STELLAR GOOD NEWS

Contents

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Stellar Software

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Read previous issues of Stellar Good News on the resources page of our website!

State of ICD-10

After being delayed again (and again, and again) it appears very likely that the ICD-10 mandate is finally going to stick this October 1st. As such, we would like to address several common questions regarding the current state of ICD-10 support in Stellar.

Does Stellar support ICD-10?

ICD-10 support was implemented for paper and electronic claims at the beginning of 2014. To the best of our knowledge based on our understanding of the paper and electronic claims specifications our ICD-10 implementation should be correct and ready to go. (If you are still sending 4010 format electronic claims to a clearinghouse, you will need to convert to 5010 format.) However, we have not had anyone volunteer to test with ICD-10 just yet, although we have talked to a couple of users who may test it with Blue Cross soon. If you would like to test with Medicare or Blue Cross, please let us know and we will be happy to help.

How do you start using ICD-10?

The use of ICD-10 in Stellar is controlled on a per-patient basis. There is a checkbox in the top right corner of the patient's diagnosis screen which allows you to switch the patient's current diagnosis mode. When it is time to start diagnosing a patient in ICD-10, you will first need to reevaluate the patient, then diagnose them using ICD-10. Next, mark the ICD-10 box on the patient's diagnosis tab, and update the diagnoses.

Will I still be able to submit old claims with ICD-9 codes?

The diagnosis coding type is associated with each date in the patient's diagnosis history. If you are resubmitting claims for a prior date that was diagnosed using ICD-9, then those codes will be put on the claim.

Will Stellar convert ICD-9 codes to ICD-10 codes for me?

The ICD-10 coding system is much more specifc, and a little different in the way some things are handled than ICD-9. As such, an automatic 1-to-1 conversion is not possible, and you will likely need to refer to your patient documentation if a diagnosis must be converted. Some codes will require more specificity (for example, 723.4 has seven more-specific matching codes in ICD-10). Other codes may not have exact mappings. And there may be ICD-10 codes which should be used to further describe the patient's condition for which there were no previous ICD-9 codes (this is especially likely to apply to accident patients that need additional coding for external causes).

Stellar currently provides two tools to assist with this conversion. First, when a patient's diagnosis is switched to ICD-10, Stellar will attempt to convert their current ICD-9 codes using the so called General Equivalence Mapping (GEM) table. If a code has a single ICD-10 match, it will be converted. If there are multiple matches they will be displayed in a list for you to choose from. If no match is found, you will be alerted. Second, if you enter an ICD-9 code while in ICD-10 mode, Stellar will immediately attempt to convert the code using the GEM table in the same manner.

We may also have an additional

tool to assist with code lookup using full text search and/or categorical groupings by October. Until then, our suggested additional resources are www.icd10data.com , *ICD-10 Coding of the Top 100 Conditions for the Chiropractic Office* by Dr. Mario Fucinari (if you want a basic reference) or *ChiroCode Complete & Easy ICD-10 Coding for Chiropractic* (if you want a more complete ICD-10 reference), both available from www.chirocode.com .

Will all carriers be switching to ICD-10 on October 1st?

All HIPAA-covered entities are mandated to begin using ICD-10 beginning October 1st, 2015. However, there are a few entities which process claims that are not covered, mainly accident and liability insurance (www.tinyurl.com/qbvnzwy). While most carriers, especially large ones, will be supporting ICD-10, smaller carriers may not be ready even after October 1st. With that in mind, it may be necessary to continue using ICD-9 for those carriers a while longer. This shouldn't really be a problem for the most part since the diagnosis coding type is set per-patient. However, should a case arise where a patient has two insurances with conflicting code set requirements (one wants ICD-9 while the other wants ICD-10), it may complicate claim submission since we cannot store two sets of diagnoses. On the other hand, even if this does happen it is likely to be rare, and may turn out to be a non-issue.

Will I have to use ICD-10-PCS instead of CPT for treatment coding?

No, ICD-10-PCS is meant for inpatient coding. CPT will continue to be used for outpatient procedures and physician services (www.cms.gov/Medicare/coding/ICD10/).

Questions?

Please give us a call if you have any further questions or would like to talk about testing ICD-10 claims with a carrier.

ReminderCall.com

One of our users recently began using a service called ReminderCall to provide automatic appointment reminders for patients. They have been using it for several months and are quite happy with it.

If you're interested you can visit their website at www.remindercall.com, or call 888-858-6673. We are able to set up an automated interface to their system, allowing them to receive patients that need reminders without staff involvement.

Stellar Updates

Here are some of our more important recent enhancements and updates to Stellar. (Go to the Help menu in Stellar and click Download Stellar Update to open our webpage which includes a complete list at the bottom.)

Claims

Insurance patients with no primary carrier are now reported as an error (should be put on hold, changed to cash, or fixed).

Boxes 9, 9d, and 11d are no longer left blank for Medicaid paper claims.

Qualifiers for shaded area numbers can be specified for a carrier's Legacy PIN Number by using the format "QQ:NNN..." (where QQ is the qualifier and NNN is the number). Rarely needed.

Patients

Added "Last E/M Svc" field to patient profile, showing date of last 992xx code found in history.

Previous Symptoms date has been changed to Other Date (box 15) with additional options.

Added date "Jump To" field to transaction history.

Appointments

Added customizable appointment Call Status field when editing appointment.

Added option to print Visit Sheet when adding appointment.

Added "Export to iCal File" program to export a range of appointments to iCal format for importing into a calendar program.

Daily Summary

Now includes appointment notes when listing missed appointments.

Visit Sheets

More than 4 diagnoses are now listed in columns.

Search Patients

Added tests for 1st and 2nd insurance name and type.

Read Remittance

Updated reason code list and changed layout to match MREP 4.3, improved handling of bundled claims.

Account Aging and Late Charging

Added spreadsheet format, suitable for pasting into a spreadsheet program.

Added option to allow calculation of provider totals based on transaction history instead of patient's assigned provider (slower, but more accurate in multi-provider offices that see each other's patients).