Get to Know AHIMA's Advocacy and Public Policy Team

Save to myBoK

AHIMA's Advocacy and Public Policy Team may only have five members, but its voice is loud and clear at the national level, providing input on key issues related to ICD-10, HIPAA, electronic health records (EHRs), clinical documentation improvement, information governance, and more. Exactly who comprises this powerhouse team, and what are they doing on behalf of AHIMA's members? Read on to learn more.

Nia Bailey, senior coordinator, advocacy and public policy

Q: Why did you join the Advocacy and Public Policy team?

Bailey: My goal is to assist the team with implementing processes and procedures that better our medical field through outreach and grassroots efforts.

Tell us about your work experience prior to joining AHIMA in 2014.

I coordinated advocacy and policy on a contract level for medical and educational non-profit organizations. I also held a four-year position focused on advocacy and foundation work at a New Jersey-based Fortune 500 medical firm that specializes in mail-order prescriptions.

What is the most challenging aspect of HIM advocacy work?

The constant shift in regulatory issues. One minute you can be in the clear, and the next minute, all of your hard work and efforts can be in jeopardy or even dismissed. Nonetheless, you have to remain focused. All of the hard work and dedication of my team members and the AHIMA volunteers always pays off in the end.

What are your primary areas of responsibility as AHIMA's senior coordinator?

I manage the day-to-day operations and logistical concerns of AHIMA's Washington, D.C. office.

Five years from now, what type of progress would you like to see made in the HIM field?

I would like to see HIM professionals become more innovative as the years go by. I'd also like to see more coalitions develop to better understand the changes in healthcare.

What are some of the regulatory initiatives that you think could have the biggest impact on HIM going forward?

A potential ICD-10 grace period. There are more than enough resources available to get all physician practices on board with ICD-10. As long as we provide a security blanket for those who resist ICD-10, the full integration will be delayed another decade or two.

What is the biggest challenge that the Advocacy and Public Policy team will face over the next few years?

Opposition. There will always be those who are opposed to change and evolution. There will always be members of Congress who will push in opposition of our advocacy work. However, as long as we steady the storm as a united front, we will prevail.

Sue Bowman, MJ, RHIA, CCS, FAHIMA, senior director, coding policy and compliance

Q: Why did you join the Advocacy and Public Policy team?

Bowman: I've always been interested in public policy. Serving on this team allows me to combine that interest with my passion for classifications and terminologies.

Tell us about the advocacy work you've done regarding ICD-10.

I have advocated for the replacement of ICD-9-CM with ICD-10-CM/PCS for the last two decades through position statements, comment letters, testimony before hearings of the National Committee on Vital and Health Statistics and congressional committees, meetings with congressional offices, and meetings with the Centers for Medicare and Medicaid Services.

What are your primary responsibilities as AHIMA's senior director of coding policy and compliance?

I provide strategic direction and leadership for coding policy, including advocating for federal legislation and regulations that advance health information interoperability and integrity. I also represent AHIMA at meetings of the ICD-10 Coordination and Maintenance Committee, Editorial Advisory Boards of *Coding Clinic for ICD-10-CM/PCS* and *Coding Clinic for HCPCS*, and the CPT Editorial Panel. In addition, I serve as the secretariat for the World Health Organization's ICD-11 morbidity topical advisory group that focuses on ensuring ICD-11 meets morbidity reporting needs.

Before joining AHIMA in 1995, you served as the director of utilization and data quality at St. Mary's Hospital in Centralia, IL. How did that experience inform your work today?

I saw first-hand what it was like to work "in the trenches," including the daily challenges facing coders and physicians. This helped provide me with valuable industry perspective so I could advocate for coding policies that would ensure compliance and consistency while also reducing opportunities for unintentional or intentional coding errors.

How do you think ICD-10 will shape healthcare in the United States?

I believe the transition to ICD-10 will be transformational for US healthcare. Having much better data about the healthcare we deliver, including the costs and outcomes, will advance new models of care delivery and reimbursement and lead to significant improvements in quality of care.

How do you think ICD-10 will shape the HIM profession?

In the short-term, HIM professionals will play a major role in the analysis of longitudinal data that crosses the transition date. HIM will also be involved in analyzing the impact of ICD-10 on reimbursement, reporting requirements, and internal processes. Skill sets in data mining and data analytics will be in high demand.

What are some of the regulatory initiatives that could have the biggest impact on HIM going forward?

Health IT initiatives will certainly continue to have a strong influence on HIM. Improving the effectiveness of EHRs (i.e., reducing administrative burdens and barriers to use, managing risks, and enhancing safety) will be a major focus. Other trends that will likely lead to new public policy issues or challenges include new value-based payment models, growth in telemedicine, and expanded use of mobile devices to capture medical data.

What is the biggest challenge that the Advocacy and Public Policy Team will face over the next few years?

Trying to stay abreast of—and influence—all of the legislative, regulatory, and other policy initiatives that impact the management of health information. Thoughtful strategy development, prioritization, and a balanced approach will be necessary to ensure that we use our limited resources in areas where we can achieve the greatest impact.

Pamela L. Lane, MS, RHIA, CPHIMS, HIMSS, vice president, government relations

Q: Why did you join the Advocacy and Public Policy team?

Lane: I have been in the HIM field since the mid-'80s and have always passionately believed that the work in which we engage is the foundation for better care for patients.

What are your primary areas of responsibility as AHIMA's vice president of government relations?

I coordinate AHIMA's efforts in developing policy priorities and partnerships with governmental agencies and other health associations with common interests. It's a big, exciting job!

Before joining AHIMA in 2015, you served as deputy secretary of health information at the California Health and Human Services Agency. Tell us about your role there.

I was initially responsible for coordinating resources, including the $38.8 million ARRA grant, to expand health information exchange across California. I also served as the statewide HIT coordinator for all federal efforts, working with Office of the National Coordinator, CMS, and others to focus on the availability of electronic patient data across California.

In 2013, you received the AHIMA Leadership Triumph Award for your work in helping California create a statewide HIE. What was the most significant lesson you learned during that process?

Don't assume everyone 'gets it.' The idea of secure electronic movement of patient data will not be embraced by everyone; however, the lengths to which others will go to prevent cooperation never ceases to amaze me. The biggest barrier is the fear of change—not the technology.

How will true interoperability affect the HIM profession?

It will enable us to be viewed as leaders within our organizations. We know the current medical record data better than anyone in the care environment. AHIMA's members need to embrace the challenge of learning new skill sets to analyze electronic data and turn it into information that is useful, relevant, and applicable to healthcare today and in the future.

What are some of the regulatory initiatives that you think could have the biggest impact on HIM going forward?

Value-based purchasing will have a huge impact. The innovations that are beginning to manifest in coordinated care and new quality reporting initiative pilots may require different documentation and record-keeping methods than we have previously seen. HIPAA will continue to evolve as the electronic data environment expands. HIM professionals will need to be more engaged in data efforts than ever before.

What is the biggest challenge that the Advocacy and Public Policy Team will face over the next few years?

The world of policy and government relations is becoming increasingly more complex and faster paced. Managing our resources, including the time and bandwidth of each staff person, is challenging. As an example, once ICD-10 goes live, the challenge will shift toward helping others, including our federal government partners, understand the newly-formatted data and how it can be used.

Margarita L. Valdez, director of congressional relations

Q: Why did you join the Advocacy and Public Policy Team?

Valdez: I wanted to use my experience working on Capitol Hill to assist HIM professionals in learning best practices for advocacy.

You have more than a decade of experience working in politics, including working as communications director for a member of congress. How did you become interested in healthcare advocacy work in general?

I worked as a legislative assistant for Chairman Mike J. Rogers, who serves on the health subcommittee for the Committee on Energy and Commerce.

What is most difficult about your job and advocating on behalf of HIM?

Educating members of congress and their staff about the role of the HIM professional and why this profession is such a critical part of the healthcare ecosystem.

What are your primary areas of responsibilities as AHIMA's director of congressional relations?

Since the fall of 2011, I have represented AHIMA in the US House of Representatives and Senate, tracked legislation, attended hearings, trained members on advocacy, and more. I also coordinate advocacy events on behalf of the association, organize briefings for congressional staff, and meet frequently with members of congress.

What is the biggest challenge that the Advocacy and Public Policy Team will face over the next few years?

The team is very focused on ICD-10 right now; however, patient identifiers and RAC audits continue to challenge HIM professionals.

Anne Zender, MA, senior director, periodicals

Q: Why did you join the Advocacy and Public Policy team?

Zender: Part of our mission is to keep members informed about breaking news that will affect their work. Being part of the advocacy team helps us hear about the news early and get additional insight into what it means for the members.

What should AHIMA members know about this team and the important work you're doing?

I think members would be surprised at the amount of work that goes on behind the scenes to craft public policy, regulations, and so forth. The advocacy team's efforts are directly plugged in to that work.

What are your primary areas of responsibility as AHIMA's senior director of communications?

I supervise AHIMA's periodicals including the *Journal*, e-newsletters, and scholarly journals as well as its public relations efforts.

You've worked at AHIMA in some type of editorial capacity since 1995. From your perspective, what have been some of the most significant transitions that have occurred within the industry?

HIPAA was a significant change that really put privacy and security of health information in the spotlight. We saw that continue with the implementation of the ARRA privacy rules several years later, as well as meaningful use. AHIMA has had a voice in many of the transitions, including its early advocacy for e-HIM as well as adoption of ICD-10.

What are some of the regulatory initiatives that you think could have the biggest impact on HIM going forward?

Interoperability and the adoption of standards is becoming more of a priority. This will be an interesting process to watch, and HIM professionals will definitely need to be well-versed on the issue. Whatever happens, AHIMA publications will be reporting on it!

What is the biggest challenge that the Advocacy and Public Policy Team will face over the next few years?

One big challenge is to reach an increasingly distracted and fractured audience using an ever- increasing array of media and tools, including social media. How do we get people's attention on an issue and get them to act? It's a challenge in many fields.

The AHIMA Advocacy and Public Policy Team (advocacyandpolicy@ahima.org) is based in Washington, DC.

Article citation:
AHIMA Advocacy and Policy Team. "Get to Know AHIMA's Advocacy and Public Policy Team"
Journal of AHIMA 86, no.9 (September 2015): extended online version.

Driving the Power of Knowledge