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AHIMA Warns: “Keep Moving on ICD-10 Transition”

Providers and Health Plans that Delay May Not Meet 2013 Deadline

CHICAGO – Jan. 30, 2012 – The American Health Information Management Association (AHIMA) today urged the healthcare community to continue preparing for the transition to the ICD-10 classification system, warning that the U.S. Congress may not act on requests to stop ICD-10 implementation and let stakeholders design and adopt a new classification system to replace ICD-9-CM.

“If healthcare providers stop their ICD-10 planning and implementation now and wait to see if Congress will take action, they will not be ready in time for the compliance date,” said Dan Rode, AHIMA vice president for advocacy and policy.

Currently, physician practices, healthcare delivery systems and payers use the 35-year-old ICD-9-CM classification system, but it has not been able to keep up with medical knowledge and new disease factors, limiting health data that can be used to improve patient care.

“The move to ICD-10-CM/PCS is at the foundation of healthcare information changes underway in the United States,” Rode said. “Without ICD-10 data, there will be serious gaps in our ability to extract important patient health information that will give physicians and the healthcare industry measures for quality of care, provide important public health surveillance, support modern-day research, and move to a payment system based on quality and outcomes.”

Stopping implementation would result in a significant financial loss to the healthcare providers, health plans, clearinghouses, technology vendors and the federal government, all who have invested in the transition and have been preparing for the last several years, said Rode.

The ICD-10-CM code set – the portion that must be used by all healthcare providers – was created by taking the international classification system ICD-10 and modifying it to meet the information needs of U.S. doctors. The Centers for Disease Control and Prevention (CDC) have been modifying the code set for more than a decade with input from stakeholders in the healthcare community, including physicians. Physicians are not required to use ICD-10-PCS which reflects the procedures and treatment provided by the practitioner. Instead, physicians will continue to use the American Medical Association’s CPT[®] classification system, lessening the changes doctors must make.

“The concern that physicians must use all the codes in the ICD-10-CM system is inaccurate. Like we use dictionaries to find specific words, practitioners use those codes that best fit their practice,” Rode said.

He also said AHIMA coders have shown that a “super bill” – a form that many practices still use – can be assembled in less than a day for most small practices, making the transition easy for those who do not want to invest in other automated options.

Numerous websites offer assistance for the transition, including AHIMA’s ICD-10 website (www.ahima.org/ICD10) and the Centers for Medicare and Medicaid Services’ (CMS) website (www.cms.gov/ICD10).

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About AHIMA

Representing more than 64,000 specially educated Health Information Management professionals in the United States and around the world, the American Health Information Management Association is committed to promoting and advocating for high quality research, best practices and effective standards in health information and to actively contributing to the development and advancement of health information professionals worldwide. AHIMA’s enduring goal is quality healthcare through quality information. www.ahima.org