



**NFWL Access to Care Sub-Committee Resolution
Improving the National Health Information Infrastructure (NHII)
and Standards for Health-Related Data**

(Introduced August 31, 2003)

WHEREAS, a cost-effective and logical national health information infrastructure is needed to:

- 1) compile, analyze and disseminate health-advancing information from all health industry stakeholders, including public and private, community, minority and ethnic, and faith-based organizations,
- 2) provide impartial information on best practices to health, healthcare, and health policy decision makers, and
- 3) help the greatest number of people exercise their liberties and access the right care in the right place at the right time, at the lowest possible cost;

WHEREAS, the federal government is supporting a public-private collaboration to develop impartial standards for health-related data to:

- 1) support an optimal information architecture,
- 2) align financial and other incentives of consumers, caregivers and organizations (e.g., through tax-benefits for achievement of targeted health improvements),
- 3) enhance health surveillance to support homeland security,
- 4) support research and population health,
- 5) enhance safety and quality, and
- 6) help protect privacy and confidentiality;

WHEREAS, the building blocks of an effective national health information infrastructure are currently incomplete, do not adequately address non-MD, non-DDS healthcare professional coding needs and, as a result, may compromise the nation's ability to:

- 1) identify public health risks (such as bio-terrorism and viral epidemics),
- 2) avoid individual health risks (such as medical errors and adverse reactions),
- 3) reverse disparities in health based on income, race and ethnicity,
- 4) make comparisons of economic and health outcomes of conventional, complementary and alternative approaches to care, and allied health professional care, to identify the best practices available,
- 5) improve healthcare accessibility, quality and cost-management, and
- 6) support better health policy decisions;

WHEREAS, the federal government committed to specific improvement in the national health information infrastructure for administrative simplification, including standardization of transactions and code sets under the Health Insurance Portability and Accountability Act of 1996 (HIPAA);

THE POWER TO MAKE THE DIFFERENCE FOR YOU

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WHEREAS, the older HIPAA code sets are oriented toward conventional physician and dentist-directed disease-based models of care, and do not provide the practitioner representation, hierarchic coding structure and legal scope of practice information needed to support cost-effective financing, administration and delivery of integrative healthcare;

WHEREAS, HIPAA code sets should be designed, developed and overseen in a manner that facilitates the financing, administration and delivery of the most cost-effective care available;

WHEREAS, complete, accurate and precise clinical and administrative codes are needed to reflect alternative medicine, nursing and other forms of integrative healthcare (including, but not limited to, dental hygiene and other forms of prevention and wellness, as well as impoverished, minority and ethnic, youth, and elderly care);

WHEREAS, incomplete and inadequate standards for health-related data may reduce the effectiveness of the national health information infrastructure and may result in systemic inefficiencies that reduce access to quality care and lead to escalating costs;

BE IT RESOLVED, that the National Foundation for Women Legislator's Access to Care Sub-Committee, under the full Committee of Health & Empowerment, urges the federal government to pass regulations or law to ensure the nation's clinical and administrative codes are developed and managed in an open and impartial manner that supports:

1. scientific assessments of the relative economic and health outcomes of integrative healthcare, as well as complementary and alternative approaches to physician-directed, dentist-directed and other disease-based models of care; and
2. the collection, analysis, and dissemination of health-related data, information and knowledge on all facets of wellness and healthcare to improve individual and public health, business and industry efficiencies, and socioeconomic development;

BE IT FURTHER RESOLVED, that the National Foundation for Women Legislator's Access to Care Sub-Committee, under the full Committee of Health & Empowerment, urges federal and state governments to explore immediate remedies to national health information infrastructure and health-related data challenges, to support the rights of Americans to choose the care that is best for them.