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233 N. Michigan Ave., 21st Fl.
Chicago, IL 60601

phone >>(312) 233-1100
fax >>(312) 233-1090
web >>www.ahima.org

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For more information, please contact:

Bridget Stratton

Public Relations

312-233-1097

bridget.stratton@ahima.org

**AHIMA Testifies
Before Key Congressional Health Subcommittee on ICD-10**

“We Need It – and We’re Ready”

CHICAGO – Feb. 11, 2015 – The American Health Information Management Association’s (AHIMA) Sue Bowman, MJ, RHIA, CCS, FAHIMA, testified at a Congressional committee hearing today that the healthcare community is ready for the transition to ICD-10 on Oct. 1, 2015.

Bowman, [AHIMA's](#) senior director of coding policy and compliance, testified at the hearing, “Examining ICD-10 Implementation,” which was held by the House Energy and Commerce Committee’s subcommittee on health. In both her oral and written testimony, Bowman emphasized that the ICD-9-CM code set – developed in the 1970s – is obsolete and unable to support current health information needs, much less future ones. She addressed the cost of implementation, reasons for the number of codes and outlined the myriad benefits of the new, modern coding system.

“AHIMA appreciated the opportunity to testify before this distinguished committee and to reassert our long-standing belief that the healthcare industry is ready for October 1,” said AHIMA CEO Lynne Thomas Gordon, MBA, RHIA, CAE, FACHE, FAHIMA. “At its essence, ICD-10 can contribute to what all stakeholders want and can agree on: better patient outcomes at reduced costs.”

Also addressing ICD-10 implementation efforts, the Government Accountability Office recently distributed a [report](#) that detailed the Centers for Medicare and Medicaid Services’ extensive efforts to prepare for the new version of the ICD-10 disease and procedure codes.

Bowman outlined a number of specific benefits of ICD-10 in her testimony. Some examples include:

- Improved ability to measure outcomes, efficacy, and costs of treatment options, including new medical technology

- Improved ability to manage chronic diseases by better capturing patient populations
- More accurate reflection of patients' clinical complexity and severity of illness
- Improved ability to identify high-risk patients who require more intensive resources
- Improved ability to manage population health
- Increased patient engagement (as a result of access to better data)
- Improved information sharing, which can enhance treatment accuracy and improve care coordination

Bowman said that one of the most persistent criticisms about ICD-10 is that there are too many codes complicating the system, however physicians continue to request additional clinical detail in ICD-9.

“The expanded clinical detail in ICD-10 was requested by the medical community because these clinical distinctions are important to capture,” Bowman said. “Ninety-five percent of the requests for new ICD-10 codes have come from physician organizations. Increased specificity, clinical accuracy and a logical structure facilitate—rather than complicate—the use of a code set.”

Bowman said the concerns about exorbitant implementation costs for small providers are not supported by recent survey [data](#). While some have raised concerns about the increase in the number of codes in ICD-10, 46 percent are due solely to the greater specificity of being able to capture the side of the body affected by the clinical condition.

“The expanded specific clinical detail will make it easier, not harder, to find the right code,” Bowman said.

Bowman said the Department of Health and Human Services (HHS) has estimated that a one-year delay in the compliance date adds a range of 10 to 30 percent to the total cost that entities had already spent or budgeted for the transition, equating to a cost (\$1.1 to \$6.8 billion) for each one-year delay.

Free or low-cost education and implementation resources are widely available to assist small providers in making the transition to ICD-10.

“The healthcare industry is well-prepared to meet the October 2015 compliance date,” Bowman said. “We need it – and we’re ready.”

In addition to Bowman, the following stakeholders testified: Edwin M. Burke, MD, Beyer Medical Group; Richard F. Averill, 3M Health Information Systems; Kristi A. Matus, Athena Health; William Jefferson Terry, MD, Urology & Oncology Specialists, PC; Carmella Bocchino, America’s Health Insurance Plans; and John Hughes, MD, professor of medicine, Yale University.

Bowman, Burke, Averill and Bocchino represent organizations that are members of [The Coalition for ICD-10](#), a broad-based healthcare industry advocate group united in support of the U.S. adoption of the ICD-10 coding standard.

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About AHIMA

The American Health Information Management Association (AHIMA) represents more than 101,000 health information professionals in the United States and around the world. AHIMA 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