



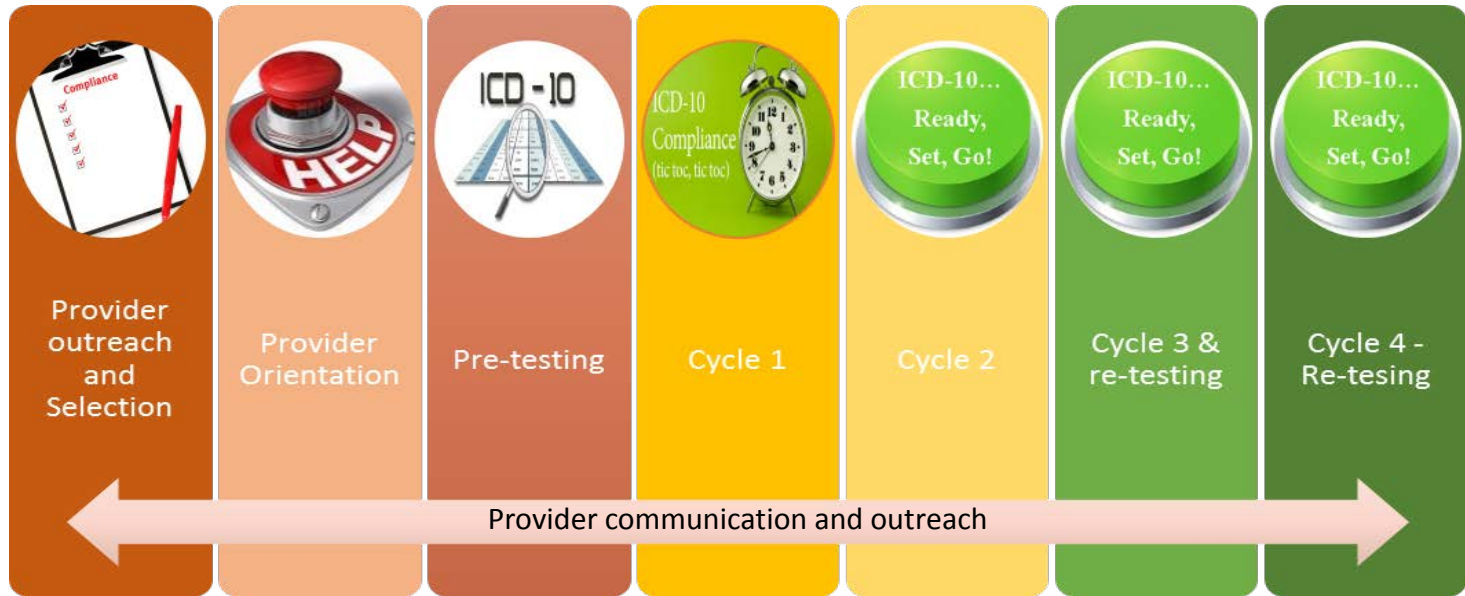
NCTracks ICD-10 Testing

Nitya Ganapathy

Jane Albright

June 11, 2015

Provider End-to-End Testing



Month:	May			June				July			August		
Week Starting:	11-May	18-May	25-May	1-Jun	8-Jun	15-Jun	22-Jun	29-Jun	6-Jul	13-Jul	20-Jul	27-Jul	3-Aug
Test Cycle:	Cycle 1			Cycle 2				Cycle 3			Cycle 4		
Participant Activity:	Claims submitted via batch and online			Claims submitted via batch and online				Claims submitted via batch and online			Claims submitted via batch and online		
			Financial Cycle 1 Executes on Friday	Cycle 1 Remittance Available		Financial Cycle 2 Executes on Friday	Cycle 2 Remit Available		Financial Cycle 3 Executes on Friday	Cycle 3 Remittance Available		Financial Cycle 4 Executes on Friday	Cycle 4 Remittance Available

* Total no: of provider/Trading partners selected: 158; More than 50% participation in Pre-testing

* Pre-testing is to ensure the proper submission of batch files into UAT environment prior to the formal testing.

Providers and Claim Types in Cycle 1



Top 20 providers based on volume

NEW HANOVER REGIONAL MEDICAL C
SCOTLAND MEMORIAL HOSPITAL INC
HALIFAX REGIONAL MEDICAL CENTE
SANDHILLS CENTER FOR MH DD SA
CAROLINAS MEDICAL CENTER
LENOIR MEMORIAL HOSPITAL INC
SENTARA ALBEMARLE REGIONAL MED
WAKE FOREST UNIVERSITY HEALTH
UNIVERSITY OF NORTH CAROLINA H
ALAMANCE REGIONAL MEDICAL CENT
HIGH POINT REGIONAL HEALTH SYS
NASH GENERAL HOSPITAL
REX HOSPITAL
MOSES CONE HEALTH SYSTEM
CRAVEN COUNTY HEALTH DEPARTMEN
NORTH CAROLINA MENTOR
JOHNSTON HEALTH SERVICES CORPO
ALBERTA PROFESSIONAL SERVICES
TOUCHSTONE RESIDENTIAL SERVICE

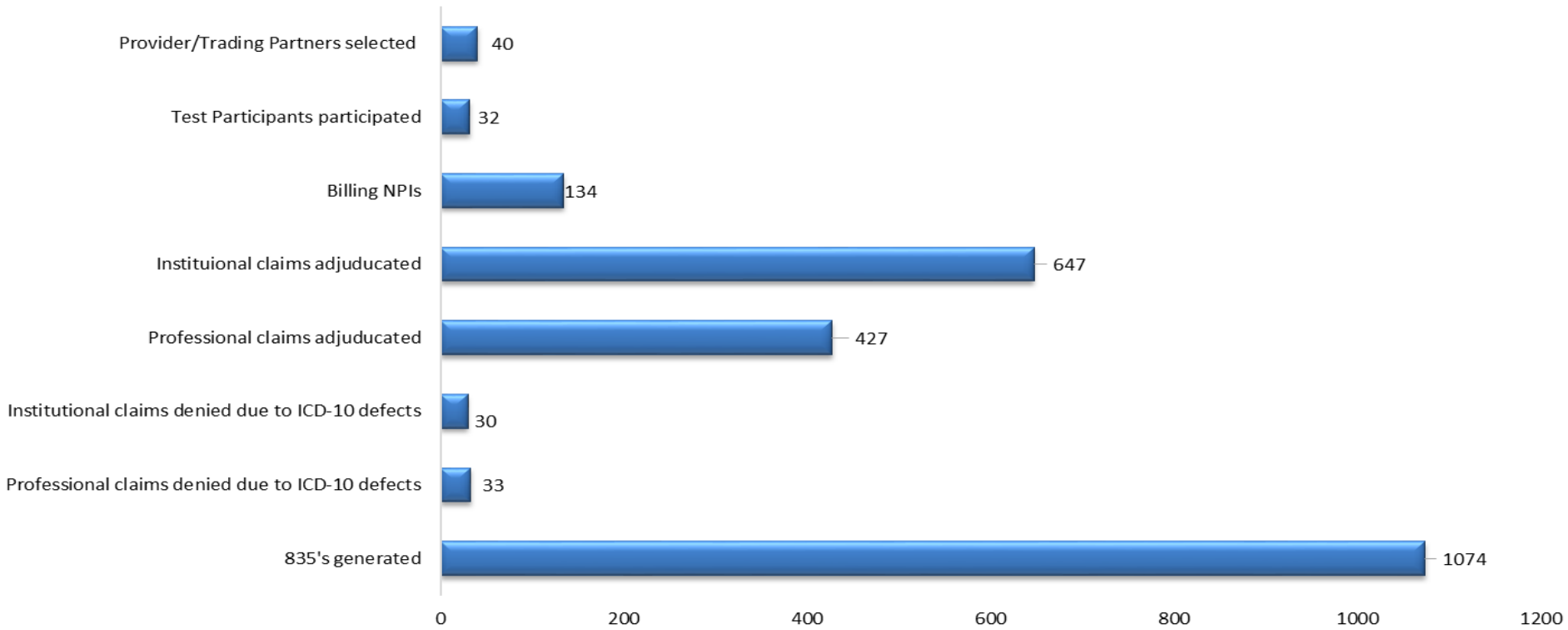
Services tested with...

PERSONAL CARE SERVICES
RURAL HLTH CLINIC / FEDERALLY QUALIFIED HLTH CNTR
PROFESSIONAL
INDEPENDENT LABORATORY / XRAY
HEALTH DEPARTMENTS
MEDICARE PART B CROSSOVER (PROFESSIONAL)
INSTITUTIONAL AMBULANCE
MEDICARE PART B CROSSOVER UB (OUTPATIENT)
OUTPATIENT
INPATIENT
HOME HEALTH
NURSING HOME
MEDICARE PART A CROSSOVER (INPATIENT)

Provider End-to-End Testing Results



Provider End-to-End Cycle 1 Testing Overview



	835's generated	Professional claims denied due to ICD-10 defects	Institutional claims denied due to ICD-10 defects	Professional claims adjudicated	Institutional claims adjudicated	Billing NPIs	Test Participants participated	Provider/Trading Partners selected
■ Cycle 1	1074	33	30	427	647	134	32	40

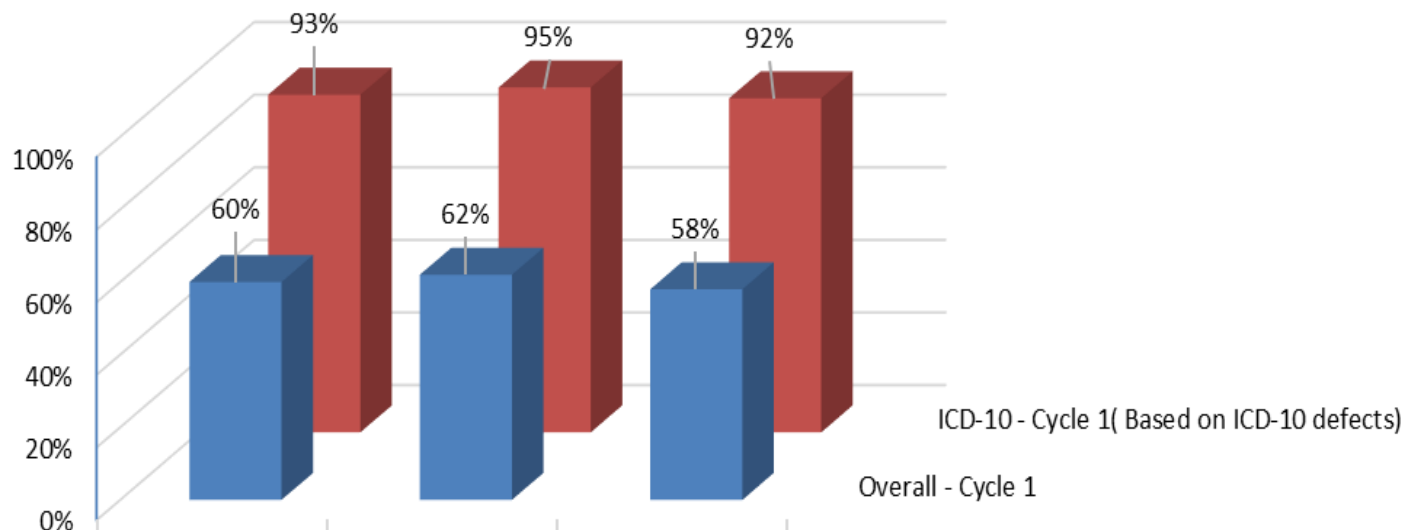
■ Cycle 1

Cycle 1 Testing metrics includes total no: of providers participated, claims adjudicated, rejection and denials

Provider Cycle 1 Testing Success Rate



Provider Cycle 1 Testing Success rate



Overall - Cycle 1	60%	62%	58%
ICD-10 - Cycle 1(Based on ICD-10 defects)	93%	95%	92%

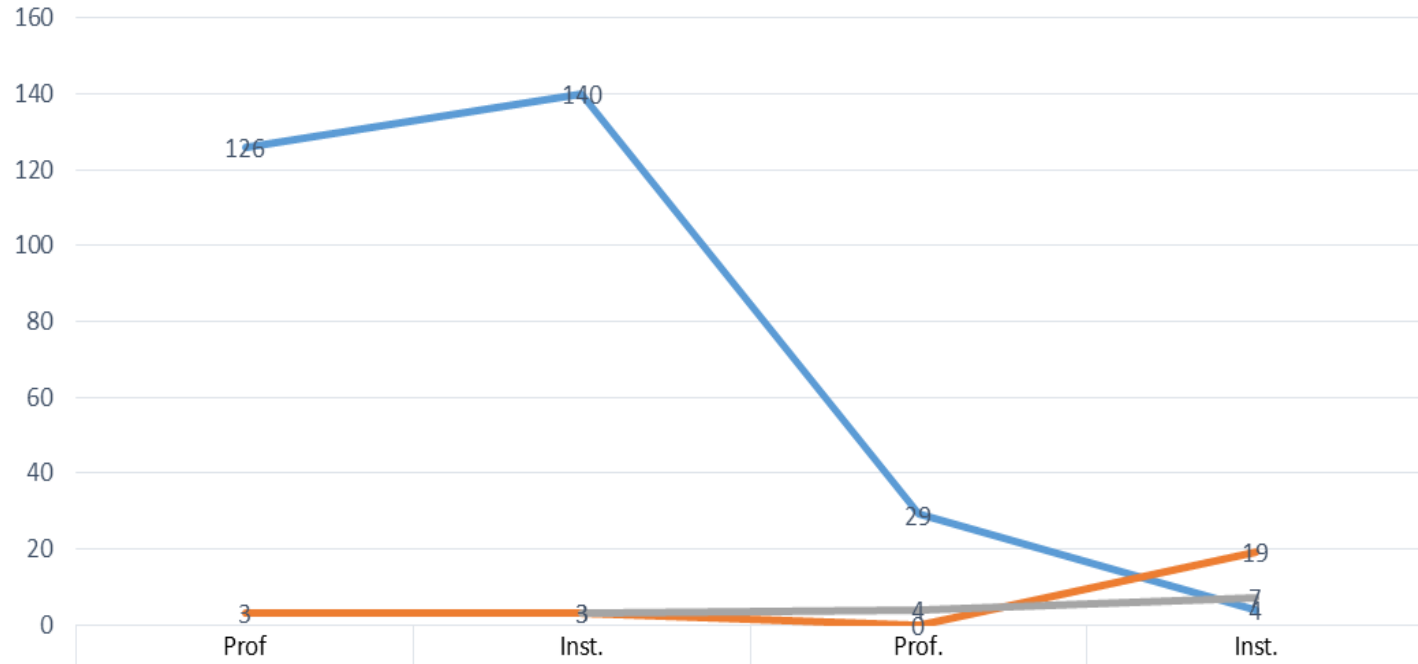
Overall - Cycle 1 ICD-10 - Cycle 1(Based on ICD-10 defects)

Overall percentage represents total paid/denied based on non-ICD-10 and ICD-10 denials
 ICD-10 percentage represents total paid/denied based on ICD-10 denials

ICD-10 Metrics



Provider End-to-End Testing Rejection and Defects Metrics



ICD invalid version qualifier	126	140	29	4
Diagnosis code invalid for Recip age/sex	3	3	0	19
Diagnosis code not valid		3	4	7

— ICD invalid version qualifier
 — Diagnosis code invalid for Recip age/sex
 — Diagnosis code not valid

Pre-testing helped to reduce the rejection in formal cycle 1 testing
 ICD invalid version qualifier due to provider submission error and not a defect

Parallel Testing with Hospitals



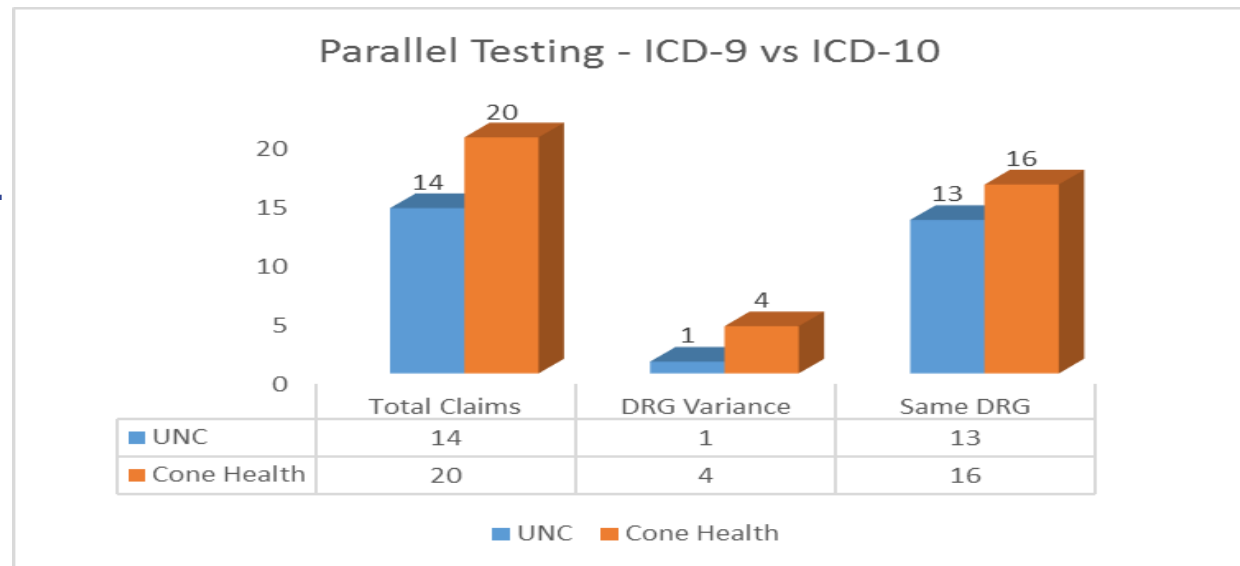
Selected five hospitals for ICD-9 vs ICD-10 DRG variance testing



Carolinan HealthCare System



Test results so far....

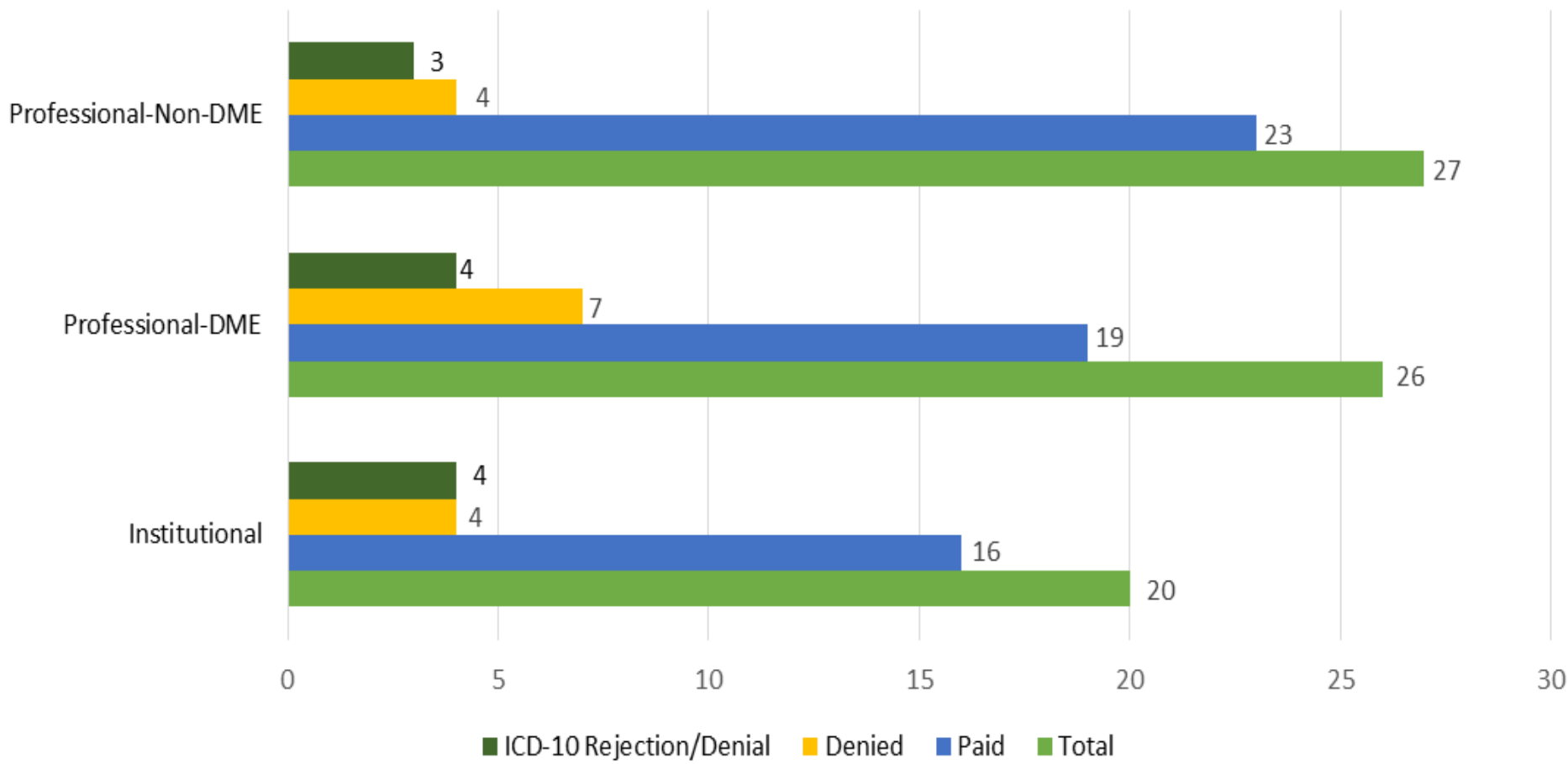


Note: There are 3 claims from UNC with same DRG but different payments. Analysis in progress.

Medicare Crossover Claims Testing



COBA Medicare crossover claims test results



Note: Major ICD-10 rejection due to invalid ICD-10 version qualifier

Test Results Summary



- Inpatient
 - DRG code and weight assignment is mostly consistent with ICD-9 with few exceptions found.
- Professional/Outpatient
 - No payment impacts have been found related to ICD-10 except for the difference between test and production
- Denials
 - Denials have been consistent with normal denial levels other than ICD-10 related denials noted on previous slide
- Claim Rejections
 - Rejection was mainly on the invalid ICD version qualifier. Pre-testing has helped to reduce the rejections in formal cycle 1 testing
- Other (non-ICD-10) Issues
 - Duplicate claims
 - Invalid recipient data
 - Invalid taxonomy

Questions???

