



Provider Notice

On June 17, 2015 Magellan sent out a notice to providers regarding the implementation of the ICD-10 coding system in October 2015. To alleviate any confusion regarding the Virginia Medicaid and Magellan position on this implementation, Magellan is providing the following clarification.

Virginia Medicaid and Magellan are not abandoning the use of the DSM in clinical practice. Magellan recognizes that the DSM continues to be a valuable resource and understands providers will continue to use it for clinical conceptualization and diagnostic criteria. The DSM 5 was created with the knowledge of the transition to ICD-10; the ICD-10 coding structure was incorporated within the appropriate DSM clinical diagnostic criteria.

In October 2015, the ICD-10 coding system will be the only recognized HIPAA compliant method for electronic claim submissions. When entering the diagnosis code on a claim to Magellan for reimbursement purposes, the diagnosis code entered will need to be the appropriate ICD-10 code. Because the Magellan claim system diagnosis must match the diagnosis listed on a service authorization, Magellan will be requiring providers use the ICD-10 diagnosis code in electronic service authorization requests. This match between the claim and the service authorization must occur or the claim will be denied. It will remain the provider's responsibility to confirm the selected DSM diagnostic code aligns with ICD-10 diagnostic code for all official records.