Taking Stock of Advocacy Efforts: Tracking the Twists and Turns in Washington

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by Dan Rode, MBA, FHFMA

The rapidly evolving healthcare environment continues to offer twists and turns in AHIMA's pursuit of "quality healthcare through quality information." Our advocacy efforts help keep that goal in sight. This article offers an overview of our progress so far this year.

Improving Health Data Quality

The push to improve the quality of healthcare data has taken several paths this year. As the industry has focused on quality measurement data, AHIMA staff have spent considerable time on multiple efforts. These include the AQA alliance, the Agency for Healthcare Research and Quality (AHRQ), the National Committee on Vital and Health Statistics (NCVHS) quality work group and ad hoc work group on secondary data, and the American Health Information Community (AHIC) quality work group.

In May AHRQ issued a request for information on data stewardship on behalf of the AQA alliance. In response, AHIMA volunteers and staff produced a paper that addressed the need for an entity to coordinate the development of standards for the various data sets used to request secondary data, including quality measurement data.

AHIMA's response also addressed simplifying the administrative process for data providers, usually healthcare providers, to maintain the integrity of the primary record, whether it be paper, electronic, or a hybrid. AHRQ has yet to release a reaction to the responses.

AHIMA testified to the NCVHS quality work group in June with the Medical Group Management Association (MGMA). The testimony covered the 2006 quality measurement summit held by AHIMA and MGMA and included recommendations from that conference.

In August former AHIMA president Barbara Siegel, MS, RHIT, FAHIMA, testified to the NCVHS ad hoc work group on secondary data on how consents and authorizations are gathered and used with respect to secondary data release. She also addressed some of the variances in data release due to HIPAA and state requirements covering the nature of the release and to whom it was released.

Terminologies and Classifications

Following the release of the joint white paper "Healthcare Terminologies and Classifications: An Action Agenda for the United States," AHIMA and the American Medical Informatics Association (AMIA) began an educational campaign to promote the paper's recommendations to the Bush administration, Congress, and other healthcare associations.

The recommendations include establishment of a public-private entity to oversee the development and use of terminology and classification standards in the US. The paper also calls for a task force to establish the governance needed for such a task and principles under which the entity and standards developers should operate, including coordination with international standards such as SNOMED.

The push to replace ICD-9-CM with ICD-10-CM and ICD-10-PCS continued with Congress, the Bush administration, and groups such as NCVHS. While bills have been introduced in Congress, there has been little action on any health information-related legislation.

The Centers for Medicare and Medicaid Services has indicated that a proposal to replace ICD-9-CM will be forthcoming, but AHIMA and its allies continue to pursue any avenue to accelerate adoption, citing the need for more refined and accurate data for reimbursement, quality measurement, and public health and research purposes. The need to replace ICD-9-CM has also been highlighted in the association's response to several of the Medicare prospective payment system proposals.

HIM Work Force

As noted last month, AHIMA's work force efforts achieved some recognition with House passage of HR 1467 in June. We are still waiting on Senate action on this legislation.

Meanwhile, AHIMA and AMIA have addressed several key groups that are looking closely at the need for HIM and informatics education and training, including AHIC, the Office of the National Coordinator for Health Information Technology (ONC), the Health Resources and Services Administration and its Advisory Committee on Interdisciplinary, Community-Based Linkages, the Office of the Assistant Secretary for Planning and Evaluation, and Congress.

Several of AHIMA's component state associations have also taken up the call for HIM education in their state legislatures and with their state executives.

Health Information Exchange

Work continues at various levels on the issue of health information exchange (HIE). AHIMA continues to take part in the development of standards for electronic health records (EHRs) and personal health records, as well as the harmonization of standards under the Healthcare Information Technology Standard Panel and the certification of EHR products under the Certification Commission for Healthcare Information Technology.

AHIMA is a member of several collaboratives working on various aspects of HIE. Those interested in HIE in the long-term care community came together for a summit in June. Efforts in that community continue as the various groups involved make their needs and suggestions public. The effort to make administrative simplification a reality continues through the Healthcare Administrative Simplification Collaborative and has resulted in several projects addressing uniform credentialing and standard data gathering in admissions and registration.

AHIMA has also continued its efforts with the eHealth Initiative, which has been working on a blueprint for the implementation of a nationwide health information exchange with the National Alliance for Health Information Technology.

AHIMA and FORE's work as an ONC contractor on the state-level HIE project and as part of the RTI International fraud prevention program has also resulted in several recommendations to the government and industry.

While HIE-related bills in Congress have received considerable press, movement of such bills to potential laws has been slow. With a significant election year looming, passage of any of the larger health IT bills does not look promising. In the interim, AHIMA's efforts have turned to legislation that addresses portions of the HIE including bills addressing personal health records, increased use of the National Institute of Standards and Technology in the HIE process, and ICD-10.

In July Secretary of Health and Human Services Mike Leavitt and the Office for Civil Rights brought forth their recommendations for a replacement for AHIC in a white paper titled "American Health Information Community Successor." Leavitt sought one or more collaboratives to respond jointly to the paper's recommendations and propose a private entity successor.

Efforts to achieve consensus on a standard EHR and implement interoperative HIE are still under way. Other issues such as data stewardship, secondary data use, and standardized terminologies and classifications have not been addressed. This fall will see serious debate and hopefully some resolution to keep the momentum of these necessary projects going.

Confidentiality, Privacy, and Security

AHIMA past-president Jill Callahan Dennis, PhD, RHIA, continues to serve on the AHIC confidentiality, privacy, and security work group. The group is addressing the confidentiality needs required in the AHIC use cases and the need for privacy

protections where personal health information is exchanged or stored under the auspices of entities not covered by HIPAA.

Congress has initiated several bills and inquiries into privacy. In June AHIMA president Bryon Pickard, MBA, RHIA, addressed a subcommittee of the House Committee on Oversight and Government Reform on confidentiality protections needed in healthcare records and exchange.

AHIMA has also worked with the National Governors Association's State Alliance for e-Health information protection task force and the NCVHS privacy and confidentiality subcommittee.

While considerable activity exists, do not expect any legislation by the end of 2007.

In July RTI International and the Health Information Security and Privacy Collaboration published its final report. AHIMA and its members provided input to the project nationally and in various states and are now working to ensure HIM expertise is used to address and resolve the issues raised in the report. Recommendations should also be forthcoming from the National Governors Association on this issue.

Your participation in these projects and in all aspects of AHIMA's activities locally and nationally will lead us to success.

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Reports, White Papers, and Testimony Online

AHIMA comments and testimony, including those described in this article, are available on the AHIMA Web site.

The US Department of Health and Human Services maintains a portal to **federal health IT initiatives** at www.hhs.gov/healthit. Links there lead to the sites of the Office of the National Coordinator for Health Information Technology, the American Health Information Community, the Agency for Healthcare Research and Quality, and others.

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