

Washington in Springtime: An AHIC Successor, HIM Legislation, and HIE Issues Occupy the Current Agenda

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by Dan Rode, MBA, FHFMA

While keeping up on day-to-day issues like data consistency, evaluation and management facility codes, and coding issues, AHIMA also continues to take stock of the various activities in Washington, DC, focused on a universal electronic health record (EHR) and secure, confidential, interoperable health information exchange (HIE). This article discusses some of the current legislative and organizational HIM activities.

AHIC Successor

In February the secretary of Health and Human Services (HHS) and the Office of the National Coordinator for Health Information Technology (ONC) awarded a grant to LMI and the Brookings Institute to develop and establish a successor to the American Health Information Community (AHIC). After holding two public meetings, the “A-2” project is now under way with four work groups: governance, sustainability, membership, and transition.

The project leader is Mark McClellan, director of the Brookings Institute’s Engelberg Center for Health Care Reform and former administrator of the Centers for Medicare and Medicaid Services. McClellan notes that A-2 will take up most of the tasks of its AHIC predecessor. The new organization will not deal with issues associated with privacy requirements, since privacy is considered a government issue and not one for a public-private body.

Just how the entities established by ONC under AHIC will continue remains to be seen, but both the Healthcare Information Technology Standards Panel and the Certification Commission for Healthcare Information Technology have established themselves and, in CCHIT’s case, provided a self-sustaining model. The AHIC successor will also have to deal with other projects and organizations, including ONC, which currently exists under a presidential executive order. Codifying ONC is a goal that AHIMA has long sought and one that it will take to Hill Day on April 8.

Another group potentially affected by A-2 is an organization to coordinate and facilitate the US use of terminologies and classifications. AHIMA and the American Medical Informatics Association (AMIA) recommended the creation of such a group to the National Committee on Vital and Health Statistics (NCVHS) in February.

Based on their 2007 white paper, the associations suggested that funds be provided to study the requirements for such an organization. The organization would manage and maintain the US healthcare industry’s use of terminologies and classifications—the basis for interoperability—as well as involvement in the international healthcare community’s development of terminologies such as SNOMED and classifications such as ICD-11.

Other organizations that will need a relationship with the AHIC successor include private and government groups developing data standards for secondary data use such as quality measurement, public health, biosurveillance, and research. The HHS secretary and McClellan point out that the federal government must have a significant role in the new organization, and AHIMA’s CEO Linda Kloss has noted that states and state-related health information exchange organizations must have a role as well.

Clearly, the A-2 project is significant, and the time to establish this body is short. The first phase, development of the organization, is scheduled to be finalized by a public meeting on May 30.

HIM-Related Legislative Activity

Legislation developed in part by AHIMA and AMIA also remains under consideration by the second session of Congress this spring. Legislation dealing with the joint recommendations on terminologies and classification (HR 2406) has passed the House Science and Technology Committee but has yet to surface on the House floor. Meanwhile the House-passed bill directed toward HIM and health informatics education and training (HR 1467) is awaiting the Senate's consideration.

This is a busy year for members of Congress because it is an election year. The early winter primaries sent incumbent members out campaigning for either their own re-election or for one of the presidential candidates. It is expected that after the spring recess Congress will work to pass meaningful legislation before the summer recesses begin on Memorial Day.

Other Advocacy and e-Health Efforts

Other efforts continue as well. In March the National Governors Association's State e-Health Alliance reported its first set of recommendations to the nation's governors. The ONC-sponsored report relates to protection of health information, healthcare practices that should be considered for change to promote e-health, and information and data exchange efforts that could be considered by governors and legislatures.

Task force members also suggested approaches to educate consumers and policy makers on EHR and HIE issues and options before legislation and regulation are considered or adopted in the states. The report recommends that governors and legislators keep in mind the need for interoperability and harmonization of legislation among the states. The State e-Health Alliance's work will continue this spring and summer in two new task forces on privacy and HIE organizations.

In February ONC issued six new use cases to be considered for standards harmonization and certification. These include consultation and transfers of care; immunization and response management; patient-provider secure messaging (remote consulting); personalized healthcare (the use of genetic data in the EHR); public health case reporting; and remote monitoring. Expect to hear more on these use cases in the next few weeks.

The AHIC work groups also continue their tasks. With the A-2 transition expected to be complete by late fall, the work groups have limited time to complete their current projects, and many of the groups are concentrating on ensuring work on their issues continues after the first of the year. Given the makeup of the groups it may be up to some of the federal bodies such as the Agency for Healthcare Research and Quality to shepherd their projects and provide continuity.

At the beginning of the year ONC also provided a grant to the National Alliance for Health Information Technology to develop consensus around definitions related to efforts in EHR and HIE development. It has been clear in many arenas that consistency of terms is needed in order to provide better understanding. This is not an easy task, as different definitions have grown up in different settings over a period of time.

The confusion in definitions creates misunderstandings and hampers progress, and as states consider EHR and HIE legislation, the use of differing definitions could make for a difficult environment for any entity dealing with more than one state. Just how ONC, AHIC, and the HHS secretary will move forward with the definitions remains uncertain, but watch for more action once this work is released this month.

NCVHS has spent time this winter developing its own agenda on quality and secondary data use, privacy and confidentiality, and other issues related to standards and security. Final announcements on this work were expected in late March.

NCVHS will also experience significant turnover in membership as several long-time members, including its chairman, Simon Cohn, MD, complete their appointments. No announcement on new members has been made, but the current committee has been working with HHS staff to consider means to address 21st-century issues related to health information and data. The committee will be working on this agenda as it waits for a new administration to take office in January.

AHIMA Advocacy

It has been a busy winter and early spring, and while there will be no "A-ha!" moments in the quest for standard EHRs and HIEs in the near future, serious work, beyond even what is mentioned here, is taking place and includes active participation by AHIMA volunteers and staff. Certainly this is a pivotal year; and like it or not, politics plays a significant part in this quest.

AHIMA's Hill Day on April 8 provides members an opportunity to discuss the issues covered in this article as well as RAC audits and "never event" programs, which were discussed in this column last month (see "Two Challenges for Here and Now").

If you are unable to make it to this year's Hill Day, there will be other opportunities this spring and summer to meet with Congressional members and candidates and participate in calls for public input and comments on these activities. Watch for announcements for opportunities to participate in AHIMA's e-Alert, as well as other state and national publications.

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