



January 10, 2017
Announcement 1291

2017 Annual ICD-10 Code Update

The 2017 annual ICD-10 diagnosis codes effective October 1, 2016, have been updated in the Medicaid Management Information System (MMIS). Claims for ICD-10 codes with dates of service on or after October 1, 2016, will no longer deny. Claims with dates of service on or after October 1, 2016, that denied are being automatically reprocessed. It is not necessary to resubmit or appeal the denied claims. Results of the reprocessed claims will appear on remittance advices dated January 13, 2017.

Please use the following billing instructions:

- For dates of service on or before September 30, 2016, use the 2016 ICD-10 codes.
- For dates of service on or after October 1, 2016, use the new updated ICD-10 codes effective October 1, 2016.
- For services that roll over from September 2016 to October 2016, split bill the claim based on the effective date of the ICD-10 code you are utilizing.
- For inpatient claims with a September 2016 admitting diagnosis and October 2016 date(s) of services(s): If the code has been changed in the 2017 update, please use the most appropriate 2017 code for the admitting diagnosis.