



Every year, the AHIMA Policy and Government Affairs team works to advance the AHIMA vision of transforming health and healthcare by connecting people, systems, and ideas.

Despite the continued challenges facing healthcare in 2022, AHIMA advocacy efforts created meaningful legislative and regulatory changes for the health information (HI) profession and the patients we serve. Read the report below for more details. #AHIMAadvocate

Strengthening Grassroots Engagement

Grassroots engagement by AHIMA members is critical to advancing the AHIMA Advocacy Agenda. The number of members engaged in advocacy and public policy activities grew in 2022. More than 3,500 health information professionals engaged in advocacy and public policy-related activities, a 30 percent increase over last year. Activities included helping develop regulatory comment letters, engaging with our advocacy training modules, attending the AHIMA Advocacy Summit, and sending letters to members of Congress.

AHIMA also launched its inaugural advocacy newsletter, the Health Information Advocate, in 2022. To receive the monthly newsletter, HI professionals can sign up in our grassroots <u>Action Center</u>. AHIMA also worked with members to update our <u>Congressional District Meeting Resource Guide</u>.

Virtual Advocacy Summit

In March 2022, AHIMA members participated in the second Virtual Advocacy Summit. Over the two-day Summit, attendees heard from federal policymakers about ongoing public policy efforts that impact the HI profession. AHIMA members also met with elected officials to advocate on issues that impact the profession. AHIMA members representing 47 states, including the District of Columbia, held more than 220 virtual meetings with members of Congress and congressional staff during the Summit. AHIMA visits influenced 12 members of Congress to support legislative asks that AHIMA endorsed.



AHIMA as a Policy Thought Leader

In 2022, AHIMA continued to engage as a thought leader in healthcare with the US Congress and Biden Administration to advance our priorities. This included meetings with key leaders in Congress as well as leadership at Office of the National Coordinator for Health Information Technology (ONC), the Centers for Medicare and Medicaid Services (CMS), the Office for Civil Rights (OCR), the Office of the Inspector General (OIG), the CMS Office of Minority Health (OMH), the National Committee on Vital Health Statistics (NCVHS), the Federal Trade Commission (FTC), International Trade Administration (ITA), US Trade and Development Agency (USTDA), and US Agency for International Development (USAID).

AHIMA continued to embrace three key areas in its policy work: (1) improving the patient health journey through access to information, privacy, and equity, (2) ensuring the quality and integrity of health information, and (3) advancing healthcare transformation.

Improving the Patient Journey through Access to Information, Privacy, and Equity

Improving Patient Access to Information

Protecting Patient Privacy

Responded to multi-agency request for information (RFI) regarding Advanced Explanation of Benefits (AEOB) and Good Faith Estimate

Developed <u>fact sheet</u> on OCR Bulletin on Requirements under HIPAA for Online Tracking Technologies

Fact sheet on provider role in protecting patient confidentiality, privacy, and security beyond HIPAA

Testified to National Committee on Vital Health Statistics (NCVHS), an advisory body to the US Department of Health and Human Services (HHS), on legislative developments in data privacy

Joined the <u>Confidentiality Coalition</u>, a coalition founded to advance effective patient confidentiality protections

Advancing Health Equity

Addressing Health Inequities

Developed <u>recommendations</u> to HHS on how to improve health equity in CMS programs

Provided <u>comments</u> to CMS RFI on advancing health equity under the Medicare Advantage Program

Social Determinants of Health

Provided <u>comments</u> in response to RFI regarding social determinants of health (SDOH) Z codes in the FY2023 Inpatient Prospective Payment Rule (IPPS)

Joined <u>The Gravity Project</u>, an initiative that develops consensus-based data standards to improve the use and sharing of SDOH

Supported <u>S 509/HR 6072</u>, the LINC to Address Social Needs Act

Supported <u>S 104/HR 379</u>, the Improving Social Determinants of Health Act



Ensuring the Quality and Integrity of Health Information

| Accurate, | Timely, and Complete |
|-----------|----------------------|
| | Information |

- Provided <u>comments</u> to CMS and the Centers for Disease Control and Prevention (CDC) on ICD-10-CM and ICD-10-PCS code proposals
- Provided <u>comments</u> to CMS regarding the CY 2023 Outpatient Prospective Payment System Rule (OPPS)
- Provided <u>comments</u> regarding the CMS CY 2023 Home Health Prospective Payment System Rate Update.
- Provided comments on the FY2023 IPPS proposed rule and the CY2023

 Physician Fee Schedule proposed rule

Patient Identification and Matching

- AHIMA CEO Wylecia Wiggs Harris co-authored an op-ed in STAT News titled "A National Patient ID is Essential for Patient Safety"
- AHIMA naming policy adopted into ONC's Interoperability Standards

 Advisory (ISA), a set of interoperability standards and implementation specifications that can be used to address specific interoperability needs
- Worked with Patient ID Now coalition to release <u>results of a survey</u> on the state of patient identification in the industry
- With the coalition, hosted Patient ID Week, which resulted in nearly 1,000 letters to Congress, hundreds of Tweets supporting Patient ID, and culminated in a virtual congressional briefing
- Joined nearly 120 organizations on letters to <u>House</u> and <u>Senate</u> appropriators advocating for the repeal of Section 510 in the Labor-HHS appropriations bill
- Garnered 27 US Representatives' signatures on a Dear Colleague letter requesting Section 510 be removed from the FY23 Labor-HHS appropriations bill
- Joined more than 30 organizations to advance a new appropriations request for ONC to designate \$7 million of funds appropriated to patient ID and matching efforts, resulting in the House Labor-HHS bill accepting the request at \$5 million
- Worked with Patient ID Now coalition to <u>submit comments</u> in response to the US Senate HELP committee's draft PREVENT Pandemics Act

Advancing Healthcare Transformation

Pursuing Better Information Flows

Better Integrating Clinical and Administrative Data

- Endorsed <u>HR 3173/S 3018</u> the Improving Seniors' Timely Access to Care Act
- Launched <u>Health IT End Users Alliance</u>, a coalition dedicated to advancing end user perspectives in health IT policy and standards development
- Working with members of the Alliance, released a <u>consensus statement</u> regarding real-world testing
- Testified to NCVHS on importance of guidance framework to measure readiness of standards to support clinical and administrative data flows
- Responded to ONC RFI regarding electronic prior authorization standards, implementation specifications, and certification criteria
 - Developed <u>fact sheet</u> on CMS Administrative Simplification: Adoption of Standards for Health Care Attachment Transactions and Electronic Signatures, and Modification to Referral Certification and Authorization Transaction Standard



Better Integrating Clinical and Administrative Data (continued)

Developed <u>fact sheet</u> on CMS Advancing Interoperability and Improving Prior Authorization Processes Proposed Rule

Improving Interoperability

- Helped lead and participated in The Sequoia Project's <u>Information Blocking Compliance Work Groups</u> related to electronic health information (EHI)
- Released <u>final report</u> titled "Defining EHI and the Designated Record Set in an Electronic World" with the American Medical Informatics Association (AMIA) and the Electronic Health Records Association (EHRA)
- Provided <u>comments</u> regarding the CY 2023 Physician Fee Schedule
- Responded to CMS RFI on National Directory of Healthcare Providers & Services
- Provided <u>comments</u> to ONC regarding the US Core for Data Interoperability (USCDI) Draft version 3
- Led <u>organizational letter</u> to Secretary of HHS encouraging coordinated education related to information blocking
- Released video on overview of EHI and its evolving definition
- Became a member of <u>The Sequoia Project</u>, an independent, trusted nonprofit dedicated to advancing nationwide health information exchange
- Joined a <u>letter</u> to the Healthy Future Taskforce Modernization Subcommittee advocating for dedicated resources for long-term and post-acute care (LTPAC) settings
- Joined 135 organizations in advocating for increased funding for the Agency for Healthcare Research and Quality (AHRQ)

Data Breaches

- Responded to RFI from Senator Warner (D-VA) in response to his cybersecurity white paper, "Cybersecurity is Patient Safety: Policy Options in the Health Care Sector"
- Responded to OCR RFI regarding security practices that could be recognized when determining fines, audits, and remedies when resolving violations of HIPAA
- Co-signed <u>letter</u> to ONC and CMS requesting review of security and vulnerability flaws of Fast Healthcare Resource (FHIR) based APIs

Improved Integration of Behavioral Health Information with Physical Health Information

Developed <u>fact sheet</u> on Confidentiality of Substance Use Disorder (SUD) Records Proposed Rule





Public Health Information Needs

Public Health



Provided <u>input</u> to the Senate HELP Committee on the draft PREVENT Pandemics Act



Supported S 674, the Public Health Infrastructure Saves Lives Act

Improved Payment and Delivery Models

Telehealth



Responded to an RFI from the Healthy Future Taskforce Modernization Subcommittee on the utilization of wearable technologies, expansion of telemedicine, and digital modernization efforts



Co-signed <u>letter</u> to US Senate leaders calling for two-year extension of CMS telehealth waivers

Co-signed <u>letter</u> advocating for funding for Telehealth Resource Centers Co-signed <u>letter</u> to congressional leadership calling for comprehensive permanent telehealth reform





