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
STATE OF HAWAII  
DEPARTMENT OF HUMAN SERVICES  
Med-QUEST Division  
Health Care Services Branch  
P. O. Box 700190  
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March 6, 2014

MEMORANDUM

MEMO NO.  
FFS M14-05

TO: Fee-For-Service (FFS) Providers

FROM:   
Kenneth S. Fink, MD, MGA, MPH  
Med-QUEST Division Administrator

SUBJECT: ICD-10 Conversion Guidelines for FFS Providers

In 1990, the World Health Organization approved the 10<sup>th</sup> Revision of the International Classification of Diseases (ICD), which is known as ICD-10. The United States has decided to transition from using ICD-9 to using ICD-10 codes as the standard. The Centers for Medicare & Medicaid Services (CMS) has set the date for transition to ICD-10 codes as October 1, 2014. Notable difference between ICD-9 and ICD-10 include that the ICD-10 codes are all seven (7) characters long and can be alpha or numeric in any position, where the ICD-9 codes are from three (3) to five (5) characters long with alpha in only the first position.

The purpose of this memorandum is to inform FFS providers about the Med-QUEST Division (MQD) guidelines regarding transition to ICD-10:

- MQD is on schedule to go live with ICD-10 codes for dates of service beginning October 1, 2014. For dates of service prior to October 1, 2014, ICD-9 codes should be used.
- The code set used for outpatient claims shall be based upon the service date. The provider shall use the ICD-9 code set for any service date before October 1, 2014. The provider shall use ICD-10 code set for any service date on or after October 1, 2014.
- The code set used for inpatient claims shall be based upon discharge date of the member. The provider shall use the ICD-9 code set for any date of discharge before October 1, 2014. The provider shall use ICD-10 code set for any date of discharge on or after October 1, 2014.

- No ICD-10 codes will be accepted before October 1, 2014.
- The MQD will be processing ICD-10 codes natively. MQD will NOT crosswalk ICD-10 codes to ICD-9.
- Providers can only use either ICD-9 or ICD-10 on a single claim/encounter. Both ICD-9 and ICD-10 codes may NOT be on a single claim/encounter. Providers should submit two or more claims in situations where dates of services cross October 1, 2014.
- Both ICD-9 and ICD-10 codes may be on a single file submission to the MQD, as long as each single claim does not have both ICD-9 and ICD-10 codes.
- ICD-10 related testing details will be forthcoming.

Additional details will be shared as they become available.

Please contact the MQD through the provider hotline at 692-8099 should you have any questions.