# NPRM: ICD-10

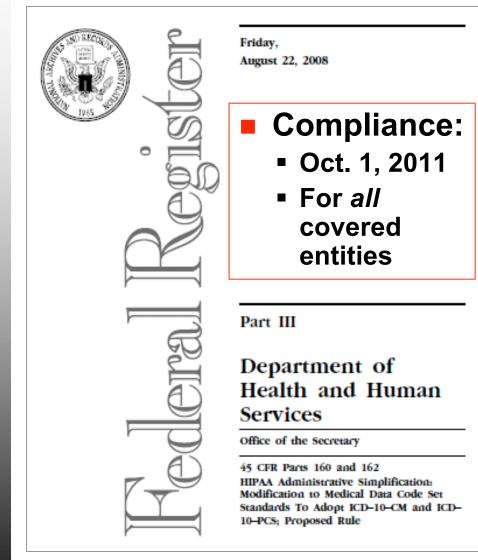
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## Why ICD-10-CM/PCS?



#### ICD-9-CM

- Running out of codes;
- Currently assigning codes to inappropriate sections which is error prone
- Not designed to meet level of detail for emerging needs
- In use for over 27 years; only country out of 138 using for morbidity reporting
- TCS 5010 enables ICD-10-CM and ICD-10-PCS

## Why not . . .

## Use unassigned codes in ICD-9-CM?

- This workaround denigrates the integrity of the hierarchy and creates an error-prone workaround
- Use CPT for coding hospital inpatient procedures?
  - Deemed inadequate for facility-based, nonphysician services (NCVHS, AHA, AHIMA, GAO)
- Wait and adopt ICD-11?
  - No firm timeframes for completion of developmental work or testing puts implementation between 2016 and 2020

# Why Not Use SNOMED CT?

- College of American Pathologists (CAP) has a limited-scope ANSI-accreditation as a standard setting organization
- SNOMED is now supported by the International Health Terminology Standards Development Organization (www.ihtsdo.org)
- Not designed for carrying out health care transactions; requires mapping to a classification system
- Designed as an input system for documentation of care, not intended to meet reimbursement and other external reporting requirements – which could, in fact, negatively impact its use in patient care, development and use of decision support tools, and the practice of evidence-based medicine
- Number of terms and level of detail cannot be effectively managed without automation

# What Is Cost/Benefit?

- Costs (2009 2023: \$1,640 million):
  - Training
    - Full-time coders
    - Part-time coders
    - Code users
    - Physicians
  - Productivity losses
    - Coders (inpatient)
    - Coders (outpatient)
    - Physician practices
    - Improper and returned claims
  - System changes
    - Providers
    - Software vendors
    - Payers
    - Government systems

Benefits (2013 – 2023: \$3,951 million):

- More accurate payments for new procedures
- Fewer rejected claims
- Fewer improper claims
- Better understanding of new procedures
- Improved disease management
- Better understanding of health conditions and health care outcomes
- Harmonization of disease monitoring and reporting worldwide
- Cumulative Net Benefits 2023: \$2,311 million

### Comparison: ICD-9-CM to ICD-10-CM/PCS

- Same hierarchical structure
- I-10 codes are alphanumeric
- I-9's V and E codes are incorporated into main I-10 classification
- I-10 can be as long as 7 characters for greater specificity
- Significant improvements in coding primary care encounters, external causes of injury, mental disorders, neoplasms, and preventive health
- Codes with more detail on socioeconomic, family relationships, ambulatory care conditions, problems related to lifestyle, and results of screening tests
- Laterality accommodated
- More space for future expansion
- ICD-10-PCS has no relationship to the basic I-10, which does not include procedures. Its structure is totally different, accommodating complex medical procedures:

1	2	3	4	5	6	7	
Name of	Body	Root	Body	Approach	Device	Qualifier	
Section	System	Operation	Part				