

# Cultivating Opportunities to Lead in the Face of Delay

[Save to myBoK](#)

By Angela C. Kennedy, EdD, MBA, RHIA

The International Classification of Diseases (ICD) is a language used to capture morbidity and mortality data and helps to provide a snapshot of population health around the world. ICD-9-CM was implemented in the United States in 1979 and is long overdue for replacement. The system is obsolete and lacks the flexibility to accommodate necessary code expansion. ICD-9-CM no longer reflects current clinical knowledge, contemporary medical terminology, or modern medical practice.

The World Health Organization member states began using ICD-10-CM in 1994 and the classification system represents a significant improvement over ICD-9-CM.

Each year that ICD-10-CM is delayed in the US, costs increase, jobs are impacted, and implementations become more labored. Health plans are faced with maintaining both ICD-9-CM and ICD-10-CM systems. The healthcare ecosystem has invested millions of dollars in preparation for ICD-10-CM.

Meanwhile, ICD-11 is expected to be released by the World Health Organization in 2017. Some critics believe the US will wait for ICD-11, but ICD-11 rests on the foundation of ICD-10-CM. The advanced nomenclature and classification system will include diagnosis codes only, and a procedural coding system will still be required. The clinical modification of ICD-10 occurred eight years after the classification was endorsed. While ICD-11 is on the horizon, it will be a decade before the classification system is a viable option in the US.

As health informatics and information management professionals, we are ready for the transition to ICD-10-CM/PCS. We have an acute understanding of the silent cost of deteriorating health data. Outdated ICD-9-CM codes provide inaccurate and limited data for decision making and hinder US efforts to provide clinically relevant and internationally comparable data. ICD-10-CM will offer big returns for the healthcare ecosystem and the consumer. Our ability to effectively measure quality of care, assess patient outcomes, monitor patient safety, track and trend public health data, exchange health data with other healthcare organizations and government agencies, and adopt value-based purchasing improves dramatically.

The revised classification enables the use of applied informatics to reduce costs, improve the quality of care, improve population health, and drive business decisions.

Business author Tom Peters stated in his book *Thriving on Chaos*, "The winners of tomorrow will deal proactively with chaos, will look at chaos per se as the source of market advantage, not as a problem to be got around." The delay in ICD-10-CM presents as chaos but is also an opportunity in disguise. Our organizations will forge forward with best practices in training and keep implementation moving forward.

As professionals, we can use this as an opportunity to share with the consumer the impact ICD-10-CM will have on the healthcare ecosystem and the direct benefits better data will have on patient care and outcomes.

As American futurist Alvin Toffler puts it, "our moral responsibility is not to stop the future, but to shape it... to channel our destiny in humane directions and to ease the trauma of transition." As always, remember to Dream Big, Believe, and LEAD.

Angela C. Kennedy ([angela.kennedy@ahima.org](mailto:angela.kennedy@ahima.org)) is head and professor, department of health informatics and information management, at Louisiana Tech University.

---

**Article citation:**

Kennedy, Angela. "Cultivating Opportunities to Lead in the Face of Delay" *Journal of AHIMA* 85, no.6 (June 2014): 10.

---

## Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.