

Achieving Administrative Simplification

Save to myBoK

By Lynne Thomas Gordon, MBA, RHIA, FACHE, chief executive officer

Who doesn't appreciate the things that simplify our lives? Whether we find ways to shorten our commutes to work or clear the clutter out of our homes and offices, simplification gives us the time we need to pursue the things that give us the most pleasure-time with family, friends, and community; time to plant our gardens; or time to go to the theater or walk in the woods.

For healthcare professionals, simplification can mean reducing the burden of administrative duties so there is more time to tend to the needs of patients and enhance the quality and cost-effectiveness of care.

A May 2010 *Health Affairs* survey titled "Saving Billions of Dollars-and Physicians' Time-by Streamlining Billing Practices" found that nearly 12 percent of physicians' revenue is spent covering the costs of excessive administrative complexity. The study found that simplifying these systems could save four hours of professional time per physician and five hours of support staff time every week-time that could be better spent on patient care.

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Simplification is an underlying theme of this month's cover story "Simplification at Last?" which describes the two sets of mandatory HIPAA operating rules that providers, payers, and clearinghouses must implement by the end of this year. The rules are intended to reduce ambiguities in interpretation of HIPAA transaction standards and simplify work processes for HIM professionals and the healthcare industry as a whole.

AHIMA played a significant role in these changes, leading a coalition devoted to requiring a single set of operating guides instead of the myriad guides in existence. This requirement became part of the Affordable Care Act of 2010. Through AHIMA's steadfast leadership, the ICD classifications chosen for the first version of the transactions will be modernized in 2013.

Simplifying the administrative tasks required to fulfill HIPAA standards is an important step if health IT is to fulfill its promise to improve patient care and reduce costs. As a leader in health information management, AHIMA is proud to be part of this effort.

A Review of Metadata, Ethics

Other features in this issue include "Metadata and Meaningful Use," which examines the status of stage 2 requirements for meaningful use and the proposed inclusion of metadata tagging in the meaningful use program. Although HIM professionals and others acknowledge the benefits, there is concern that more needs to be done to establish metadata standards before they can be applied.

"Ethics Update" describes changes to AHIMA's Code of Ethics introduced late last year. In an interview, chair of the 2011 AHIMA Professional Ethics Committee Dana C. McWay explains the process of reviewing, updating, and ratifying the code to ensure it remains current. I encourage all AHIMA members to familiarize themselves with the code and its importance as a guide to maintaining the highest ethical standards.

As HIM professionals, we must grapple with increasingly difficult and complex issues. Finding ways to simplify the adoption and implementation of health IT should be an integral part of our jobs. Albert Einstein once said, "Any intelligent fool can make things bigger, more complex... It takes a touch of genius-and a lot of courage-to move in the opposite direction." These are words we all can take to heart.

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