

Why ICD-10 Can't Wait

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by Dan Rode, MBA, FHFMA

In August the Department of Health and Human Services (HHS) published two notices of proposed rule making (NPRMs): one for the adoption of ICD-10-CM and ICD-10-PCS and one for an upgrade to the HIPAA transaction standard. Comments on the proposed rules are due on October 21. Once the comment period closes, HHS will review the comments and prepare the final rules.

The final rules will dictate how and when the US will upgrade its ICD classifications and the HIPAA transaction standard, which haven't been updated since 1979 and 2000, respectively. AHIMA encourages every HIM professional and organization to submit comments to these proposed rules.

Why the Delay?

Since HHS issued the notices on August 22, debate surrounding the timeline for replacing ICD-9-CM with ICD-10-CM and ICD-10-PCS has resurfaced. The debate has existed since the National Committee on Vital and Health Statistics (NCVHS) urged that the US begin the regulatory process to adopt I-10 in 2003. NCVHS first noted the benefits of upgrading to ICD-10 in the early 1990s, when the World Health Organization endorsed it and countries began implementing it.

In the US, adoption of ICD-10-CM and ICD-10-PCS has been delayed due to a number of issues. Various delays in the implementation of HIPAA transactions pushed ICD-10 implementation further back, as did Y2K. HHS did not address NCVHS's 2003 recommendation until now.

Each delay has increased the difficulty and cost of converting to ICD-10-CM. Ironically, ICD-10-CM was built on the US's experience with ICD-9-CM and has now been adopted by most of the international community, including all large industrial nations. ICD-10-PCS was designed to replace ICD-9-CM's procedure codes (volume 3) for inpatient institutions.

While both classifications have been available for almost a decade, the US only uses the international ICD-10 to report mortality information.

The Time Is Now

The debates over upgrading to ICD-10 usually concern cost, effort, timeline, and necessity.

Upgrading to ICD-10 will be difficult and costly. But the longer we wait, the harder it will become. In the meantime, ICD-9-CM will continue to fall behind the industry's needs.

ICD is more than a reimbursement code set. Classification data has value for public health reporting and exchange, research, quality measurement, and policy making. It can contribute to refinement of reimbursement that could significantly improve the clarity of the care provided and cut the administrative costs associated with post-billing administrative procedures.

ICD-9-CM cannot keep up with these demands. The system is nearly 30 years old and running out of new codes to describe contemporary medicine. Already in the last several years the US has suffered from its inability to classify diseases and describe medical and behavioral treatments that did not exist in the last decade.

Meanwhile the US's dependence on ICD codes has exploded. In this first decade of the new century, we are attempting to determine quality, severity, and other information with a code system that can't provide adequate answers. As HHS points out in its comments accompanying the NPRM, the healthcare industry is at risk of basing its evolving payment systems on a foundation of inadequate information and in turn using valuable resources on an essentially paper-based system.

The upgrade has a direct impact on development and adoption of electronic health records, health information exchange, and international disease tracking and medical knowledge sharing. Advancing these widely held healthcare goals requires improving the data. Additional delay will only heighten the impact and raise the cost.

The HIPAA Transaction Standard

Developed by ASC X12 and the National Council for Prescription Drug Programs (NCPDP), the standards supporting the HIPAA transactions were designed, like other standards, to be upgraded on a regular basis. Unfortunately, when the HIPAA rules were written, they did not accommodate the usual migration of software. Therefore, we find ourselves facing an upgrade in the ASC X12 and NCPDP software akin to moving from Microsoft 95 to Microsoft 2003 without the interim steps. The software has been designed to be upgraded, but the number of changes compiled by so long a wait will require more time to upgrade and test.

The impact of the HIPAA changes, like the ICD-10 upgrades from ICD-9-CM, will vary with the amount of systems used by providers, health plans, and clearing houses that use the standards. There is no getting around this fact. However, like upgrading to ICD-10, the more we delay, the greater the cost and effort required in the future.

Speak up on the Proposals

The comments that HHS receives on the NPRMs will influence how much longer the US takes to make the switch. AHIMA has been a supporter of upgrading to ICD-10 since the system's release in the early 1990s. Our support and position are clear, and we have a number of resources for members and the healthcare community at www.ahima.org/icd10.

AHIMA encourages members and their organization to step up and be heard. Change always requires work and resources, but as we know, improved data can improve healthcare and, in the end, lower the cost of that care.

If you and your organization have not commented, now is the time to be heard. Comments are due by October 21. AHIMA looks forward to working with members, their organizations, and the healthcare industry to make the adoption and implementation of ICD-10-CM and ICD-10-PCS as smooth and as reasonable as possible.

Latest Information on the Notices

The notices of proposed rule making can be found in the August 22, 2008, *Federal Register*, available both in print and online. Additional detail can be found on the Centers for Medicare and Medicaid Services and the National Center for Health Statistics Web sites. CMS also offers fact sheets on both NPRMs online. Links to all of these materials are available on AHIMA's **ICD-10 Web** page at www.ahima.org/icd10.

The AHIMA ICD-10 Web page offers a range of material at the site, including FAQs and information on:

- Why ICD-9 is being replaced
- The value of ICD-10
- Understanding ICD-10
- The ICD-10 regulatory processHow organizations can prepare
- AHIMA's advocacy efforts
- The relationship between classifications and terminologies
- Educational opportunities

The site also features free downloads of two **AHIMA Webinars**:

- "ICD-10 Implementation: What's Next?" available for free to both members and the public. The Webinar was first broadcast August 26. An accompanying resource book is also available for download.
- "Beginning the Transition to ICD-10," originally broadcast on September 9. This Webinar is available to AHIMA members only.

The March 2008 issue of the *Journal* featured a special section on ICD-10. These articles and others are also available through AHIMA's ICD-10 Web site.

If you are attending **AHIMA's Convention and Exhibit** this month in Seattle, look for a number of ICD-10 events. Check for programming updates at www.ahima.org/convention and on-site in the registration area.

Dan Rode (dan.ode@ahima.org) is AHIMA's vice president of policy and government relations.

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