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Managing Health Data for LGBTQ Patients Poses Unique Challenges

Miami Beach, Fla. – Sept. 24, 2018 – Collecting data about patients’ sexual orientation and gender identify (SO/GI) should be standard practice in all clinical settings to address health disparities and other challenges faced by LGBTQ patient populations, according to information presented today at the [American Health Information Management Association’s \(AHIMA\) 90th Annual Convention & Exhibit](#). New rules from the U.S. Department of Health and Human Services (HHS) require electronic health record (EHR) software certified for Meaningful Use to include SO/GI fields.

“We need the ability to add new fields and adjust workflows in our electronic systems to accommodate the needs of the LGBTQ population,” said Julie Dooling, MSHI, RHIA, CHDA, FAHIMA, director of HIM Practice Excellence at AHIMA. “But implementing these rules requires much more than adjustments to our EHRs. It requires ongoing training of staff, recognizing the needs of LGBTQ patients to feel accepted and supported by their healthcare providers and promoting non-discrimination practices throughout the healthcare system.

“We must first educate our staffs in the proper use and definition of SO/GI terminology,” Dooling continued. “We need to document how a patient self-identifies as lesbian, gay, transgender or queer, and we also need to record information that will increase patient trust and satisfaction.” According to Dooling, questions to address include:

- Does the patient prefer to be addressed by feminine, masculine or neutral pronouns?
- Is the person’s preferred name different from their legal name?
- What information is on the patient’s birth certificate, driver’s license and insurance policy?

Ongoing sensitivity training is recommended to confront biases in organizations and ensure that SO/GI data are collected and used without judgment and with respect for the patient. “The registration process is especially critical to this effort,” said Donna Retallack RHIT, HIM Manager, CAN Community Health. “Registrars need to be comfortable gathering data and inquiring about and being supportive of a patient’s sexual orientation and gender identity. This

enhances the patient-provider interaction and encourages patients to make regular use of needed care.”

Health information technology (HIT) professionals should also work closely with billing and admitting departments to understand how this information can impact reimbursement. For example, individuals who identify as transgender may still require medical services related to their sex at birth. A transgender man may still require an annual pap test; a transgender woman may need a prostate exam. “If insurers are confused about the gender identity of an individual, these claims may be denied. It’s a very complex issue,” said Jami Woebkenberg, MHIM, RHIA, CPHI, HIMS service center director at Banner Health in Phoenix.

AHIMA has issued a practice brief that offers guidelines and recommendations for implementing inclusive HIM practices for the LGBTQ community. “A focus on inclusiveness for all patient populations promotes patient engagement and helps to reduce health disparities and ensure health information can be found where and when it is needed,” said AHIMA CEO Wylecia Wiggs Harris, PhD, CAE.

Studies have identified a variety of health disparities in care of LGBTQ patients, including barriers to access, social stigma, discrimination and sometimes violations of patient rights. According to the National Alliance on Mental Illness, the LGBTQ population experiences a higher incidence of mental and physical disorders that require special attention, including anxiety, depression, substance abuse and sexually transmitted infections. LGBTQ youth are two to three times more likely to attempt suicide and more likely to be homeless. Transgender individuals have a high prevalence of HIV/STDs, victimization, mental health issues and suicide. They also are less likely to have health insurance than heterosexual or LGBTQ individuals.

This information was presented at AHIMA’s Convention during an expert panel discussion of “Data Collection for Sexual Orientation and Gender Identity in the EHR.” Other panel members included John Young, HIM consultant for the hospital division of Kindred Healthcare, Inc., Louisville KY; and Dustin Ginn, data quality lead supporting the Business Intelligence and Data Analytics departments at the University of Kentucky HealthCare, Lexington.

The panel discussion is one of several round table discussions addressing hot topics in HIM. For details on additional presentations on this topic and others, visit the [educational tracks page](#) of the AHIMA Convention & Exhibit website.

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