

Subject: CMS ICD-10 Testing Week Results and Guidance

Exact Target Headline: CMS ICD-10 Testing Week Results and Guidance

Date: April 17, 2015

The Centers for Medicare and Medicaid Services (CMS) has released results of its end-to-end ICD-10 testing week, held January 26 – February 3, 2015.* According to CMS, this testing period demonstrated that CMS systems are ready to accept ICD-10 claims. RelayHealth, however, believes the true value of testing is in the payer supplying DRG shifts, payment rates, shifts in payment responsibility, and other general reimbursement issue details.

For this testing opportunity, RelayHealth applied to all 18 Medicare Administrative Contractors (MACs) on behalf of our clients, and was accepted by 11 MACs for the testing period. A total of 48 RelayAssurance™/ePREMIS® and RelayExchange™ customers participated in the testing, with an opportunity to submit a total of 1,320 test claims. Of the participating customers:

- 13 participants were 100% successful in submitting allotted test claims before Friday, January 23. This means only 1 in 4 providers successfully delivered 100% of their allotted claims before the first day of the testing period.
- 6 more were 100% successful in submitting test claims by Friday, January 30, for a total of 18 100% successful claim submissions.
- 25 participants were only partially successful in submitting their allotted test claims.
- 4 participants did not send any test claims at all.

There were no rejections to ICD-10 test claims submitted through RelayHealth. Of the 1,320 test claims allowed, 100% of 837 claims were submitted and accepted to CMS, delivered via the 837 format. [Read the full results.](#)

Guidance Following Analysis of Testing Results

Test Your Own Systems, Not the Payers

Based on this testing experience, it appears that providers see testing as an opportunity to ensure payers are ready for the transition, rather than to ensure that their own systems are ready. During testing, 75% of RelayHealth participants failed to submit the full claim counts that they were allotted. The purpose of ICD-10 testing is to ensure that your processes are ready – from doctors' notes, to coding, to your HIS system.

Based on results from the January CMS end-to-end testing week and these high-level observations, **we highly suggest that our customers take advantage of the unlimited acknowledgement testing offered by CMS.** While acknowledgement testing is limited in scope, it will give providers the opportunity to exercise and test their upfront processes that are required to generate and transmit ICD-10 test claims. Test claims can be submitted through RelayHealth.

CMS acknowledgement testing is open at various times, with many open to test at any moment with any amount of claims. Also, there are 101 additional payers who will allow for unlimited acknowledgement testing and, in turn, an opportunity for you, the provider, to practice your internal processes. Please see the RelayHealth Payer Testing Dashboard for detailed testing information for these payers.

Action Required: Exercise and test your upfront processes that are required to generate and transmit ICD-10 test claims by participating in CMS acknowledgement testing on June 1-5. Review your readiness and preparation for the ICD-10 transition, and take the steps necessary to ensure a smooth transition on October 1, 2015.

**CMS extended the January ICD-10 end-to-end testing week from January 30 to February 3 due to severe weather in parts of the country. [View the original CMS testing results document.](#)*