

ICD-10 Frequently Asked Questions

- 1. When can we begin testing?**
As soon as you notify Tom Keith/Xerox that you want to send in test file.
- 2. Will I get an 835 Transaction back?**
Yes, unless you have not signed up for the 835 Transaction, then we can generate a paper remittance advice (eSOR).
- 3. Is there a specific timeline that we can send in a test file?**
From September 18, 2015 to October 1, 2015, we will not be able to test any ICD-10 claims. There may be a point after October 1, 2015, that we turn off the test region permanently.
- 4. Will any edits be turned off during the testing?**
No, we will have all edits active, including the NCCI edits.
- 5. Do we need to send in one claim type at a time, or can we submit one file with a variety of claims listed?**
If a provider has a professional and UB claim, these must be submitted as two separate files (i.e., 837P and 837I).
- 6. Can we submit paper claims?**
Yes, but they must be sent to the Testing unit for processing.
- 7. If I have questions on testing results, who should I contact?**
Contact Tom Keith, tom.keith@xerox.com.
- 8. When I submit electronic claims, how long will it take to receive my 835 or remittance advice back?**
If there are no issues with the file, you can expect results within 10 business days. The point of contact you have designated will be notified.
- 9. How long will it take to get my remittance advice back if I submit paper test claims?**
If there are no issues with the file, you can expect results within 10 business days. The point of contact you have designated will be notified.
- 10. Will my ICD-10 claims process differently than my current ICD-9 claims?**
Your claims should process and reimburse at the same rate unless there have been rate changes between the time the ICD-9 claim and the ICD-10 claim were submitted.