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August 25, 2015

Andrew Slavitt  
Acting Administrator  
Centers for Medicare & Medicaid Services  
Department of Health and Human Services  
Attention: CMS-1625-P  
Mail Stop C4-26-05  
7500 Security Boulevard  
Baltimore, MD 21244-1850

Dear Acting Administrator Slavitt:

On behalf of the American Health Information Management Association (AHIMA), I am responding to the Centers for Medicare & Medicaid Services' (CMS) Medicare CY 2016 Home Health Prospective Payment System Rate Update proposed rule, as published in the July 10, 2015 *Federal Register* (CMS-1625-P).

AHIMA is a not-for-profit, membership-based healthcare association representing more than 101,000 health information management (HIM) and informatics professionals who work in more than 40 different types of entities related to our nation's healthcare and public health industry. AHIMA members are experts in the ICD-10-CM diagnosis classification. As part of our effort to promote consistent coding practices, AHIMA serves as one of the Cooperating Parties, who oversee development of official guidance associated with the proper use of the ICD-10-CM and ICD-10-PCS code sets. The other Cooperating Parties are CMS, the National Center for Health Statistics and the American Hospital Association.

Our comments relate to the transition from the use of ICD-9-CM diagnosis codes to ICD-10-CM diagnosis codes within the HH Prospective Payment System (PPS) Grouper. Specifically, we request clarification regarding the use in the home health setting of the seventh characters for "initial encounter" that are applicable to certain ICD-10-CM code categories. On page 72271 of the CY 2014 Home Health PPS final rule (published in the December 2, 2013 issue of the *Federal Register*), the elimination of traumatic injury codes with "initial encounter" extensions listed in the General Equivalence Mappings (GEMs) was discussed. Based on our communications with members of the home health community, it appears that the home health grouper does not allow for the use of the "initial encounter" seventh character for any S and T codes in the ICD-10-CM code set.

**Andrew Slavitt**

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While we agree that it seems reasonable that traumatic injury codes with the “initial encounter” extension would not be appropriate for the home health setting, there are other conditions that use these seventh characters for which the “initial encounter” character may be appropriate in the home health setting. The *ICD-10-CM Official Guidelines for Coding and Reporting* state that the “initial encounter” seventh characters should be used any time the patient is still receiving active treatment. A situation where a patient might be receiving active treatment in the home health setting is the continuation of antibiotics for treatment of a postoperative infection.

**AHIMA recommends that CMS revise the home health grouper to allow the reporting of the “initial encounter” seventh character for the ICD-10-CM codes for those conditions that could reasonably continue to be receiving active treatment in the home health setting.**

## **Conclusion**

Thank you for consideration of AHIMA’s comments concerning application of the seventh character for “initial encounter” in the home health setting. AHIMA is committed to working with CMS and the healthcare industry to improve the quality of healthcare data for reimbursement, quality reporting, and other applied analytics.

If AHIMA can provide any further information, or if there are any questions regarding our recommendations, please contact Sue Bowman, Senior Director of Coding Policy and Compliance at (312) 233-1115 or [sue.bowman@ahima.org](mailto:sue.bowman@ahima.org). In Sue’s absence, please feel free to contact AHIMA’s Vice President of Policy and Government Relations, Pamela Lane, at (202) 659-9440 or [pamela.lane@ahima.org](mailto:pamela.lane@ahima.org).

Sincerely,



Lynne Thomas Gordon, MBA, RHIA  
Chief Executive Officer

cc: Sue Bowman, MJ, RHIA, CCS, FAHIMA  
Pamela Lane, MS, RHIA, CPHIMS