

March 2, 2023

Brian Moyer, PhD

Director

National Center for Health Statistics

3311 Toledo Rd.

Hyattsville, MD 20782

Dear Dr. Moyer,

The undersigned organizations urge you to support a proposal submitted to the ICD-10-CM Coordination and Maintenance Committee to improve how hospitals code firearm injuries. Research has shown that ICD coding systems used by hospitals facilitate the miscoding of firearm injuries as accidents, leading to skewed data.

As the data are increasingly being used by researchers and public health officials to better understand the epidemiology of firearm injuries, flawed data leads to inaccurate interpretations of why firearm injuries occur resulting in the misalignment of prevention resources. While the ICD-10-CM hospital billing system provides a solid and valued picture of injury surveillance, the coding system and accompanying guidelines that call on hospitals to code a firearm injury as an "accident" when the intent is not clear are erroneously leading to greater case counts of unintentional firearm injuries rather than assaults.

In response to the coding misclassification issue, the Safe States Alliance has joined with the Harvard Injury Control Research Center and other stakeholders on a proposal to the ICD-10-CM Coordination and Maintenance Committee to strengthen the coding of firearm injuries by changing the default code for firearm injuries from "accident" to "assault." The Nationwide Emergency Department Sample (NEDS), which is based on hospital billing data, reports that about half of nonfatal firearm injuries are unintentional (accidents), whereas the National Electronic Injury Surveillance System (NEISS) reports that 80% are assaults. A case review study confirmed significant miscoding of assaults as accidents in hospital ICD-coding.

As a result of the misclassification of firearm injuries, a distorted picture is being reported to the public, including policymakers at the state and federal level. Your support of the coding change proposal is in line with the agency's interest in providing stakeholders, policymakers and the public with accurate statistics. The ICD-10-CM coding system was developed to provide more detailed information on injuries, including the severity of injuries and how and where injuries happened. Research has shown that the coding of firearm injuries in hospital billing systems are flawed, we urge that you work to address this flaw and strengthen the evidence-base in support of firearm violence prevention.

Sincerely,

American Association of Neurological Surgeons
American College of Surgeons
American Public Health Association
American Trauma Society
Big Cities Health Coalition
Congress of Neurological Surgeons
Futures Without Violence
Giffords
National Association of State EMS Officials
National Association of State Head Injury Administrators
National Safety Council
Safe States Alliance
SAVIR
The Health Alliance for Violence Intervention
Prevention Institute