TEST DME Transmission (DME ONLY)

Test claims will never be selected in the Production Options.



Be sure you complete all your production submissions by uploading your files to the clearinghouse before selecting the options for TEST Transmissions. We create files with the same names so allow all the communication to work as originally written. (Less for you to try to learn new, just for testing.)

NOTES

An ICD-10 claim will show an “%” in the browse list next to the HOLD Reason.

Status	Account#	Patient Name	Ins.	D-O-S	Charge	Payor
T	87654	MILDRI MAHNHN	P	1 11/23/11	135.00	MEDICARE
T Q	PUBLICAID	STEWAR MARTHA	5	11/20/14	1402.50	APEX BENEFIT SER
R Q	PUBLICAID	STEWAR MARTHA	P	3 03/12/12	125.00	MEDICAID
T	PUBLICAID	STEWAR MARTHA	3	03/12/12	1402.50	ILLINOIS MEDICAI
T	PUBLICAID	STEWAR MARTHA	3	02/22/12	125.00	MEDICAID
T Q	101KEN6055	WAYNE MEDYUM	P	1 11/17/11	10.00	MEDICARE
T Q	101KEN6055	WAYNE MEDYUM	P	1 06/13/11	15.00	MEDICARE
E	% 837214	JOE MILDREN	1	10/15/15	125.00	MEDICARE
E	837214	JOE MILDREN	1	10/12/15	125.00	MEDICARE
T	837214	JOE MILDREN	P	2 12/17/11	125.00	BLUE SHIELD
E	% 837214	JOE MILDREN	1		125.00	MEDICARE
T	% 19191	NANCY PALMQUI	1	12/01/15	125.00	MEDICARE PART B
T	19191	NANCY PALMQUI	P	1 04/24/13	125.00	MEDICARE
T	19191	NANCY PALMQUI	2	05/16/12	125.00	BLUE SHIELD
T	19191	NANCY PALMQUI	2	05/09/12	150.00	BLUE SHIELD

P-Post Payment **X**-End **J**-Adjust/Void & Resubmit Claim **T**-Toggle
←-Select Claim **D**-Delete Claim **H**-Put Claim on Hold **V**-View **B**-Bal
R-Resubmit Claim **C**-Clear Hold Status **PgUp** or **PgDn** or **Q**-Paper Only

On the first screen of the claim you will note the word TEST, this tells you it is a TEST claim.

FastEMC 5010 ANSI - Patient Information MEDICARE PART B

Patient Account#	Patient Last Name	First Name	MI	Generation	SEX
837214	MILDREN	JOE			M

Address: 1312 MAIN STREET Date of Birth: 11/12/1935
 City: BETH State: FL Zip: 46222

Work Related Emergency Death Indicator Date of Death Telephone #
 Related Cause Date State Country ClaimID: J5c00213 TEST

Cert Type	Narrative	Onset Date	Last Seen	Student Status	Assign Bal to Patient
TTL Chgs: 125.00		LMP Date	Initial Trt		
PT Paid:		Acute Date	Last XRAY	Employment St	\$.00
Balance: 125.00					

N-Duplicate New Claim **T**-Statement **Q**-Exit, **V**-View Balance Record Number: 155
S-Update Status Enter Selection > **F**-Print Forms **A**-Insurance
D Delete **H** Hardcopy **U** Update **X** Exit **M**-Browse Alpha **P**-Post Payments
C-Supplier **G**-Procedures **W**-Employer

Final Note: Be sure to review the requirements for testing. You may need to do some special communications to upload your file. We are not able to do provide those options so if uploading is done in the normal way you are all set. We have seen in the past setups that required different logins, special filenames, and different test upload procedures. Please make those arrangements.