



ICD-10 / DSM-5 Code Changes!!

The grace period is over, and it's a game changer for all industries. Be prepared to tighten up your ICD-10 / DSM-5 processes - and check out the **code changes for mental + behavioral health**.

Grace Period Over

CMS offered a grace period for the first year of ICD-10 by not denying claims that had codes in the correct ICD-10 "family"; however, now that it's passed, code specificity is the new enforced standard. You must be proficient in using the most specific ICD-10 codes possible, or your revenue flow might take a hit as post-grace-period denials increase.

However, it's not just about claims. As CMS and HHS shift the industry from quantity to quality-based metrics, it's more important than ever to prove the necessity and quality of your treatments. Using the most accurate and specific ICD-10 code for diagnosis isn't just about pushing the claim through for payment: it's about providing the best quality of care possible for your clients – and proving that you're doing so.

"The bottom line is that your reported ICD-10 codes are used in a multitude of ways to measure you against your peers." {Denny Flint, Peak MSO}

Watch Your Unspecified Codes

In addition to the need for greater code specificity presented by the end of the ICD-10 grace period, mental + behavioral health clinicians have already encountered some challenges with unspecified codes, due to [incongruities between the DSM-5 and the CMS code sets](#).

Remember: the DSM-5 is a guide to picking the right ICD-10 code. CMS has confirmed that clinicians can use unspecified codes when they are most appropriate; however, you must demonstrate medical necessity for the services provided.

Code Changes for Mental + Behavioral Health

[Click here](#) to access the **DSM-5 / ICD-10 code changes from the APA - and for other details about the October 2016 changes.**

How Did PIMSY Handle?!

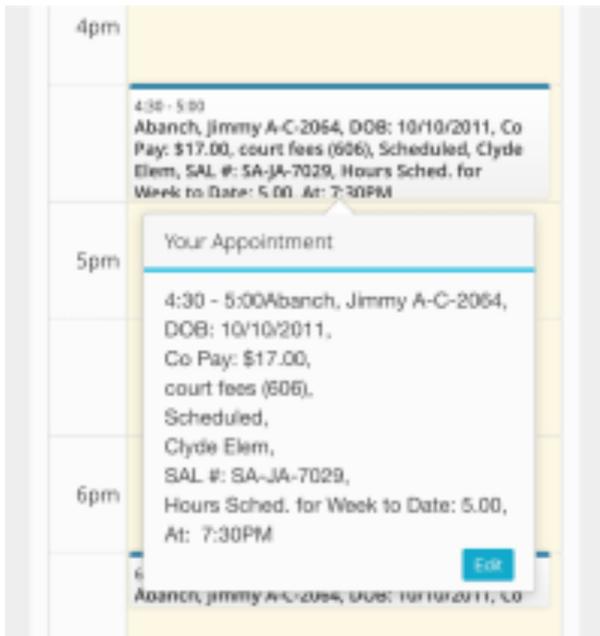
We followed the APA's changes by inactivating F50.8, F34.8, L98.1, F64.1, F42, F32.8, N94.3, F80.89 - and adding F50.89, F50.81, F34.81, F42.4, F64.0, F42.3, F42.2, F32.89, F42.8, F32.81, F80.82, F42.9.



MACRA / MIPS / APMs / QPP

CMS has finalized details about the Medicare Access and CHIP Reauthorization Act (MACRA) Quality Payment Program (QPP). **MACRA integrates Meaningful Use, PQRS, and the Physician Value-based Payment Modifier System.**

To see if you qualify for the incentives - or penalties! - [check out the details.](#)



Don't Forget About the App!!

The new PIMSY app allows you to access PIMSY on your mobile device and makes it even easier to work remotely, serving your clients whenever and wherever works for you!

There is no additional cost for the PIMSY application. As long as you are a PIMSY customer, it's free.

The app works in real-time, meaning synchronous data sharing with your home office. [Click here](#) - or **contact Support** - for details.



Following Regulations for Telehealth

What are the rules and guidelines for practicing telehealth - or telepsychotherapy - in your own state? What about across state lines?

[Get the scoop....](#)

To your success!

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