# On the Horizon: a National Healthcare Information Infrastructure

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by Dan Rode, MBA, FHFMA

The concept of a healthcare information infrastructure, like some of the technology it represents, has moved quickly into the spotlight this year. While no one predicts that it will be completed before the end of the year, HIM professionals should realize that the discussion on this concept, its outcome, and the time it will take will influence the future of HIM, information technology, the work force, and the delivery of healthcare. This article will look at AHIMA's recently approved statement on the need for a national healthcare information infrastructure and the effect such an infrastructure will have on the future of HIM.

## **Understanding the Infrastructure**

Thus far, there is no consensus on the definition of a healthcare information infrastructure. For some, an infrastructure only relates to healthcare information on the Internet. For others, it is any health data, records, or information that is electronic. Some might suggest that the infrastructure is a national version of the electronic health record (EHR) or that it is the process by which information is transmitted, stored, and accessed within a structure.

Some may claim that it is only the electronic message, transaction, or data, while others would say that it is all that and the management and control of the data as well. For now, we will have to say that it is all of the above, plus, from an HIM perspective, data and information standards, codes, security, privacy, and management of the data, records, information, transmissions, access, and release. The definition must also include the integrity of the data and the ethics of its management and stewardship—key concerns to HIM professionals.

#### The Association's Position

AHIMA's recently approved statement on a national healthcare information infrastructure points out that such an infrastructure should:

- advance electronic capture, access, use, exchange, and storage of quality healthcare data
- promulgate comprehensive, uniform standards for transmission, content, and terminologies used
- provide uniform and comprehensive privacy protection to all patient identifiable information
- support innovation in the advancement of information technology used in healthcare

The infrastructure should move HIM toward an EHR. That's not a new goal for the HIM profession, but the infrastructure will have to promote and achieve that goal with uniform national standards.

AHIMA argues that the US healthcare industry must establish a properly funded and maintained national healthcare information infrastructure. Further, the federal government should fund an ongoing leadership body that can oversee the infrastructure and meet the suggested goals.

### HIPAA's Influence

Currently, HIPAA's administrative simplification provisions are as close as the healthcare industry comes to establishing such an infrastructure. By statute, this law allows for the secretary of Health and Human Services (HHS) and the National Committee on Vital and Health Statistics (NCVHS) to have some authority over the data content and transactions initiated by HIPAA. HIPAA also provides for the secretary to expand HIPAA standards to include clinical data and transactions.

When we consider the concept of an infrastructure, however, the HIPAA legislation leaves many holes. First, HIPAA was never funded; the secretary was never given money by Congress to develop, implement, and maintain the HIPAA rules, regulations, and processes. Last year, when Congress relaxed the deadlines for transactions and code set adoption, the bill included a call for Congress to fund the HIPAA program, but such funds were never appropriated by the Congress, so essentially the secretary has had to give the Centers for Medicare & Medicaid Services (CMS) HIPAA management duties.

AHIMA and its partners in the Coalition for Health Information Policy (CHIP) have been working to ensure that for fiscal year 2003, Congress remembers to fund HIPAA. However, in supporting an information infrastructure, AHIMA is going beyond just the principle of funding. The Association is calling on Congress and the secretary to consider an office or agency that would oversee this infrastructure as its principal responsibility in a manner that is independent of it being a healthcare plan, payer, or user. AHIMA has supported NCVHS' call for an entity within HHS that could oversee the national healthcare information infrastructure, the HIPAA requirements and the transactions standards that it entails, medical coding standards, and privacy protection. All of these are important for the system to be used and trusted by healthcare providers, payers, and, most importantly, patients.

A stand-alone agency represents the independence, consistency, and uniformity that AHIMA has sought for coding and now infrastructure, including HIPAA. In recent months AHIMA has also suggested that the National Center for Health Statistics (NCHS) should oversee all coding standards and administer coding controlled by the federal government such as ICD-9-CM—all volumes—and the Healthcare Common Procedure Coding System (HCPCS). AHIMA has also suggested that standards adaptation and maintenance be open public processes.

#### Infrastructure on the Horizon

There are other signs of movement towards an infrastructure. At press time, NCVHS was working to ensure that the US adopts ICD-10-CM by October 2005. ICD-10-CM is a major cornerstone of a national healthcare infrastructure, because it will give us the coded data and process to meet the uniform diagnostic needs we have often discussed and hoped for.

Two other major undertakings include the eHealth Initiatives group, developed to create awareness for the role of IT in healthcare (AHIMA is a member), and the Markle Foundation's project, "Connecting for Health...a Public-Private Collaborative." The purposes of these initiatives are:

- accelerating the rate of adoption of national clinical data standards throughout the nation's healthcare system to facilitate true interoperability (requiring standards and more)
- identifying practical strategies and solutions for developing an interconnected electronic infrastructure that will ensure
  the secure and private transmission of medical information and support the continuity of personal health information
  across plans and providers
- working to understand what consumers will need and expect from an interconnected health information system and identify key steps for meeting their needs

The newly formed National Alliance for Health Information Technology (NAHIT) has begun efforts to push for the adoption and implementation of standards-based information systems for safer and more effective patient care. One of NAHIT's first efforts was to address bar code standards for use with pharmaceuticals and supplies. Other areas that NAHIT is considering include connectivity and network communications technology, automated order entry and medication administration, electronic medical record and universal identifiers, and standard nomenclature and a data dictionary.

#### Time Will Tell

These efforts will take time. However, the call for support, standards, and action is loud and clear. AHIMA's statement on the need for a national healthcare information infrastructure carries a view of what the infrastructure will look like when it is achieved. Because a timetable for the infrastructure is unknown, we must be prepared to function in this changing environment —now.

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