

NOTICE TO REVIEWER

Date: February 9, 2016

Request Type: Non-material change

Employing Agency: Office of Workers' Compensation Programs/Division of Federal Employees' Compensation

Form Number/Name: CA-16, Authorization for Examination and/or Treatment

OMB/Expiration Date: 1240-0046, January 31, 2018

DFEC is requesting a nonmaterial change to the CA-16, Instruction page 4, INSTRUCTIONS FOR AUTHORIZED PHYSICIAN/MEDICAL FACILITY FOR COMPLETION OF PART B, in reference to a version of the International Classification of Disease. Specifically, the DFEC is requesting that the revision to the ICD be removed in the Instruction pages of the form.

In the currently approved form (under the Billing and Services Section on page 4), the following sentences read as follows:

- The form should contain appropriate International Classification of Disease (ICD-9) coding schemas in Block-21, and related correctly to the Diagnosis Pointers referenced in Block 24E.
- The form should contain the appropriate International Classification of Diseases (ICD-9) coding schemas in Blocks 66-70, and reference any surgical procedures performed in the facility in Blocks 74a-74e using the International Classification of Disease ICD-9 Surgical Procedure Codes.

Instead, the sentences should read without reference to the revision.

- The form should contain appropriate International Classification of Disease (ICD) coding schemas in Block-21, and related correctly to the Diagnosis Pointers referenced in Block 24E.
- The form should contain the appropriate International Classification of Diseases (ICD) coding schemas in Blocks 66-70, and reference any surgical procedures performed in the facility in Blocks 74a-74e using the International Classification of Disease ICD Surgical Procedure Codes.

Justification: When the form was submitted to OMB in 2014, DFEC made a change to remove references to the revision, i.e., "ICD-9" and use "ICD" only. This change was made on the form itself, page 2, blocks 16 and 18a, however, reference to delete the revision was not made in the instruction page as noted above. (The previous version of the form which expired October 31, 2014, made references to ICD-9 on the form itself (page 2, blocks 16a and 18a) as well in the instructions as noted above). Since revisions to the ICD change periodically, the DFEC believed it is was more prudent to leave out the revision to avoid confusion to our stakeholders. Additionally, taking such action would preclude DFEC having to address this issue if and when the ICD is revised. In fact, after the submission and approval of this OMB, a revision to the ICD was made, now ICD-10, which became effective October 1, 2015.

Note

ICD is used by physicians, nurses, other providers, researchers, health information managers and coders, health information technology workers, policy-makers, insurers and patient organizations to classify diseases and other health problems recorded on many types of health and vital records, including death certificates and health records. In addition to enabling the storage and retrieval of diagnostic information for clinical, epidemiological and quality purposes, these records also provide the basis for the compilation of national mortality and morbidity statistics by WHO Member States. Finally, ICD is used for reimbursement and resource allocation decision-making by countries.

The National Center for Health Statistics (NCHS), the Federal agency responsible for use of the International Statistical Classification of Diseases and Related Health Problems, 10th revision (ICD-10) in the United States, has developed a clinical modification of the classification for morbidity purposes. The ICD-10 is used to code and classify mortality data from death certificates, having replaced ICD-9 for this purpose as of January 1, 1999. ICD-10-CM is the replacement for ICD-9-CM, volumes 1 and 2, effective October 1, 2015.

Sources: <http://www.who.int/classifications/icd/en/>;

<http://www.cdc.gov/nchs/icd/icd10cm.htm>