

AMERICAN MEDICAL ASSOCIATION HOUSE OF DELEGATES

Resolution 211
(A-15)

Introduced by: Alabama
Subject: ICD-10 Implementation
Referred to: Reference Committee B

1 Whereas, ICD-10 is set to be fully implemented all on one day which is October 1, 2015; and

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3 Whereas, There is much misinformation being disseminated concerning the benefits of ICD-10; and

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5 Whereas, This inaccurate information is being promulgated not only by CMS but also by the Coalition for
6 ICD-10, a large alliance of industries that will financially benefit from ICD-10 being implemented; and

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8 Whereas, Many members of Congress, including the chairmen of the health care committees are quoting
9 this inaccurate information and comparing ICD-10-CM to what the rest of the world has implemented,
10 which is not an accurate comparison since the US will use five times the number of codes and will also be
11 the only country to use ICD-10 for billing; and

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13 Whereas, The present implementation of ICD-10-CM will force physician practices and small hospitals in
14 the districts of every congressperson to close and will result in thousands of patients being left without
15 access to local healthcare services; and

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17 Whereas, The ICD system was designed for statistics and epidemiological data, does not help in the day
18 to day care of our patients, should not be part of our billing system and will result in more inefficient
19 practices; and

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21 Whereas, President Obama should be asked to honor his stated commitment to reducing regulatory
22 burden especially in the health care system; and

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24 Whereas, Physicians have sent a clear message to Congress that is being ignored, and ICD-10 must now
25 be urgently addressed because uncertainty is not fair to anyone and the present plan for
26 implementation will mean disaster for patients, physicians and the medical profession overall;
27 and

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29 Whereas, The proponents for ICD-10 implementation are winning this political war with their
30 misinformation, and our AMA needs to be much more aggressive in fighting this battle with e-mails,
31 letters, newspaper commentaries and television news show appearances; therefore be it

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33 RESOLVED, If a delay in ICD-10 is not feasible, that our American Medical Association ask the Centers
34 for Medicare and Medicaid Services (CMS) and other payers to allow a two-year grace period for ICD-10
35 transition, during which physicians will not be penalized for errors, mistakes, and/or malfunctions of the
36 system. Physician payments will also not be withheld based on ICD-10 coding mistakes, providing for a
37 true transition where physicians and their offices can work with ICD-10 over a period of time and not be
38 penalized (Directive To Take Action); and be it further

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- 1 RESOLVED, That our AMA educate physicians of their contractual obligations under Medicare and
2 insurance company contracts should they decide to not implement ICD-10 and opt to transition to cash-
3 only practices which do not accept insurance (Directive to Take Action); and be it further
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- 5 RESOLVED, That our AMA aggressively promote this new implementation compromise to Congress
6 and CMS since it will allow implementation of ICD-10 as planned, and at the same time protect patients'
7 access to care and physicians' practices (Directive to Take Action); and be it further
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- 9 RESOLVED, That our AMA provide the needed resources to accomplish this new compromise ICD-10
10 implementation and make it a priority (Directive to Take Action); and be it further
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- 12 RESOLVED, That our AMA seek data on how ICD-10 implementation has affected patients and changed
13 physician practice patterns, such as physician retirement, leaving private practice for academic settings,
14 and moving to all-cash practices and that, if appropriate, our AMA release this information to the public.