ICD-11 RFI Comments from X12

X12 appreciates the opportunity to provide input to NCVHS on the ICD-11 transition. Our comments are based on our role as a consensus-based standards organization and our experience during the transition from ICD-9 to ICD-10.

X12's answers to the specific questions in the RFI follow. If you have any questions or I can provide additional information, please let me know.

3. **What standards, systems, workforce, and processes must change to accommodate ICD–11?**
   The administrative standards mandated under the HIPAA regulations would need to be updated to accommodate the ICD-11 code set and its changes from ICD-10-CM in the United States. X12 understands the clustering and post-coordination requirements, and will update our standards to accommodate those.

   X12 will also need to know how industry participants (providers, health plans) will be changing their business processes to interpret these codes and combinations so that the transaction standards can support them.   For example, hospitals may need to designate a primary diagnosis and secondary diagnoses. The combined codes may need to be broken down to accommodate that need.   X12 will finalize the standards when the business needs are documented.

   a. **How would your organization assess the cost and impact of these changes?**
      X12 members assess their costs and impacts individually. The cost of updating the standards is built into X12's maintenance processes.

   b. **How might technical changes such as clustered (post-coordinated) coding be implemented in your environment?**
      X12 will finalize the standards when the business needs are documented.

   c. **What other changes are related?**
      Implementors will need to revise their policies and systems to reflect the updates.   Regulatory updates supporting the use of ICD-11 will need to be promulgated.

4. **What are the most important considerations and requirements for a U.S. governing body for ICD–11?**

   a. **Developing and managing implementation plans and programs for ICD–11 in the U.S.**
      The US governing body should a set a firm schedule based on industry needs

   b. **Developing regulations or guidance for ICD–11 applicable to your organization.**
      The US governing body should define detailed regulation and guidance as soon as possible so that the standards can be updated to reflect the new requirements.

   c. **Ongoing management and maintenance of ICD-11 and its use.**
      The US governing body should define detailed management and maintenance revisions to the U.S. ICD-11 codes as soon as possible.

Stanley Nachimson
X12 ICD-11 Subject Matter Expert
stanley@nachimsonadvisors.com