ICD-10 Testing Tips

The act of testing helps validate your vital systems are functioning properly when ICD-10 codes are used. It also helps in verifying workflow processes have been adjusted accurately to incorporate ICD-10. Testing should start soon after you have:

- Gained access to an ICD-10 compliant version of your practice management, clinical, and/or other systems affected by the ICD-10 transition
- Completed the system specific set-up and configuration activities for which your practice may be responsible

Action Steps

The following action steps should help guide you through the internal and external testing process:

1. Test all systems that store, process, send, receive, or report diagnosis code information. Verify all internal paperwork, reports and documents allow for ICD-10 code use. Use your test cases to verify the following system functions and processes work properly:

- Perform eligibility and benefits verification
- Schedule an office visit
- Process an authorization (complete pre-authorization paperwork)
- Process a referral
- Update a patient's history and ailments
- Prepare clinical notes for an encounter (S.O.A.P.)
- Code an encounter
- Generate and process a claim
- Perform a claim status inquiry
- Reconcile and post a payment
- Run frequently used reports
- Perform other key tests as needed

2. Document test results and retest as needed:

- Document your test results. Investigate the cause (data entry, process, system, other) for tests that failed unexpectedly
- Report potential system issues to the applicable technology vendors
- Test fixes installed and changes made to address the problems you identified