September 23, 2003

Dear Committee Members:

The medical organizations listed below understand that your committee is considering a recommendation to the Secretary of the Department of Health and Human Services on whether to proceed with the adoption of ICD-10-PCS as a replacement for ICD-9-CM Volume 3. It is our strong and unequivocal position that any discussion or recommendation within your Committee or the Administration about the possible uses of ICD-10-PCS should be limited to the replacement of ICD-9-CM Volume 3.

We are also well aware that the Congress is considering language that addresses the future uses of ICD-10 and your involvement in that administrative process. We believe that the language of Section 942 (d) of the Medicare Prescription Drug Legislation (HR 1) is much too broad and have communicated that strongly to the congressional conferees. Our organizations support a modification to the legislation to clarify that ICD-10-PCS could be used as a replacement only for the current uses of ICD-9-CM Volume 3.

ICD-10-PCS was designed to be used as a coding system to describe services provided by hospitals. ICD-10-PCS was never designed nor intended to describe professional services. Evidence of this is that there are no provisions for coding for evaluation and management services (the most frequently billed physician service). Additionally, there are no codes for anesthesia, psychiatry, home health services, pulmonary services, allergy or immunology services, etc.

We strongly support the continued use of Common Procedural Terminology - CPT which relies on just over 8000 codes rather than the more than 170,000 codes contained in ICD-10-PCS. Our organizations play a critical role in updating and maintaining the physician coding system. The current physician coding system is used as the basis for reimbursement for our services by virtually all public and private payers. The Resource Based Relative Value System and CPT code set are inextricably linked and have taken thousands upon thousands of physician hours to develop and refine. For all of these reasons, we strongly support the continued use of CPT.

We respectfully urge the Committee to confine your recommendation to the uses of ICD-10-PCS as a coding system for inpatient hospital services.

Sincerely,

American Academy of Dermatology Association
American Academy of Facial, Plastic and Reconstructive Surgery
American Academy of Family Physicians
American Academy of Neurology
American Academy of Ophthalmology
American Academy of Otolaryngology – Head and Neck Surgery
American Academy of Physical Medicine and Rehabilitation
American Academy of Physician Assistants
American Academy of Sleep Medicine
American Association of Clinical Endocrinologists
American Association of Clinical Urologists
American Association of Neurological Surgeons
American Association of Orthopaedic Surgeons
American College of Cardiology
American College of Chest Physicians
American College of Emergency Physicians
American College of Obstetricians and Gynecologists
American College of Osteopathic Family Physicians
American College of Physicians
American College of Radiology Association
American College of Rheumatology
American College of Surgeons
American Geriatrics Society
American Medical Association
American Medical Directors Association
American Medical Group Association
American Occupational Therapy Association
American Optometric Association
American Osteopathic Association
American Physical Therapy Association
American Podiatric Medical Association
American Society for Clinical Pathology
American Society for Therapeutic Radiology and Oncology
American Society of Addiction Medicine
American Society of Anesthesiologists
American Society of Cataract and Refractive Surgery
American Society of Clinical Oncology
American Society of Neuroradiology
American Society of Plastic Surgeons
American Thoracic Society
American Urological Association
College of American Pathologists
Congress of Neurological Surgeons
Infectious Diseases Society of America
Joint Council of Allergy Asthma and Immunology
Marshfield Clinic
Medical Group Management Association
NASPE - Heart Rhythm Society
National American Spine Society
National Association for Medical Direction of Respiratory Care
National Association of Social Workers
National Medical Association
Renal Physicians Association
Society of Critical Care Medicine
Society of Thoracic Surgeons