

Unforeseen Delay, A Determined Call to Action

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By Angela C. Kennedy, EdD, MBA, RHIA

President Barack Obama signed H.R. 4302, the Protecting Access to Medicare Act of 2014, into law April 1, 2014. Though the bill's main purpose was to create another temporary "patch" to the Medicare sustainable growth rate, language in a section of the bill effectively delayed the ICD-10-CM/PCS compliance date until at least October 1, 2015.

The news rocked health informatics and information management professionals around the country. Action Alerts went out to over 35,000 AHIMA members. Over 6,000 members participated on social media. The Action Alert was shared over 1,000 times. Over 30 Component State Associations (CSAs) sent out additional e-newsletters based on the call to action. Over 5,000 Tweets with the hashtag #NoDelay were sent in support of ICD-10-CM/PCS, and special e-Alerts announcing the latest news and calling for advocacy were sent to over 80,000 people. Even with the best efforts of our members and AHIMA staff, this legislation has changed the course of ICD-10-CM/PCS.

In 1929, our founder Grace Whiting Myers wrote: "What does one gain by belonging to the large association? It is the question of the relation of the individual to the group. The individual may do excellent work, but their horizon is limited. The group brings together all the excellence of many individuals, raises it to a high place plane, and gives it a large outlook embracing great possibilities."

So what happens next? The AHIMA Foundation, the Council for Excellence in Education, the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM) and the Commission on Certification for Health Informatics and Information Management (CCHIIM) are AHIMA affiliates and serve as the cornerstone for education, accreditation, certification, and professional development in HIM. And they now have their work cut out for them.

Some 25,000 students have learned ICD-10-CM/PCS, and it is unknown how many of these students are cross-trained in ICD-9-CM. Educators are now tasked with ensuring students and recent graduates are ready for the work that lies ahead. Immediate attention must be given to new professionals with little or no ICD-9-CM training. Academic programs will carry the financial burden of retooling for a changing workforce. Faculty members are ramping up quickly with boot camps to get students and recent graduates ready for employment. AHIMA will also release ICD-9-CM transition materials to assist those who need to retool.

In addition, CAHIIM is challenged with addressing the needs of existing and emerging academic programs around a curriculum for the present and a curriculum for the future.

As health informatics and information management professionals, we will continue to lead the transition to ICD-10-CM/PCS. Though unwelcome and unexpected, this delay presents organizations with an opportunity to use clinical documentation improvement to achieve clinical documentation integrity. We must be champions of competency and proficiency in ICD-10-CM/PCS. We must continue to advocate for ICD-10 implementation, and work to ensure preparedness at all levels.

Better data for better consumer outcomes is our glorious burden. As always, remember to Dream Big, Believe, and LEAD.

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