Planning Healthcare's Future: Three Recent Reports Outline Major Federal Initiatives

Save to myBoK

By Dan Rode, MBA, CHPS, FHFMA

Three federal reports released as March ended and April began will dictate the trajectory of HIM and health IT initiatives over the next several years and possibly through the end of the decade. HIM professionals should review the reports, as they will have a major impact on the healthcare industry's future.

HHS Quality Improvement Strategy

The secretary of Health and Human Services (HHS) released a report to Congress outlining the priorities guiding the national quality strategy and setting the strategic plan for how it will be achieved.

Within the report, titled "National Strategy for Quality Improvement in Health Care," HHS describes three broad aims it will pursue designed to "guide and assess local, state, and national efforts to improve the quality of health care":

- Improving the overall quality of care by making healthcare more patient-centered, reliable, accessible, and safe
- Improving the health of the US population by supporting proven interventions to address behavior, social, and environmental determinants of health
- Reducing the cost of quality healthcare for individuals, families, employers, and the government

These themes appear in other federal healthcare endeavors currently under way, including the meaningful use program and ICD-10-CM/PCS. It is good to see the various HHS branches moving toward one set of goals.

HHS names few priorities in the report, recognizing that other factors in healthcare will affect its strategy. The Affordable Care Act mandates HHS release a report each year, which will allow HHS to add more priorities in future years.

HHS will initially focus on six priorities:

- Making care safer by reducing harm caused in the delivery of care
- Ensuring that individuals and families are engaged as partners in their healthcare
- Promoting effective communication and coordination of care
- Promoting the most effective prevention and treatment practices for the leading causes of mortality, starting with cardiovascular disease
- Working with communities to promote wide use of best practices to enable healthy living
- Making quality care more affordable for individuals, families, employers, and governments by developing and spreading new healthcare delivery models

The report provides examples of how HHS plans to move forward on these priorities. The full report is available at www.healthcare.gov/center/reports/quality03212011a.html#es.

HHS is expected to pass some of the follow-up on this report to the National Priorities Partnership, an organization AHIMA supports in its effort to ensure uniform quality measures that allow for secondary data uses. Expect to see more on HHS's quality improvement strategy over the next year.

CMS's ACO Proposed Rule

Soon after HHS's report appeared, the Centers for Medicare and Medicaid Services released a notice of proposed rulemaking on its accountable care organization (ACO) program. The Affordable Care Act mandated the ACO program, which is

targeted to begin in January 2012.

The program has received a great deal of attention from federal agencies, including the Federal Trade Commission, the Internal Revenue Service, and the Department of Justice. The Federal Trade Commission and Department of Justice are concerned about antitrust issues, while the Internal Revenue Service is worried about the tax-exempt status of ACOs. All three agencies released requests for comments.

AHIMA has gathered a large group of member volunteers and staff to comment on the proposal. The group will address a variety of data integrity issues related to the program, such as health information collection, storage, transmission, use, and measures. Comments, due early this month, will be posted to AHIMA's Advocacy and Public Policy Center at www.ahima.org/advocacy.

Other issues that must be addressed include the program's overlap with the meaningful use program and HHS's strategy to improve healthcare quality and how to ensure the confidentiality and security of the information being shared. Relationships between healthcare providers or health plans in an ACO may help resolve the privacy and security issues. The program's legal arrangements will help outline each participant's responsibilities.

Further analysis is also required to determine if the incentives under the program are enough to warrant the significant investment needed to develop and manage such a system.

ONC's Federal Health IT Plan

The Office of the National Coordinator for Health IT (ONC) also was active, releasing a draft of its strategic plan, titled "Federal Health Information Technology Strategic Plan, 2011–2015." ARRA-HITECH mandated the plan, which replaces the one issued by the Bush administration in 2008. Comments were due in late April.

ONC reiterates its vision of "a health system that uses information to empower individuals and to improve the health of the population" in the plan, as well as its mission to "improve health and health care for all Americans through the use of information and technology."

ONC notes that in developing and executing the federal health IT strategy, the government strives to:

- Put individuals and their interests first
- Be a worthy steward of the country's money and trust
- Support health IT benefits for all
- Focus on outcomes
- Build boldly on what works
- Encourage innovation

ONC lists five initial goals and 52 strategies, some of which are already under way as part of the meaningful use program and other ARRA-HITECH initiatives. The five goals are to:

Achieve adoption and information exchange through meaningful use of health IT, which includes the acceleration of electronic health records (EHRs); facilitation of information exchange to support meaningful use of EHRs; and support of health IT adoption and information exchanges for public health and populations with unique needs.

Improve care and population health and reduce healthcare costs through the use of health IT, which includes support of more sophisticated uses of EHRs and other health IT to improve health system performance; better managed care, efficiency, and population health through EHR-generated reporting measures; demonstrated health IT-enabled reform of payment structure, clinical practices, and population health management; and support of new approaches to the use of health IT in research, public and population health, and national health security.

Inspire confidence and trust in health IT, which includes protecting confidentiality, integrity, and availability of health information; informing individuals of their rights and increasing transparency regarding the uses of protected health information; and improving the safety and effectiveness of health IT.

Empower individuals to improve their health and the healthcare system through health IT, which includes engaging individuals with health IT; accelerating individual and caregiver access to their electronic health information in a format they can use and reuse; and integrating patient-generated health information and consumer health IT with clinical applications to support patient-centered care.

Achieve rapid learning and technological advancement, which includes leading the creation of a learning health system to support quality, research, and public and population health and broadening the capacity of health IT through innovation and research.

AHIMA will provide comments on ONC's strategic plan. As its title suggests, the plan falls short of a nationwide healthcare industry plan for information management and technology. It also must be integrated into other HHS initiatives that directly affect its success. For instance, the plan includes a brief mention of the ICD-10-CM/PCS transition and its potential administrative cost savings but fails to note how ICD-10-CM/PCS and various other terminologies can help achieve a number of the strategies covered in the plan.

The full report is available at http://healthit.hhs.gov under "Outreach, Events, & Resources." See "Federal Health IT Strategic Plan."

There are common themes in all three of these initiatives, and AHIMA expects more to come in the not-too-distant future, including a patient safety program and an Institute of Medicine report. Each initiative requires quality health information and information management skills, which HIM professionals can provide.

HIM professionals should review each initiative, comment on them, and help lead the changes that are occurring around us. While the ACO and IT plans are not final, organizations will need to factor them into organizational thinking and strategic plans.

Dan Rode (dan.rode@ahima.org) is AHIMA's vice president of policy and government relations.

Article citation:
Rode, Dan. "Planning Healthcare's Future: Three Recent Reports Outline Major Federal Initiatives" *Journal of AHIMA* 82, no.5 (May 2011): 16-18.

Driving the Power of Knowledge