



# NCVHS

National Committee on Vital and Health Statistics

May 15, 2014

Honorable Kathleen Sebelius  
Secretary, Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, D.C. 20201

**Re: ICD-10 Delay**

Dear Madam Secretary,

Over the past 15 years the National Committee on Vital and Health Statistics (NCVHS) has devoted considerable attention to the feasibility, appropriateness and timeliness of replacing the current ICD-9-CM classification system with the new ICD-10-CM and ICD-10-PCS in the United States.

NCVHS held numerous public hearings between 1997 and 2003 on the topic, culminating with the formal recommendation in November, 2003 to adopt the ICD-10 code sets. A chronology of the development of ICD-10-CM and ICD-10-PCS is available at <http://www.ncvhs.hhs.gov/031105a1.htm>. A synopsis of testimonies and letters to NCVHS in support of the adoption of the new code sets is provided in <http://www.ncvhs.hhs.gov/031105a2.htm>. A complete listing of groups that provided input is available at <http://www.ncvhs.hhs.gov/031105a3.htm>.

On January 16, 2009, the DHHS published in the Federal Register, a final rule (74 FR 3328), in which the Secretary adopted the ICD-10-CM and ICD-10-PCS medical code sets as the HIPAA standards to replace the previously adopted ICD-9-CM, with a compliance date of October 1, 2013. Since then, NCVHS has held periodic industry hearings to review the status of preparation, transition planning and testing, education, communication and outreach efforts, and other activities aimed at ensuring a successful transition to the new code sets. Summaries of the numerous observations and recommendations on these important transition topics are available at <http://www.ncvhs.hhs.gov/reptrecs.htm> and from our Tenth HIPAA Report to Congress at <http://www.ncvhs.hhs.gov/111212hipaa.pdf>.

In the Spring of 2012, the Secretary announced the intent to delay the October 1, 2013 ICD-10 compliance date. At its June, 2012 hearing, NCVHS received

testimony indicating that while this new delay would provide the industry with additional time to prepare for a successful transition, it was imperative to ensure that no more delays would be considered in the future, to maintain the momentum of the process. In response, on September 5, 2012, the Department published a final rule announcing a realignment of the implementation date for ICD-10 to October 1, 2014.

Since then, we have continued to hear consistent calls across the industry for increased emphasis on education and outreach, particularly directed to providers, and for executing end-to-end testing of systems and processes. We also heard from a majority of industry stakeholders the need to continue to move forward, without any further delays, with the implementation of ICD-10 code sets.

With this letter, NCVHS wants to express our clear and unequivocal position and view that it is still in the best interest of the U.S. to adopt and implement the ICD-10-CM and ICD-10-PCS at the earliest permissible date. Any further delay will result in extensive and expensive realignment and waste of the very significant investment that health care organizations have already made towards the adoption of these new code sets.

We applaud the recent announcement by CMS of its intent to release an interim final rule in the near future that will require HIPAA covered entities to begin to use ICD-10 October 1, 2015, and continue to use ICD-9-CM through September 30, 2015. The industry has been preparing for this change leading up to the most recent revised date of October 1, 2014. We believe that continued urgency and efforts by the industry will help mitigate transition risks and further costs. We also believe that the new October 1, 2015 deadline should be the last and final date for the health care industry to move to ICD-10.

We intend to hold additional hearings in June of this year to listen to a wide spectrum of stakeholders regarding the impact of further delaying ICD-10 implementation, and will provide the Secretary with new observations and recommendations shortly thereafter.

Sincerely,

/s/

Larry A. Green, M.D. Chairperson,  
National Committee on Vital and Health Statistics

Cc: HHS Data Council Co-Chairs