



# Weekly Provider News

October 1, 2015

## Frequently Asked Questions About ICD-10: Treatment Authorizations

Per Medi-Cal guidelines, Treatment Authorization Requests (TARs) and Referrals that were obtained prior to the ICD-10 implementation date of 10/1/2015 DO NOT have to be resubmitted, modified or changed in order to update the ICD-9-CM codes to ICD-10-CM codes.

Authorizations that contain ICD-9-CM codes will be honored for services that occur on or after 10/1/15. Claims for Dates of Service on or after 10/1/15 should be submitted with ICD-10-CM codes regardless of the date the authorization was obtained.

You must code from the appropriate code set based on the date of service.

***Q: Do TARs or Service Authorization Requests (SARs) that have been approved prior to October 1, 2015, with approval extending past October 1, 2015, need to be resubmitted with ICD-10-CM diagnosis codes?***

No. All active TARs/SARs based on the submission of ICD-9 on or before October 1, 2015, that span the ICD-10 implementation date will remain valid. Claims containing ICD-10 in adherence with the ICD-10 implementation rules will not be negatively impacted by the ICD-9 TAR/SAR approvals.

***Q: Will TARs or SARs require ICD-10-CM diagnosis codes on October 1, 2015?***

Yes. Any TAR/SAR currently requiring an ICD-9-CM diagnosis code will require an ICD-10-CM diagnosis code on or after October 1, 2015.

For the complete list of ICD-10 FAQs go to:

[http://files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa\\_icd10\\_home.asp](http://files.medi-cal.ca.gov/pubsdoco/hipaa/hipaa_icd10_home.asp)

## Questions?

Contact your Provider Services Representative or call Provider Services at (800) 700-3874 ext. 5504