# Taking HIM Issues to the Hill: Members Advocate During Hill Day

Save to myBoK

by Dan Rode, FHFMA

By all accounts, AHIMA's 2005 Capitol Hill Day was a success. Members came away from their meetings with representatives and staff having conveyed AHIMA's messages on current legislation and explained our advocacy efforts. They covered the following four topics in their meetings.

**Work Force:** Advocates addressed work force needs by encouraging their delegation to cosponsor and support the Allied Health Professions Reinvestment Act (HR 215) in the House and the accompanying Senate legislation, the Allied Health Reinvestment Act (S 473). They explained that the number of HIM professionals is predicted to shrink in the next decade although the need for them will increase due to growing e-health demands. The allied health bills would help HIM academic programs attract and train students to fill these future positions. Many of our AHIMA advocates reported interest on the part of their delegations, and we look forward to seeing more cosponsors as a result of their efforts.

**Privacy, Confidentiality, and Security:** Members thanked senators for their recent unanimous passage of the Genetic Information Nondiscrimination Act (S 306). Meanwhile, on the House side, members encouraged their representatives to support similar legislation and overcome the barriers that have kept the House from passing such legislation in previous years. Our advocates pointed out consumer concern for protecting personal health information (especially genetic information) against discrimination by employers, insurers, and others.

AHIMA advocates also noted that while the public appears to support the move to electronic health records and health information exchange, it may withdraw its support if discrimination concerns are not resolved. For some House members and staff, these were the first conversations they had with knowledgeable individuals who could describe how genetic nondiscrimination could affect the development of health information technology networks. The passage of such legislation could determine whether individuals forego necessary health services for fear their information is not protected.

ICD-10 Adoption: Several members reported that representatives or their staff initiated discussions on the need to replace ICD-9-CM. AHIMA members pointed out the problems that exist as a result of the ICD-9-CM system's limitations and the impact of not being able to code information to the degree necessary. Such discussions in many cases dealt with the need to describe new technology—an interest to many members of Congress. But advocates also pointed out the need for consistency of all healthcare data and identified situations where providers are forced to change codes to meet the requirements of a particular third party, including Medicare and Medicaid.

**NHIN:** Finally members discussed the issue of a national health information network (NHIN) and electronic health records. These conversations varied since some component state associations are already involved in local information network projects while others are not. When asked about the role of electronic health records, attendees noted the profession's desire to ensure accurate, uniform data available for clinical care, public health, quality reporting, safety, and other issues of concern to Congress.

#### And Next Year?

Most members who participated in 2005 Hill Day indicated a desire to do so again and urged AHIMA to consider Capitol Hill Day 2006. The association is looking into such a plan. Several members also indicated a desire to hold their own Hill Days with their state legislature, and plans for such meetings were being formulated even as members were leaving Washington, DC. AHIMA's Advocacy Assistant (www.ahima.org/dc/aa) contains considerable information to support group and individual visits to state legislatures and Congress.

## **Advocating for HIM**

While there is nothing like a personal visit, you, too, can voice your support for legislation needed by the HIM profession and the healthcare industry by sending a letter. Currently letters are available on the Advocacy Assistant to thank your senators for supporting genetic nondiscrimination and to ask your representative to support similar legislation in the House. Likewise there are letters for both representatives and senators to support allied health recruitment, development, and education.

Sending Advocacy Assistant letters is simple, and the form letters can be modified to allow you to make them more personal and provide your representative with local information. If your time is limited, send the letter that has been written for you. If you are not sure what district you live or work in, the Advocacy Assistant can provide you with this information.

In April I had the pleasure of hearing Illinois Representative Janice Schakowsky (D-9th) address the Illinois Health Information Management Association. Schakowsky urged ILHIMA members to get in touch with their representatives. She stated that even one letter is important. At a minimum, it puts Congress members on alert to watch for more on the subject. Fifteen letters really send a message, she said. More letters convey a stronger signal. Can you be one of the 15?

Schakowsky said she finds greater value in personalized, individual letters rather than letters from a mass-mailing campaign. She explained that she often reads such letters in her time speaking to the House of Representatives, using the letter to describe what really is happening. But, she noted, she would rather have a form letter than no letter at all.

I challenge you to join with your fellow HIM professionals who came to Washington and contact your legislators regarding these same HIM issues. You will find additional information on these issues in the AHIMA Communities of Practice and on the policy and government relations pages at www.ahima.org. Think of the attention 50,000 letters can command.

#### Thank You

AHIMA thanks all members who took time to participate in the second annual Privacy and Security Survey. The survey results were released on April 11 in conjunction with AHIMA's National Health Information Privacy and Security Week and received considerable attention from the press and policy makers. If you have not seen the results of this most recent survey, a copy has been placed online in the FORE Library: HIM Body of Knowledge at <a href="www.ahima.org">www.ahima.org</a>. Success breeds more success, and planning for a 2006 survey is moving forward. So if you didn't participate this year, we hope you can participate in the future.

## The Hill Day Experience

Wearing red, white, and blue buttons proclaiming themselves "e-HIM<sup>TM</sup> Advocates," 79 AHIMA members spread across Washington, DC's Capitol Hill on a fine March day. In just eight hours the members made more than 130 visits to members of their state delegations in the US Senate and House of Representatives. At the end of the day most members attended a debriefing reception sponsored by Siemens Healthcare, which was also attended by representatives of several of AHIMA's alliances.

Most AHIMA members were able to schedule their Capitol Hill visits in the company of at least one other advocate; some traveled in groups. Members carried a folder of information to assist their advocacy efforts as well as materials to leave with each member of Congress providing AHIMA's positions, issues, and contact information for the advocate, their component state association, and AHIMA's Washington office. Advocates also had access to this material before Hill Day through the AHIMA Community of Practice, where resources were posted for a pre-Washington briefing. A talking points sheet provided members with an outline for each meeting, though many reported having a free-flowing conversation with congressmen or staff on HIM issues.

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