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Illinois Department of Human Services

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PROVIDER INFORMATIONAL NOTICE

TO: EI Providers

FROM: Ann M. Freiburg
Bureau of Early Intervention

DATE: October 1, 2015

RE: ICD Code Conversion - Addendum

This addendum is being shared to provide additional specific guidance.

When submitting claims to the Early Intervention (EI) Central Billing Office (CBO), you must submit dates of service up through September 30, 2015 using ICD-9 Codes separately from dates of service beginning October 1, 2015 using ICD-10 Codes. Example would be a service provided to a child on September 28, 2015 using an ICD-9 Code must be submitted on a claim separate from a service provided to the same child on October 5, 2015 using an ICD-10 Code.

The EI CBO system will reject any claim that mixes ICD-9 and ICD-10 for direct services beginning October 1, 2015 and you will have to resubmit them separately before the claims can be approved. Claims to the EI CBO for evaluations/assessment for the purpose of eligibility determination/redetermination and IFSP meetings can be submitting using one claim regardless of dates of service because they do not require an ICD Code for submission.

Additionally, the Bureau has been made aware that some electronic claim submission systems may require an ICD Code regardless of the authorization type (DS, AS, IM, etc). If you utilize one of those systems that require ICD Codes for all submissions, you will have to split out claims for ICD-9 and ICD-10 as announced in the original Provider Information Notice dated September 29, 2015 but understand that the CBO will put the Evaluation/Assessment and IFSP meetings together for processing.

As a reminder, the Early Intervention (EI) Central Billing Office (CBO) has useful information on their website at www.eicbo.info.

If you experience difficulties in obtaining the necessary ICD-10 code by conversion, you can also reach out to the CMS website for guidance directly at <http://www.cms.gov/Medicare/Coding/ICD10/index.html?redirect=/ICD10>