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OFFICIAL MEMORANDUM

DATE: May 13, 2015
TO: All DBH Contracted Providers
FROM: Nora K. Bock, DBH Director of Adult Community Treatment
RE: ICD-10/DSM-5 Information Update

Please be reminded that our diagnosis and billing system will be changing October 1, 2015. CIMOR will require ICD-10 diagnoses in Episodes of Care for admissions on or after October 1, 2015. For billing in Medicaid eligible programs, CIMOR will require ICD-10 diagnoses for services provided on or after October 1, 2015.

To be adequately prepared for this change, all providers are strongly encouraged to utilize the CIMOR testing environment as soon as possible for both batching and keying services, as well as familiarizing clinical staff with the diagnosis pages, reporting options and utilizing the diagnostic mapping available in CIMOR. Organizations should ensure that their EMR systems are ready to accept DSM-5/ICD-10 diagnoses, and are able to batch pre-encounter transactions and claims on an 837 (if desired) in order to avoid problems on **October 1, 2015**. Testing is available the third week of every month beginning April 20-24, 2015.

Agencies are also encouraged to utilize the report features to identify and resolve the following prior to October 1, 2015:

- Update diagnosis codes/descriptions that have been ended
- Map diagnosis codes to ICD-10
- Ensure there are qualifying principal diagnoses in the Episodes of Care for CSTAR and/or CPR programs

The new reports are now available in CIMOR and named the following:

- Diagnosis Codes Ended
- Current Diagnoses Not Mapped to ICD-10
- Missing Principal Diagnosis