

April 4, 2018

The message below will be included in remittance advice messages, and run through September 25, 2018.

ATTENTION: LTC and ICF-DD PROVIDERS

Louisiana Medicaid **UB-04 Billing Instructions Manual for Nursing Facility and ICF-DD**, has long contained policy requiring Long Term Care and ICF-DD Providers to include a Principal Diagnosis when billing transactions. Previously, there wasn't an edit in place to validate a valid ICD-10 code was reported- but that will now change.

Effective for **Dates of Service August 28, 2018** and forward, Medicaid will implement an edit requiring a valid ICD-10 diagnosis code is reported in the principal diagnosis field. Claims submitted without a valid principal diagnosis code will be denied for correction.

Louisiana Medicaid UB-04 Billing Instructions Manual for Nursing Facility and ICF-DD identifies **Other Diagnosis Field** as a situational field. While reporting Other Diagnosis is not required, effective with dates of service August 28, 2018 and forward, Medicaid will implement an edit to deny the claim for correction when an invalid ICD-10 code is reported in the Other Diagnosis Field.
