Major Healthcare Issues Intensify in 2003: Infrastructure, Coding, Privacy, Work Force Remain Top Priorities

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by Dan Rode, MBA, FHFMA

Many of last year's most important healthcare issues have carried over into 2003. This article will focus on this year's chief legislative and federal administrative issues, including infrastructure, privacy and security, and work force and education.

Building an Information Infrastructure

The year started with considerable attention given to the need for a national health information infrastructure (NHII). AHIMA is working closely with the eHealth Initiative and the Markle Foundation's Connecting for Health project. The Department of Health and Human Services (HHS) also met at the end of 2002 to discuss the benefits of an NHII. Additionally, the NHII subcommittee of the National Committee on Vital and Health Statistics (NCVHS) is addressing some of the technical aspects of an information infrastructure.

The HHS secretary's new Council on Public Health Preparedness also met to discuss what information was needed and how it would be communicated to enable state and national public health structures to identify outbreaks of public health problems, whether natural or deliberate (such as bioterrorism). AHIMA addressed this group and pointed out that its discussions were similar to those concerned with an NHII.

AHIMA also discussed the need to address problems surrounding the use of ICD-9-CM when trying to share information with other countries in the pursuit of solutions in public health. Finally, AHIMA noted that HIM professionals are often the source of health information from the provider and need to be included in the local discussion of transferring health data from the provider to the public health system.

NHII is not only an HHS topic. Members of Congress are already considering legislation that AHIMA argues should be part of the exchange within an NHII. Medical errors, bioterrorism, public health, Medicare data for reimbursement, quality of care, and continuity of care are all items of congressional concern. AHIMA has met with congressional staff and is working to ensure Congress sees solutions that are feasible and could be funded for success.

Work on NHII resides not only with the federal government, but also with projects under way in the private sector. All these activities set the stage for the future of healthcare information and data exchange.

What's in Store for ICD-10-CM?

The debate surrounding the use of ICD-9-CM and potential use of ICD-10-CM for inpatient facility procedure coding remains active. The NCVHS Subcommittee on Standards and Security ended 2002 by initiating a study to determine the cost benefits and business cases for conversion to the new coding system. This study will take place through April, with a report presented to the subcommittee in May. Several healthcare payers have raised the cost issue, while others have noted the problems related to using a 22-year-old system that is not equivalent to systems being used in other countries. AHIMA continues to urge congressional staff to adopt ICD-10 coding systems both to strengthen an NHII and to address continued inconsistencies of the Centers for Medicare & Medicaid Services' (CMS) uses of duplicative codes.

AHIMA will be calling on volunteers to obtain the answers needed for the study and for eventual implementation of the new coding system. It is crucial that all HIM professionals, whether or not they are directly involved in coding, become familiar with this issue.

CMS invited AHIMA to work on a project with the American Hospital Association to develop recommendations for evaluation and management coding definitions and guidelines that could be used in the Medicare reimbursement system and by other payers. The project should be completed by the end of May to meet the Medicare regulation publishing requirements. If accepted by Medicare, these definitions and guidelines would be implemented in 2004.

Privacy and Security of Health Information

Privacy and security of health information remain top priorities. At the beginning of the year, AHIMA contacted the secretaries of HHS and the Department of Defense to raise issues concerning health information security and the need for HHS to release the HIPAA security rules, which had not been issued at press time.

AHIMA has also been closely working with staff from NCVHS and the Office for Civil Rights to assist in the smooth implementation of the HIPAA privacy rule in April. The Association is also working with consumer and other public groups regarding the effect of the privacy rule on individuals and parties outside of healthcare providers.

Work Force and the Future of HIM

As reported previously, the 107th Congress adjourned without finalizing a federal budget for 2003. Included in the 2003 budget was Title VII funding for education, which would include money for schools and scholarships, including HIM students and programs.

AHIMA is working closely with the Allied Health Roundtable, a coalition of allied health professional associations, to ensure that not only education is covered in 2003, but also that funding is expanded for Title VII education in 2004 and beyond to address work force shortages. As data emerges from AHIMA's work force study, we will be taking this information to policy makers. The future of the NHII and HIM functions in healthcare depends on it.

Healthcare education is not only a federal issue, it is a state issue as well. HIM professionals need to stay in contact with their local schools and programs and raise the call to state legislatures about the need to maintain and expand funding for HIM education. The economy is tight and funds are limited, but educating the HIM professionals of tomorrow requires strong, forward-thinking programs. Good students will be attracted to the profession and aided by scholarships and grants.

Make sure you stay current and involved throughout 2003. In the meantime, take advantage of AHIMA's Capitol Hill Day event on April 10, 2003 (above). It is a great opportunity to become part of AHIMA's advocacy efforts and connect with your members of Congress about the issues above.

Final Security Rule, Transactions Modifications Published

As this issue went to press, the Department of Health and Human Services (HHS) announced that it would release the final regulations of the HIPAA security rule in the February 20, 2003, *Federal Register*. Most covered entities will have until April 2005 to comply with the standards, though small health plans will have an extra year. The same issue of the *Federal Register* was also scheduled to include modifications to the HIPAA transaction and code set standards. Visit AHIMA's Web site at www.ahima.org/dc for a complete interpretation of the security and transactions rules.

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