

Greater Urgency, Sharper Focus for PHRs

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by Linda Kloss, RHIA, CAE, chief executive officer

Through its request for information, the Centers for Medicare and Medicaid Services (CMS) showed that it was exploring how its extensive claims and benefits data could be of value to Medicare and Medicaid beneficiaries and how, as the single largest healthcare purchaser in the US, it could help drive personal health record (PHR) adoption.

AHIMA responded to the request on its own and as part of a collaborative response coordinated by the Markle Foundation. We shared the valuable work from AHIMA's e-HIM® work group on PHRs and information about our consumer education program, a grass-roots effort to educate people on the value of personal health information.

The collaborative recommendations suggested that CMS raise PHR awareness by encouraging standards and stimulating the private PHR marketplace. It envisioned CMS as a data supplier in a distributed information environment. AHIMA's response also encouraged CMS to focus initially on medication management.

Sadly and ironically, at the exact moment when CMS was collecting information on its role in PHRs, Hurricane Katrina struck, and caregivers all over the country were seeing patients with absolutely no medical record information to aid them. The need for a distributed information environment with at least a medication history for all citizens, particularly the chronically ill, became urgently clear. There can be no doubt that the health information crisis of Katrina will drive and shape federal policy in the years to come.

HIM and the PHR

In this issue we explore the current state of PHRs, and while mainstream use is still some time off, critical groundwork must be laid now. As you will learn from our authors, HIM has an important role in PHR design and dissemination.

In "But What Does the Public Think?" John Morrissey shares findings from the National Alliance for Health Information Technology on understanding the value of PHRs for consumers. We learn that even relatively well-informed consumers do not understand much about the role of medical records in patient care—paper or electronic—or the benefits of PHRs. Through Mark Hagland's article, "Patient to Partner: Will PHRs Change the Physician-Patient Relationship?" we meet physicians who are at the forefront of electronic health records and PHRs.

Robert Campbell introduces us to the growing field of consumer health informatics, a branch of medical informatics that integrates consumer preferences into health information systems. In "Getting to the Good Information" Campbell describes the valuable wealth of healthcare information now available to consumers and its links to PHRs. He examines the role of the HIM professional in working with consumers, providers, and vendors to deploy and use PHRs. In "Health Records for the People" Julie Wolter and Beth Friedman describe today's models for PHRs and the types of products now available.

The Best of All Use Cases

The need for interoperable electronic health records and PHRs was well articulated before the devastation of Hurricane Katrina. Their lifesaving value and the imperative to press forward wisely but quickly was brought home full force after the hurricane. Let's all become knowledgeable advocates for PHRs by maintaining them ourselves and encouraging family members to do the same. We also need to explain their importance to all we come in contact with. The resources on www.myPHR.com are available to help you.

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Driving the Power of Knowledge

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