

HIM's Shifting Sands: The Latest News on ICD-10 and Other HIM Issues

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There has been a great deal of activity in the last few months on ICD-10-CM/PCS and other HIM issues. Here is a review of the latest news and events related to ICD-10, as well as updates on AHIMA's other advocacy issues.

ICD-10's Status

The road to ICD-10 has been long and winding. The arguments for and against it go back more than 20 years.

So there was reason to celebrate when the ICD-10 final rule was published in early 2009, even if the compliance deadline was pushed back to accommodate those who needed extra time. The October 1, 2013, compliance date was considered one that could be planned for and achieved.

Then in February came the announcement from Department of Health and Human Services Secretary Kathleen G. Sebelius of a delay to the compliance date. At press time, no further information had been released.

AHIMA urged those currently implementing ICD-10 to continue their work. The association also recommended that those who have not begun their implementation take steps to do so.

In addition AHIMA called on the secretary to reaffirm the administration's commitment to implement and use ICD-10 and strongly requested the secretary not delay the compliance date. AHIMA stressed the system's benefits, its impact on other healthcare information-related programs, and the huge investment providers, plans, clearinghouses, and the Centers for Medicare and Medicaid Services have made over three years to meet the October 1, 2013, deadline.

The secretary was clear that she understood the value of using ICD-10 but stated that the decision to delay was made after hearing from "many in the provider community who have concerns about the administrative burdens they face in the years ahead."

However, AHIMA believes this was a political decision made by the White House to accommodate small physician practices who feel overwhelmed by all the changes related to electronic health records and health information exchange and the continued uncertainty related to Medicare and Medicaid payments due to Congressional failure to revise the physician payment system.

HIM professionals can relate to physicians' reimbursement problems, and many are also under pressure to adapt to regulatory changes and implement new technology with limited staff. However, HIM professionals have been striving to meet all the goals related to health information.

AHIMA is working with a growing alliance of providers, plans, vendors, and other stakeholders to stop or minimize the delay and outline all the requirements and programs affected by this decision. Just the announcement of a delay is causing a delay for many.

ICD-10 Communication and Education

Over the last few months AHIMA has tried to give members as much information as possible so that they understand what is going on, what steps they can take, and the association's efforts. The association appreciates all member comments, both supporting and opposing the delay, as well as members' local efforts to ensure that any delay is minimal. These comments give AHIMA a picture of what is happening in the industry.

A number of state HIM associations have reached out to physician groups to help them understand the need for ICD-10-CM and how to use it, providing them with information, educational seminars, and written documents. Members have been working to educate physicians and others affected by the ICD-10-CM conversion on how they can meet the requirements, use ICD-10-CM to learn more about their practices and potential quality improvements, and use it for more than just reimbursement.

Members and state associations are also working to help physician implementation, whether developing a new "superbill" in ICD-10-CM or implementing EHRs or administrative systems that can provide the necessary coding.

If HIM professionals cannot explain the need for new 21st-century classification systems and how documentation and coding need to change, who can?

AHIMA thanks members for their local and state efforts. Often grassroots efforts can affect change more than those at the top.

AHIMA is educating policy makers on how ICD-10 affects federal programs like meaningful use. The association is currently completing its comments on the stage 2 meaningful proposed rule and the accompanying EHR certification rule.

The healthcare industry will not be able to fully demonstrate meaningful use of EHRs until the infrastructure can support healthcare information, including ICD-10 codes. It is time again to call for all health IT to be able to handle ICD-10.

HIM professionals should also provide comments and examples of how the US health information system can be improved.

In Washington, it isn't over until it is over-and even then decisions can be reversed. AHIMA hopes members will join with other HIM professionals and the AHIMA board and staff to push forward with ICD-10 in their organizations. There is a lot of work to be done, and HIM professionals are the ones who can do it.

Patient Identifier

AHIMA and its allies have been asking Congress to assign a Government Accountability Office study to determine the potential value of using a uniform patient identifier. AHIMA has undertaken this effort because Congress has inserted language in every appropriations bill since 1997 that prohibits HHS from undertaking any effort that requires appropriated funds to determine whether the US should consider a patient identifier. Only a member of Congress can request such a study.

It appears AHIMA's efforts have paid off. AHIMA hopes to announce soon that Congress will request this study, thanks in part to its March Capitol Hill efforts. Stay tuned for more information on this in AHIMA's weekly *e-Alert* newsletter.

More work will be required on this issue if the study suggests that there is value in pursuing a uniform patient identifier. Congress must pull the prohibitory language from the current appropriations bill and HHS and its advisory committees must pursue the subject. Resolution on this issue will take a few more years.

Elections

This is an election year, and HIM professionals should use the opportunity to educate Congressional candidates in both parties about the HIM profession and its issues. The incoming 113th session of Congress will continue to examine the costs of the meaningful use program, funding of HIEs, governance of healthcare terminologies, and funding for the Office of the National Coordinator for Health IT. Often individual efforts to meet with a campaign, staff, or candidate can affect more change than an organization's advocacy efforts.

AHIMA and its component state associations do not endorse candidates or donate to any candidate's campaign. However, members do have the right to work with candidates of their choosing. HIM professionals should get involved in making their voice heard during this election.

Over the last two decades AHIMA has worked with senators, representatives, and administrative officials of both major parties on HIM goals and objectives. On most issues, health IT and associated topics have been one of the few nonpartisan issues.

AHIMA must maintain this approach, but there will be a heavy turnover in Congress this year-and potentially in the White House as well. Talk with the candidates and make sure they know that the HIM profession and AHIMA are here to help in their health information education and decision making in the months to come.

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