June 18, 2015

Mr. Andy Slavitt  
Acting Administrator  
Centers for Medicare & Medicaid Services  
Hubert H. Humphrey Building  
200 Independence Ave., SW  
Room 314G  
Washington, D.C. 20201

Dear Acting Administrator Slavitt:

On behalf of the nation’s four largest state medical societies, we are writing to ask your help in protecting the viability of America’s physician practices and, in turn, access to health care for the millions of patients we serve.

Collectively, the California Medical Association, Florida Medical Association, Medical Society of the State of New York, and Texas Medical Association represent 125,000 member physicians and medical students. Our physicians practice in the nation’s largest cities and in the country’s most remote regions; they are members of large, integrated multispecialty clinics, and they are solo practitioners; they include America’s most experienced clinicians and researchers, and doctors who are brand new to practice.

For all of these physicians in all of these settings, the Oct. 1 mandatory implementation of the ICD-10-CM coding system is a looming disaster. The results of the recent end-to-end tests give us little confidence that the nation’s physicians, electronic health records, claims clearinghouses, commercial insurance companies, and government agencies will be ready when we “throw the switch” to ICD-10. The voluminous technical problems associated with the far simpler adoption of the National Provider Identifier and the HIPAA 5010 transaction standards give us even further cause for concern.

Even those practices that are most prepared for this transition tell us they worry about the confusion and reduced productivity they expect to accompany ICD-10. The quite realistic prospect of reams of denied and significantly delayed claims raises the specter of financial disaster or bankruptcy for many small practices.

We want you to know that many of us will continue our efforts in Congress to stop or delay ICD-10 implementation. But protecting our patients and their physicians is far more important to us than a political victory.
You have no doubt heard of the recent unanimous vote of the American Medical Association House of Delegates calling on you to establish a two-year ICD-10 grace period. As architects and supporters of that resolution, we seek your assistance in achieving its goals. We believe that two years of transition time, on-the-job learning by physicians — plus our continued ICD-10 educational activities — will result in a much less disastrous transition to this overwhelmingly complicated new coding system.

Specifically, we ask that you take steps as quickly as possible to accomplish the following well before Oct. 1:

- A two-year period during which physicians will not be penalized for errors, mistakes, and/or malfunctions of the system;
- A two-year period in which physicians will not be subject to RAC audits related to ICD-10 coding mistakes;
- A two-year period during which physician payments will not be reduced or withheld based on ICD-10 coding mistakes; and
- Advanced payments in the event that claims are delayed.

We remain steadfast in our belief that the ICD-10 coding system offers no real advantages to physicians and our patients — and certainly no advantages to justify the time and expense the entire health care system has invested in this transition. Even if ICD-10 were “the best thing since sliced bread,” its forced implementation would not be worth the extensive disruptions in patient care that surely will come without the grace period. The reduced productivity alone will cost physician practices hundreds of thousands of dollars and extend patient waiting times.

We stand ready to work with you, the administration, and Congress to help you achieve this tremendously important goal.

Sincerely,

Luther F. Cobb, MD
President
California Medical Association

Corey Howard, MD
Chair
Florida Delegation to the AMA

Joseph R. Maldonado Jr., MD, MSc., MBA, DipEBHC
President
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Texas Delegation to the AMA