



Testing Your Practice's ICD-10 Systems: First Steps

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As the U.S. health care system makes the transition from ICD-9 to ICD-10 coding, all health care providers should prepare to use ICD-10 codes when submitting medical claims and related transactions by the **October 1, 2014**, compliance deadline. The mandate to transition to ICD-10 applies to everyone covered by HIPAA.

To get ready, all your computer programming and software updates must be installed and functioning properly. Internal testing—testing the systems that send and receive diagnosis and inpatient procedure codes to ensure the new code set can be processed correctly—is an important step toward ensuring that your systems are ICD-10-ready.

About Internal Testing

Internal testing involves testing your programming or software systems to make sure the changes for the ICD-10 codes have been installed correctly and the systems are functioning properly. You will want to test the transactions and work processes that affect your practice the most, such as claims submission, eligibility verification, and quality reporting.

Transitioning from ICD-9 to ICD-10 codes takes time and requires a well-planned effort. Testing your systems using ICD-10 ensures that you will be able to:

- Resolve any issues with your practice's systems that would disrupt the sending and receiving of ICD-10 codes on transactions and reports to payers and other business partners
- Avoid payment, cash flow, and operational interruptions

Getting Started

The internal testing process includes the following steps:

1. **Talk to your vendors about how they will assist you with your internal testing.**
Vendors can work with you to conduct testing and help you address any systems issues.
2. **Create an ICD-10 internal testing plan.** The plan should outline key dates and milestones for when tests should be completed and identify roles and responsibilities for key staff members.

3. **Begin internal testing.** To start, identify cases to test, such as high-volume and high-revenue clinical areas. For example, if your practice sees a large number of patients with renal conditions, look at the typical procedures and activities associated with those patients. Review the relevant codes in these common clinical areas to identify significant changes between ICD-9 and ICD-10 that could result in issues with coding or translation. Then begin testing cases, following data to verify that information maintains its integrity during each phase of processing and that systems are functioning efficiently.

4. **Test your system under a variety of conditions.** Once you have verified that your system can effectively process the new ICD-10 codes, test your system under a variety of conditions. For example, see how your system performs when it has to process a high volume of data or data that could fit under multiple categories.

During this time, test any manual and work flow processes you use to collect and report diagnosis codes, such as superbills and patient encounter forms.

Using Internal Testing Results

Once you have run your internal tests, review the results, and identify any issues. Work with your vendor to make system modifications and refinements.

Once you have resolved any internal system issues with ICD-10 codes, begin planning for external testing, which involves sending and receiving transactions that include ICD-10 with payers and other business associates.

Resources

The CMS ICD-10 website at www.cms.gov/icd10 offers resources to help you make a successful transition.

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