



Minnesota Department of **Human Services**

Minnesota Health Care Programs (MHCP)

ICD-10 End-to-End Testing Companion Guide

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1. INTRODUCTION

Minnesota Health Care Programs (MHCP) is offering a phased, end-to-end testing for the transition to ICD-10. This guide provides information on the following:

- Eligible test partners
- Testing timelines
- Testing process
- Agency contacts
- Links to ICD-10 resources

As an MHCP-enrolled provider, you are not required to test your ICD-10 readiness. But we strongly encourage you to do so. Testing lets you practice ICD-10 coding and learn whether your claims will meet MHCP expectations before the Oct. 1, 2015, compliance date.

2. ELIGIBLE TEST PARTNERS

All enrolled providers may test ICD-10 changes with MHCP. You must have a registered [MN-ITS](#) account to perform testing.

2.1. SPECIAL REQUIREMENTS AND PREREQUISITES

If you do not have a MN-ITS account, refer to [MN-ITS Registration](#) to set up an account.

If you submit batch files through the Electronic Data Interchange (EDI), you must complete syntax testing to submit Batch X12 transactions. Refer to our [5010/D.0 Compliance](#) web page for information on syntax testing.

3. TESTING PHASES

MHCP's end-to-end testing approach consists of three phases:

1. Internal testing
2. Pilot testing
3. All-provider testing
 - a. Interim payment rate methodology for inpatient hospitals

Refer to our [MHCP ICD-10](#) web page for current testing timelines. Refer to the [Payment Methodology for Inpatient Hospitals](#) page for more information about the interim rates.

3.1. PILOT TESTING

MHCP's pilot test group consists of MHCP Managed Care Organization partners and a select group of fee-for-service providers and clearinghouses.

3.2. ALL-PROVIDER TESTING

Testing for all enrolled and authorized MHCP providers will follow the pilot-test phase.

4. TESTING IN MHCP'S ACCEPTANCE TEST (ATST) ENVIRONMENT

4.1. GENERAL TEST INFORMATION

ICD-10 testing is conducted in the MN-ITS Acceptance Test (ATST) environment. ATST is a test region for many system projects. It is not only dedicated to ICD-10 testing. During ICD-10 testing, you may notice system functionality that differs from production. This is due to changes made for other projects in ATST. MHCP will try to reduce the impact of these projects on the ATST environment whenever possible.

We expect providers to code claims according to their practice's policies. MHCP will process test claims according to MHCP policy, based on the codes submitted. MHCP does **not** provide the following:

- Review of medical records
- Coding of provider test scenarios
- Analysis of dual-coded test scenarios
- Crosswalks
- Edits
- Mapping documents
- Test scenarios

MHCP will not resolve test claims that are suspended for any reason. If you submit a claim that is suspended for internal review, it will remain in that status for the entire testing period.

4.2. ICD CODES AND DATES OF SERVICE

Test claims submitted to MHCP must contain valid ICD codes for the date of service. MHCP does not provide ICD-9 to ICD-10 code crosswalks.

For test claims, the ICD-10 implementation date is Feb. 1, 2015. This date **only** applies to the ATST environment. Use:

- ICD-10 codes for dates of service on or after Feb. 1, 2015.
- ICD-9 codes for dates of service before Feb. 1, 2015.

Reminder: The actual ICD-10 implementation date for MHCP's production environment is Oct. 1, 2015.

4.3. MHCP MEMBERS

During ICD-10 testing, you may submit test claims in ATST for any MHCP member. But member information in ATST may not be current. Program coverage, enrollment information, prior authorizations and service agreements in the ATST environment are a copy of what was in production on **May 19, 2015**. Member program coverage in ATST may change as testing occurs. We will process test claims according to eligibility found in ATST.

4.4. INPATIENT CLAIMS

Inpatient hospital rates for ICD-10 using APR-DRG version 31 will not be available in the ATST or production environments before Oct. 1, 2015. In the production environment, MHCP will implement an interim rate beginning Oct. 1, 2015, until the new rates are fully implemented. Interim rate calculations will target pay-to-cost ratios in the new rate model for each facility. We will reprocess claims paid with interim rates (retroactive to Nov. 1, 2014) once new rates are in place. The interim rates are available in the ATST environment as of Sept. 14, 2015.

Providers may submit inpatient-hospital test claims to the ATST environment as of Sept. 14, 2015.

Refer to our MHCP [Payment Methodology for Inpatient Hospitals](#) web page for current information on inpatient-rate changes.

4.5. PRIOR AUTHORIZATIONS AND SERVICE AGREEMENTS

We have performed internal testing to ensure that claims containing ICD-10 codes process properly when services require prior authorizations (PA) or service agreements (SA).

You may submit PA requests through the MN–ITS Direct Data Entry (DDE) Authorization Request (287) transaction in ATST. Use this function to validate that system responses correctly identify whether an ICD-9 or ICD-10 code is appropriate, based on the date of service.

MHCP will not process or approve any new PA requests you submit during ICD-10 external testing.

You may, however, submit test claims reporting a PA or SA that was approved and had unused units in our production environment on **May 18, 2015**. Submit ICD codes on claims for approved services as appropriate for the dates of service on the claim. You can submit claims with ICD-10 codes, even if the authorization was approved with ICD-9 codes.

5. CONNECTING TO MN–ITS ATST AND CLAIM SUBMISSION GUIDELINES

5.1. ACCESSING THE MN–ITS ATST ENVIRONMENT

Access ATST by logging into MN–ITS and selecting the link for Test Region from the right menu, under related links.

5.2. REGISTERING YOUR ORGANIZATION’S MN–ITS MAILBOX

5.3. MN–ITS BATCH SUBMITTERS

All providers who currently use MN–ITS to submit batch files have already registered and created a mailbox in ATST during the required file-testing process. If you already submit batch files, you do not need to complete these steps again.

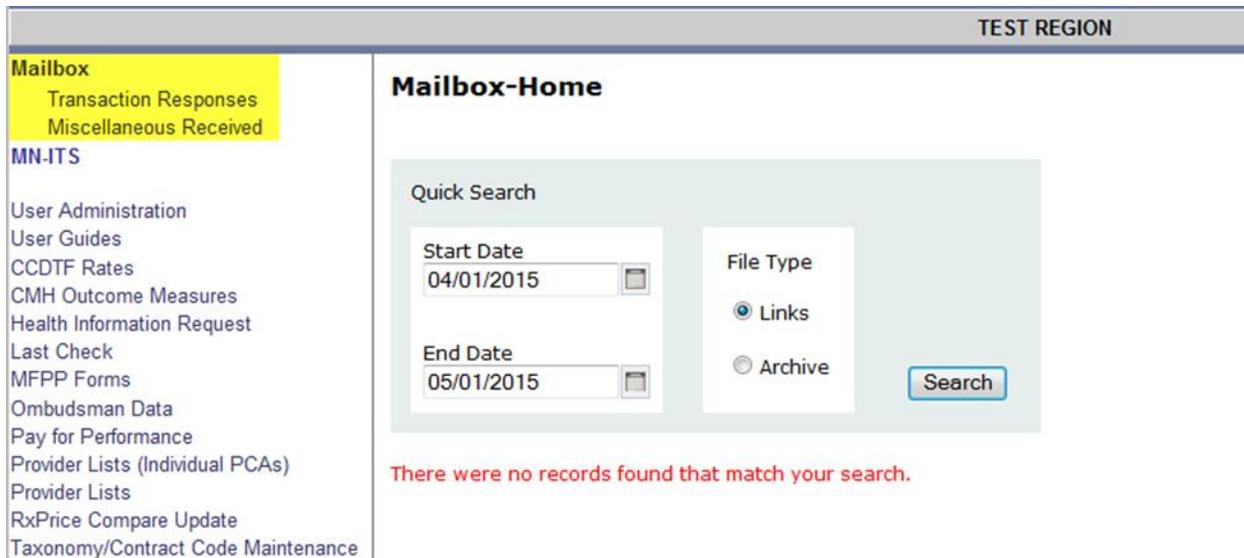
New MN–ITS batch submitters must complete the steps listed below for DDE users to create a mailbox. Also, you must complete syntax testing requirements to receive 835, 834 or 820 responses. Refer to [Test 5010 Batch Transactions](#) on the 5010/D.0 Compliance web page for instructions on syntax testing.

5.4. MN–ITS DIRECT DATA ENTRY (DDE) USERS

MN-ITS DDE users must create a mailbox in the ATST environment to receive 835 remittance advices for test claims. To create the mailbox, complete the following steps:

1. Log into MN-ITS ATST by using the NPI or UMPI of your organization as the username. Use the password "Saturday."
2. Once logged in, follow the steps on the screen to create the mailbox.
3. After completing mailbox creation, log out and close your web browser. Then sign into MN-ITS ATST using your Production username and password.
4. Verify that "Mailbox" appears in the menu on the left side of the web page.
5. Click on "Mailbox" to verify that it can be expanded to show "Transaction Responses" and "Miscellaneous Received." If you did not close your browser in step 3, you may receive an error message. If this occurs, clear your web browser cookies, close all browsers, and log back into MN-ITS ATST.
6. If you do not see "Mailbox," or "Mailbox" cannot be expanded as shown below, contact the MHCP Provider Call Center.
7. Click on "Transaction Responses" or "Miscellaneous Received." If you receive an error message, contact the MHCP Provider Call Center.

Figure 1: MN-ITS ATST Mailbox Home



5.5. USERNAMES AND PASSWORDS

Use the same username and password to log into the MN–ITS ATST environment as you do for the production environment.

If you need to add a username and password to your existing account, your [MN–ITS Primary Administrator](#) must create a user account for you in ATST.

If you need to reset your ATST password, contact your MN–ITS primary administrator or secondary administrator to request the password reset.

5.6. ATST SYSTEM AVAILABILITY

The ATST environment is normally available 8:00 a.m. – 12:00 p.m. and 1:00 p.m. – 4:00 p.m., Monday – Friday. But ATST may not be available earlier in the day, if internal system processes run longer than usual. This delay will most likely happen on Tuesdays and Thursdays.

Unscheduled system downtimes may occur for system maintenance and programming updates. MHCP will give you advance notice for scheduled ATST downtime. If there is an unscheduled downtime, we will inform you as quickly as possible.

6. SUBMITTING TEST TRANSACTIONS

Warning: ATST users must ensure they are logged into the ATST environment before submitting test claims. Test claims must be submitted to the ATST region ONLY. You can identify the ATST region in the URL of your web browser (<https://mn-its-atst.dhs.state.mn.us>). You can also identify some (but not all) ATST screens by finding “TEST” or “Acceptance Test” on the screen. For MN–ITS DDE, however, “TEST” or “Acceptance Test” does not appear on claim entry screens.

6.1. MN–ITS DDE

To submit DDE claims, select the appropriate transaction link under “MN–ITS” in the left menu.

6.2. SUPPORTED DDE TRANSACTIONS

The following DDE transactions are available for end-to-end testing:

- Eligibility Request (270)
- Authorization Request (278)
- Health Care Claim: Professional (837P)
- Health Care Claim: Institutional (837I)
- Health Care Claim: Dental (837D)
- Request Claim Status (276)
- NCPDP Pharmacy

6.3. MN–ITS BATCH

To submit batch claims, select Submit Transactions under “MN–ITS” in the left menu.

6.4. SUPPORTED BATCH TRANSACTIONS

The following batch transactions are available for end-to-end testing:

- 270/271 Health Care Eligibility Inquiry and Response
- 276/277 Health Care Claim Status Request and Response
- 837 Health Care Claim: Professional
- 837 Health Care Claim: Institutional

- 837 Health Care Claim: Dental
- NCPDP 1.2 Submissions (Encounter)

6.5. GENERAL RULES FOR BATCH SUBMISSION

Refer to [5010 X12/NCPDP1.2 Batch Transaction Guidelines](#) on the 5010/D.0 Compliance web page for instructions on general file structure, file naming conventions and syntax requirements.

6.6. FILE SIZE LIMITATIONS FOR ICD-10

To ensure timely processing and support for provider contacts, test batch files must contain only one transaction set per file, with no more than:

- 25 member inquiries for Eligibility Verification Request (270) files
- 25 claims for Health Care Claims (837) files
- 25 claim requests for Claim Request Status (276) files
- 25 claims for NCPDP 1.2 (Pharmacy) files

Files that exceed these limits may require manual processing and result in delays or errors.

6.7. INCORRECT ICD CODE SETS

MHCP will not reject files solely because they include an ICD code from the incorrect code set for the date of service (ICD-10 before Oct. 1, 2015, or ICD-9 on or after that date). We will process each transaction and report the appropriate reasons for denial.

6.8. ACKNOWLEDGMENTS

Find acknowledgments for batch transactions by clicking on the “Mailbox” link in the left menu, then select “Transaction Responses.”

When you submit batch files in ATST, you will receive one of the following acknowledgments:

- TA1
- 999
- N12R (NCPDP file response)

TA1, 999 and N12R acknowledgments in the test environment are typically received in the same time frames as MHCP’s production environment. In some cases, processing of acknowledgements may be delayed up to 24 hours in the test environment.

MHCP does not send the 277 Claim Acknowledgment transaction.

6.9. CHECK CLAIM STATUS

Check claim status using the Batch X12 276 Claim Status Inquiry or the DDE Request Claim Status (276) function. Both batch and DDE 276 transactions will return responses for claims submitted through batch, as well as those submitted through DDE.

6.10. CHECK REMITTANCE ADVICE

You will receive an 835 X12, 835 PDF, or 835E (Encounter) for claims submitted in the ATST environment, based on your normal delivery selection for remittance advices. Remittance advices will typically be delivered to your ATST MN-ITS Mailbox before noon every Wednesday and Friday. You may receive additional 835 files on other days, due to internal testing needs.

835 files produced in ATST look identical to 835 files produced in production. Remember this similarity when reviewing 835 files and before contacting MHCP with questions about 835 files.

7. TESTING CONTACTS

If you have questions and issues regarding specific test claims and processing, please call the [MHCP Provider Call Center](#) and indicate you are testing for ICD-10 or inpatient rates. The Call Center can only respond to questions about claim processing in the ATST environment for ICD diagnosis-related denials or inpatient payment rate methodology. They cannot assist with claims we deny for other reasons.

7.1. PROVIDER CALL CENTER

Voice: 651-431-2700 or 1-800-366-5411

TTY: 711 or 1-800-627-3529

Hours: 8:00 a.m. – 4:15 p.m., Monday – Friday

8. LINKS TO OTHER ICD-10 INFORMATION

For more information on ICD-10, visit the following online resources:

- The Centers for Medicare and Medicaid Services (CMS) [ICD-10 home page](#)
- CMS' [Road to ICD-10](#) for small physician practices
- The Workgroup for Electronic Data Interchange [ICD-10 work products](#)
- The American Medical Association [ICD-10 overview](#)
- The Medical Group Management Association [ICD-10 overview](#)

9. CHANGE SUMMARY

This section describes the differences between this companion guide version and previous versions.

Figure 2: Version History

Version	Revision Date	Summary Changes
0.1	March 2015	Initial draft
1.0	May 21, 2015	Finalized guide sent to MHCP ICD-10 pilot test group
2.0	June 10, 2015	<ul style="list-style-type: none"> • Clarified that MHCP will not resolve suspended claims in General Test Information • Clarified information about inpatient claim processing in the Inpatient Claims section • Added information about password resets in the Usernames and Passwords section • Added information about timelines for acknowledgment processing in the Acknowledgements section • Added information about availability timelines for 835 files and the similarity of test environment 835 files and production environment 835 files in the Check Remittance Advice section
3.0	Aug. 31, 2015	Removed references to testing timelines. They are available on the MHCP ICD-10 webpage .
4.0	Sept. 15, 2015	Updated date for providers to submit inpatient-hospital test claims
5.0	Oct. 9, 2015	Added references to inpatient-hospital rate testing and removed ICD-10 testing email address. Contact the Provider Call Center with testing questions.