Wanted: HIM Advocates. 2005 Brings Opportunities for AHIMA Members to Get Involved

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by Dan Rode, FHFMA

Last year saw important progress in modernizing the data needs of the healthcare industry. With a good start under way, much work is ahead in 2005. This year offers HIM professionals many opportunities to put their education, expertise, and time into fulfilling the promise at hand.

AHIMA's 2004 Accomplishments

In 2004 AHIMA's numbers grew to 50,000 members. Our convention, held in conjunction with the 14th congress of the International Federation of Health Records Organizations, highlighted advances in electronic health records (EHRs), vocabularies, terminologies, classifications, and a future that will be significantly different.

AHIMA's work force study highlighted the diversity of our profession, with HIM professionals working in almost 40 different sectors of the industry. Holding nearly 200 different job titles, HIM represents a vast number of career possibilities—and needs. Unfortunately, as evidenced in the findings, HIM is facing a shortage of individuals entering the profession and a significant need for more investment in HIM education.

In January 2004 President Bush drew attention to HIM with his call for EHRs for every American in 10 years. His challenge was strengthened with the appointment of a national health information technology coordinator, David Brailer. Brailer hit the ground running and produced a vision (in the "The Decade of Health Information Technology: Delivering Consumer-centric and Information-rich Health Care") and an invitation for the healthcare industry to actively participate in designing and fulfilling this vision. AHIMA was one of the first organizations invited to this table.

Help Wanted!

As with all strategic planning, we start with a vision and then meet the challenge with thought, resources, and work. So we are hanging out a "help wanted" sign.

What can you do? The following are just some of the tasks that need your attention in 2005.

ICD-10

ICD-10 adoption and implementation stalled in 2004. If our nation is to improve its healthcare data and information for clinical care, patient safety, and public health needs—and take a giant step forward for key healthcare data exchange and the EHR standard—then we must have a final rule to adopt ICD-10-CM and ICD-10-PCS in 2005. AHIMA will be championing this adoption, and your active support is requested. Substantial information is available in back issues of the journal and our new AHIMA Web page, www.ahima.org/icd10.

It is unfortunate that the US is the only major country that hasn't officially recognized the value of the improved data from ICD-10. Our vision of improved healthcare safety will erode if we cannot upgrade our information to a form that permits significant effectiveness and efficiency.

Work Force

It's simple: we need more educated, trained HIM professionals to manage healthcare information in the new environment of EHRs, regional health information organizations (RHIOs), and a national health information network. We must also address the fact that some of our colleagues are ready to retire. Our industry needs established professionals to move into leadership, academic, research, and HIM roles and functions that are only now being identified.

To meet the need we must increase HIM education programs and program capacities. Our industry needs experienced faculty who are paid well to educate the next generation of HIM professionals.

Our schools need funds to hire and train such faculty, as well as to integrate all the new and envisioned changes in HIM. The need for funds and support at the federal and state levels is increasing at a time when support for such an effort is decreasing. In addition, we must recruit students and assist them (with grants, scholarships, and other aid) to receive the education and training that will make them capable of joining the HIM ranks and lead the industry in its metamorphosis.

We'll be calling on you in 2005 to support work force efforts at both the state and national levels to gain funding for education and recruitment. We will be working to reintroduce an Allied Health Reinvestment Act, but we will need your active support to achieve these goals.

RHIOs

If regional data exchange programs are to succeed, we need HIM involvement and leadership. Such involvement is not only necessary for the profession, it is needed to ensure that when data begins to flow, it does so in a manner that meets the need for accuracy, integrity, confidentiality, and all other aspects of data exchange traditionally championed (and understood) by HIM professionals. If your component state association (CSA) is not involved, looking for, or initiating such an RHIO in your area, why not be the catalyst for such an effort?

According to the Office of the National Coordinator for Health Information Technology, most data exchange starts (and is needed) in local communities. HIM professionals have many of the skills required to help build a local infrastructure or exchange. They understand the challenges and barriers that must be overcome to achieve such a goal. At the same time, we know these efforts will also have an interstate component. Some regions cross state lines, and pre-emption questions will arise that might only be solved on a national basis. AHIMA and its CSAs must partner to overcome the barriers to RHIOs, ensure that privacy, confidentiality, and security requirements are met, and make sure the systems continue to maintain a patient-centric focus.

In this same light, AHIMA will continue to address the personal health record in 2005. HIM professionals have the background and experience to provide consumers and community groups with information that will help them become part of the construction crew that builds the new records and record systems. Tools to provide such a vision to the public will be available to CSAs shortly. This outreach will serve the public, giving them a glimpse of the role of HIM professionals—something that can build better communication and perhaps serve to support our work force efforts as well.

And That's Not All

We'll need to pay attention to other issues as well. For instance, if we are to succeed in building a trusted health information exchange, then we must address not only privacy pre-emption problems but also the potential for discrimination if personal health data is not protected. While 2004 saw the first prosecution of an individual who misused healthcare records, it also witnessed the inability of the US House of Representatives to pass a genetic nondiscrimination bill while the Senate waited with its passed bill in hand. This issue has failed several times now and cannot be allowed to fail again.

If our vision is to succeed, we must be ready to participate in efforts such as RHIOs and efforts at the state level to increase funds for HIM education programs. You'll also be asked to participate in campaigns to convince Congress, the Department of Health and Human Services secretary, and the White House of the need for legislation and regulation changes.

AHIMA's Advocacy Assistant is a wonderful tool, providing members with a quick, easy means to contact national policy makers on important matters. We will be asking you from time to time to use the Advocacy Assistant to support the profession as we deal with these issues. This tool also has components that will help you understand our advocacy process and the roles you can play. Visit the Advocacy Assistant at www.ahima.org/dc/aa and get familiar with these issues.

How can you stay abreast of all this change? One way is the journal you currently have in your hand. Another great tool for keeping up to date is AHIMA's weekly e-Alerts, which contain short summaries of items and issues important to the profession. If you are not receiving this wonderful electronic newsletter at home or work, you can sign up online at www.ahima.org.

Take It to the Hill

The association invites all HIM professionals to AHIMA's 2005 Hill Day in Washington, DC, on March 16. HIM professionals will be given a briefing and materials to distribute in visits to their Congressional representatives. A session of AHIMA's Winter Team Talks is scheduled to take place the following day, March 17. Information will be available shortly via e-Alert and the AHIMA Web site.

Last year was a very active year for AHIMA and its issues; 2005 promises to be just as busy. We will need your involvement and support to make this year one to remember in the annals of our professional history. We look forward to it.

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