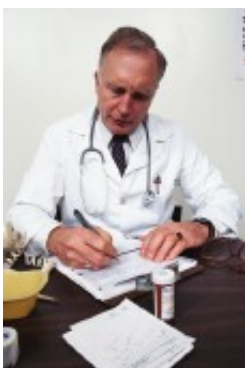


# AAFP, other physician groups request stop to ICD-10

January 15 2013

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The American Academy of Family Physicians has joined the American Medical Association and other physician organizations to request that the U.S. Centers for Medicare & Medicaid Services halt implementation of the International Classification of Diseases, 10th Edition, in a letter sent Dec. 20.

(HealthDay)—The American Academy of Family Physicians (AAFP) has joined the American Medical Association and other physician organizations to request that the U.S. Centers for Medicare & Medicaid Services (CMS) halt implementation of the International Classification of Diseases, 10th Edition (ICD-10), in a letter sent Dec. 20.

Noting that implementation of ICD-10, set to be introduced in October 2014 for outpatient diagnosis coding, will cause America's physicians to shoulder an extra burden at a time when they are already overwhelmed with the burden of implementing electronic health records (EHRs) and

face financial penalties if they do not participate in numerous [Medicare](#) programs, the AAFP and other organizations wrote to the CMS to ask for an end to ICD-10 implementation.

According to the letter, the ICD-10 codes will create significant burdens on physicians, with no direct effect on patient care. The ICD-10 increases the number of outpatient diagnostic codes from about 13,000 to more than 68,000. Implementation will necessitate many hours of education, training, and testing, which are likely to cost \$83,290 to more than \$2.7 million depending on the size of the practice. ICD-10 implementation could negatively impact the ability of [physicians](#) to participate in new health care delivery and payment reform models that are intended to foster higher quality, lower cost, and more efficient care.

"Stopping the implementation of ICD-10 and calling on appropriate stakeholders to assess an appropriate replacement for ICD-9 will help keep adoption of EHRs and physician participation in delivery and payment reform models on track and reduce costly burdens on physician practices," the letter concludes.

**More information:** [More Information](#)

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Citation: AAFP, other physician groups request stop to ICD-10 (2013, January 15) retrieved 29 December 2022 from <https://medicalxpress.com/news/2013-01-aafp-physician-groups-icd-.html>

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