

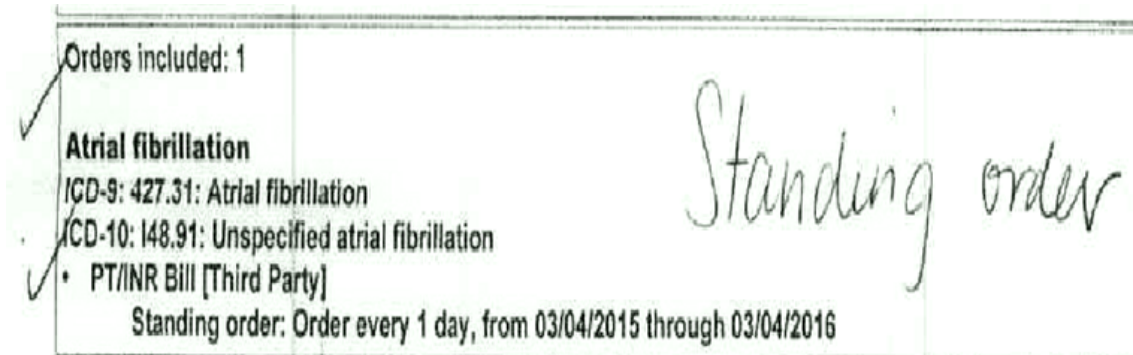
## ICD-10 Outpatient Orders Management

*Dates of service beginning Oct. 1 require diagnosis narrative and/or valid ICD-10 code*

We are committed to preparing you for the documentation requirements of ICD-10 with minimal disruptions to patient care or your office staff. A recent review of outpatient orders already posted with service dates on or after Oct 1 showed a significant volume containing ICD-9 diagnosis codes only. **As a reminder, starting with Oct. 1 dates of service, diagnosis narratives and/or ICD-10 codes must be submitted on claims in order to receive payment.**

For outpatient orders, state and federal regulation requires diagnosis narrative(s) and/or valid ICD-10 diagnosis code(s). As we approach the Oct. 1 effective date, please include this information in all of your outpatient orders. For example:

- If you place an order on Sept. 15 for dates of service on or after Oct. 1, you will need to submit a diagnosis narrative(s) and/or valid ICD-10 code(s)
- If you place an order on Sept. 15 for dates of service that span before and after Oct. 1, you would need to submit a diagnosis narrative(s) and/or valid codes for both ICD-9 and ICD-10. Standing orders extending beyond Oct. 1 with ICD-9 code(s) only will need to be renewed with the required diagnosis information
- The order below includes the full complement of information required for the diagnosis, including the ICD-9 and ICD-10 code and narrative so that the diagnosis can be validated



Orders included: 1

**Atrial fibrillation**

ICD-9: 427.31: Atrial fibrillation

ICD-10: I48.91: Unspecified atrial fibrillation

• PT/INR Bill [Third Party]

Standing order: Order every 1 day, from 03/04/2015 through 03/04/2016

Standing order

CMS offers the following guidance on use of Signs, Symptoms and Unspecified ICD-10 Diagnosis Codes:

- Specific diagnosis codes should be reported when they are supported by the available medical record documentation and clinical knowledge of the patient's health condition. Include descriptors for anatomic site, laterality, acuity (acute, chronic, acute on chronic), severity and etiology
- If a definitive diagnosis has not been established by the end of the encounter, it is appropriate to report codes for sign(s) and/or symptom(s) in lieu of a definitive diagnosis
- When sufficient clinical information is not known or available about a particular health condition to assign a more specific code, coding should comply with payer guidelines for use of unspecified codes

**ICD-10 Support Hotline:** To further support you, Inova is setting up an ICD-10 physician support line staffed by individuals who can answer your questions about documentation requirements, code assignment and available training. **The hotline will be open for your calls on weekdays starting Tuesday, Sept. 8 from 9 a.m. to 5 p.m. at 703-914-6200 (fax 703-256-4585).** This support component will remain in place for several weeks after the Oct. 1 effective date.

In this period leading up to Oct. 1, Health Information Management and Registration staff will also work with the medical staff to obtain required diagnosis information for outpatient orders posted for Oct. 1 or later. We will make every effort to obtain a compliant diagnosis with minimal disruption to patient care or your office practice.