

A Watershed Moment:

Recommendations and Insights
for the Health Information Profession
to Meet the Emerging Needs of the
Modern Healthcare Consumer





Executive Summary

The modern consumer's experience with information about their health and healthcare is simultaneously plentiful and overwhelming. Consumers now have multiple sources of information on their personal health and healthcare services literally within reach, from fitness trackers and other health monitoring devices to mobile applications that allow them to access their electronic health records (EHRs) and schedule appointments. However, the user *experience* of accessing, understanding, and easily using not only their own health information but also their family's data is often confusing and frustrating—at a moment when consumers are increasingly accustomed to a more seamless experience from other industries.

For health information (HI) professionals who work in diverse workplace settings where health information is managed, helping the healthcare system better meet the needs of healthcare consumers—whether directly or indirectly—may require an evolution of their current skills and roles.

Leaders from health systems, insurers, health technology companies, health information exchanges, academic institutions, patient advocacy groups, and trade associations interviewed for this paper anticipate a range of upcoming shifts to the HI field.

These changes include the growing use of automation and artificial intelligence (AI) for many functions currently administered by HI professionals; the emergence of new healthcare companies focused on delivering an excellent consumer experience; and shifts in the healthcare regulatory environment.

Together, these trends may lead to a shift in the HI field to upskill and take on a more analytical, proactive, and mission-critical role in shaping the governance, management, accessibility, and use of health information for consumers, clinicians, and provider organizations alike.

In these roles—which will be contingent on support from the leaders of healthcare organizations—HI professionals may also be well-positioned to help their organizations uncover more insights regarding the connections between the conditions in the places where people live, work, and play, and their health, a concept also known as the social determinants of health (SDOH).



“So much of the information about [SDOH] is about the distinction between poverty and the human condition, and what the healthcare system currently focuses on,” says Tim Pletcher, Executive Director of the Michigan Health Information Network Shared Services (MiHIN).

Recommendations for AHIMA and HI Professionals

The themes of the interviewees’ perspectives on the impact of addressing current gaps in the needs of healthcare consumers on the HI field uncovered five core recommendations for AHIMA, its members, and other HI professionals and stakeholders. The recommendations are intended to help the HI field play a supportive role in efforts by the healthcare field and their organizations to address consumer expectations—though not necessarily in direct, patient-facing roles.

1. Prepare the HI field for more analytical capabilities and roles.

Healthcare providers, payers, healthcare technology companies, and other healthcare stakeholders anticipate a need for more analytical roles and skill sets within the HI field—as some functions that HI professionals currently handle are increasingly automated. This may include:

- Helping clinicians engage patients in the development and use of the information in their EHRs
- Advancing organizational value-based care initiatives and care coordination efforts through the design and management of online tools to support the use of related protocols; and related claims support activity to support changes in payment models
- Supporting organizational efforts to build new “digital front doors,” or online sites and portals where patients can schedule services

2. Prepare the profession for increased involvement in the governance and management of healthcare data.

The growth in health information from both traditional and emerging data sources outside the clinical workstream requires HI professionals to effectively manage, govern, and coordinate access to data from clinical, personal, and community-based sources. This work can support efforts to improve data quality and usability with clinicians and consumers alike, and may include:

- Closer coordination with clinicians to improve the design and delivery of data capture
- Increased advocacy internally and externally to support improved processes and regulatory changes to ease the exchange of information between entities
- Helping clinicians collect SDOH data in the health record with cultural sensitivity—including [SDOH-related Z Codes](#)
- Supporting efforts to understand, map, and manage the entire patient journey for specific disease states and their progression
- Coordinating the design, curation, and governance of existing and new data sources
- Managing artificial intelligence processes, particularly with complex patient cases

“Some HI professionals will help patients navigate. On the back end, there is a lot of work that should be automated, where we don’t need someone running through a chart to translate that for insurers.”

— *Nancy Agee, President and CEO, Carilion Clinic*

3. Develop strategies and resources that allow HI professionals and clinicians to improve the user experience of consumers—and address the social determinants of health.

Healthcare leaders envision HI professionals playing a larger role supporting clinical team members in their interactions with patients, including:

- Helping improve healthcare consumers’ user experience as it pertains to the collection of data and consumers’ access to data—which may support efforts to address health equity and improve consumer engagement in the development and use of their health records
- As these efforts mature, the potential development of educational resources by AHIMA and the HI community focused on improving the user experience of consumers

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— *Tim Pletcher, Executive Director of the Michigan Health Information Network Shared Services (MiHIN)*

4. Increase HI participation in external advocacy and policy efforts.

By becoming more involved in advocacy and policy efforts outside their organizations, HI professionals can not only improve consumer access to their data but also seek to improve the quality and integrity of their health information ([Click here to access AHIMA's advocacy agenda](#)).

These efforts may include:

- Collaborating with EHR vendors, industry task forces, and other stakeholders to design processes that keep up with shifts in both the organizational use of health data and consumer expectations for accessible information
- Informing [patient matching](#) efforts, or the identification and linking of one patient's data within and across health systems to reduce medical errors and instances of duplicative testing
- Helping inform the [Office of the National Coordinator's \(ONC\) United States Core Data for Interoperability \(USCDI\) standard](#) to improve nationwide interoperable data exchange—allowing consumers to share and exchange data with their providers both electronically and seamlessly
- Appropriately capturing data for evolving [Centers for Medicare & Medicaid Services \(CMS\) quality measures](#) to support efforts to improve the quality of care patients receive
- Providing oversight and support for organizational efforts to comply with [federal transparency regulations](#) requiring providers and payers to share information on the price of care with consumers and empower them with the information they need to make informed decisions about their health and healthcare

“You won’t know that an inequity exists if you don’t have the data to point it out.”

— Erin Mackay, Managing Director for Health Justice, the National Partnership for Women & Families

5. Prepare the HI field for the *possibility* of more direct interactions with patients in the future.

Interviewees expressed divergent opinions on the question of whether HI professionals will work more directly with patients to collect and provide access to health and healthcare information or pursue these ends indirectly.

More quantitative and qualitative research may be required to determine the probability and extent to which the HI profession will be engaged in increased patient interactions—and help determine the need for future education and workforce development in this arena.

This report was prepared by Kaufman Hall at the request of the American Health Information Management Association (AHIMA).

Introduction

Modern consumers are managing their health in ways that have transformed dramatically in just the last few years. The use of wearable devices tracking health metrics is now commonplace, and the COVID-19 pandemic has accelerated efforts, led in part by new entrants to healthcare delivery, to provide improved mobile and online access to health services and information.

At the same time, healthcare consumers still often find the current user experience for accessing, understanding, and easily using information about their health and healthcare challenging and confusing.

This article explores these tectonic shifts in the perspective and expectations of healthcare consumers in the context of the evolution of the HI field, with a specific focus on changes in the evolution of healthcare with regards to:

- The competitive landscape
- Technological developments
- Regulatory considerations
- Changes to the roles and skill sets of the HI workforce

The Competitive Landscape: New Entrants Target Consumers, Value-Based Care Expands



Today's healthcare consumer has access to a proliferating number of choices for accessing and receiving care—often in digital-first environments. In recent years, a wide range of relatively new entrants to healthcare—including retailers and new, digital-first primary care and specialty care providers—have begun offering new digital services for consumers, often without a brick-and-mortar presence.

Concurrently, new entrants have entered the market seeking to improve consumers' electronic, seamless access to their records. These services are often also intended to offer consumers accessible scheduling and a mix of in-person and virtual services.

Michael Meng, CEO of Stellar Health—a company that helps providers deliver better care through technology and granular incentives in value-based arrangements—notes that the core focus for any healthcare company and its employees is to improve the consumer experience.

“At some point, every American experiences a horror story while accessing healthcare, making the need to fix it crystal clear,” Meng says. “Enabling providers to do the right thing with more direct, clearer, and more fair rewards will cause a major shift in these experiences, and the rest will follow.”

Value-based care models—which are designed to incentivize improved quality of the care provided to patients—also offer an opportunity for enhanced data management and analysis. With many of the specific protocols—including following up with patients with chronic conditions regarding their adherence to medication—HI professionals may have a role to play in supporting improving the systems that assist with care delivery outside the traditional four walls of a hospital, healthcare leaders say.

“Healthcare used to be very episodic,” says Tom Clark, chief strategy and growth officer at Avera Health in South Dakota. “With value-based care, the question becomes, how are we engaging with patients when they’re not in our system?”

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— *Michael Meng*
CEO of Stellar Health

Consumerism and HI: Key Technology Developments

Interviewees cited a range of technological advancements in the works that may automate many functions currently handled by coders and other HI professionals through computer-assisted coding and the use of AI with regards to data integrity, data analytics, release of information, and EHR management. In turn, these trends may create more opportunities for HI professionals to address the needs of healthcare consumers.

Potential future and ongoing developments include [increased robotic process automation](#) for back-office tasks; the [administration of medical coding tasks](#) by artificial intelligence (AI); and [the use of AI and machine learning technologies](#) to support healthcare data management and governance.

“For HI professionals, this is a moment where there is going to be significantly more automation,” says Nancy Agee, president and CEO of Carilion Clinic in Roanoke, Va.

However, many analyses and tasks will likely remain too complex for technological solutions now and in the near term, requiring HI professionals to still be involved but evolve their skill sets accordingly.

Virtual healthcare takes off

The COVID-19 pandemic is another driver that has led to a massive increase in the number of healthcare consumers accessing virtual care or related telehealth services. While the volume of telehealth interactions has slowed recently, that volume is still significantly higher than pre-pandemic levels, with [38 percent of patients having received virtual care so far in 2022](#). These trends will continue to evolve over the next several years.

“Prior to the pandemic, there was a desire to have companies solve problems for healthcare consumers in a way they’d be solved for other industries,” says Ruchi Medhekar, chief product officer for Vyne Medical, a Georgia-based technology company that helps hospitals manage patient health data. “The pandemic simply accelerated that trend.”

The onset of the COVID-19 pandemic accelerated the use of telehealth platforms, which often include amenities including online appointment scheduling and patient intake processes, symptom identification and triage, virtual visits with health professionals, and online/mobile management and medication adherence for patients’ health conditions.

“New primary care models that take care of specific communities with a service-rich experience are elevating the game for all of us,” says John Glaser, Ph.D., executive-in-residence at Harvard Medical School.



Precision medicine is on the rise

Precision medicine—[an approach to care that accounts for an individual’s genes, environment, and lifestyle](#), and has been supported by [ongoing efforts to map the human genome](#), including the [federal Precision Medicine Initiative](#) launched under the Obama administration—has created a new source of genetic data. Precision medicine has also propelled a rise in pharmacogenetic testing to determine which therapies are safe for specific patients. This development may create an additional source of data for HI professionals to help manage.

Some experts suggest that interoperability among providers, payers, and other healthcare actors is improving and is poised for further improvements, creating a greater need for data management among these healthcare entities.

Regulatory decisions help break down information silos

The [21st Century Cures Act and its information blocking provisions](#) have the potential to increase access to and sharing of sources of patient information that were previously siloed by providers, hospitals, and health IT vendors, collected in locations from the home to the community, for potential data management.

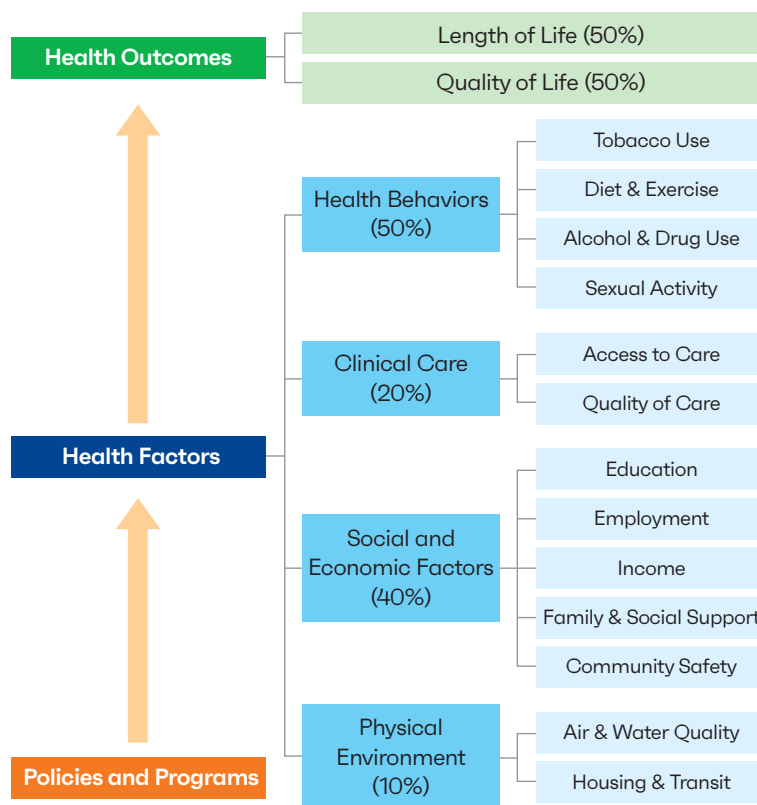
[According to the American Hospital Association](#) (AHA), 93 percent of hospitals nationally now provide patients with the ability to view their health records online, up from 27 percent in 2012. In addition, 88 percent of hospitals now send records to ambulatory care providers outside their health system, up from 37 percent in 2012.

“We’re starting to see the pieces of interoperability come together,” George Gooch, CEO of the Texas Health Services Authority, says.

Addressing the social determinants of health

In addition, there is heightened recognition of the impact of SDOH, as payers and providers explore ways to address health conditions upstream from clinical encounters. According to County Health Rankings, [only 20 percent of an individual’s health is related to clinical care](#), with the remaining 80 percent connected to health behaviors, social and economic factors, and physical environment.

Erin Mackay, the managing director for health justice for the National Partnership for Women & Families, notes that collecting data on race and ethnicity, gender identity, language, and data related to access to housing, food, transportation, and other SDOH is critical to advancing health equity.



Source: County Health Rankings & Roadmaps

“You won’t know that an inequity exists if you don’t have the data to point it out,” Mackay says. “The ability to stratify information—whether it’s outcomes, processes or patient experience—by race and ethnicity is important. It’s an absolute prerequisite to advancing health equity to see people as a whole person, and tailor their treatment recommendations and care plans accordingly. For example, if you know someone’s housing insecure or they are struggling to keep electricity on, you might not prescribe medication that has to be kept cold.”

Mackay adds that helping patients understand why their personal data is asked for is important. Mackay notes that nurses play a critical role in collecting patient data—as the conduit between collecting related information and working with the HI field to effectively integrate it with their records.

“Nurses may be in a better position to be asking those questions...because they have that direct relationship with the patients,”

Mackay says. “People don’t often understand why they’re being asked to provide that information and aren’t aware it has health implications and might change their treatment recommendations. If we talk about social drivers of health, people want to ask why you’re asking and what sort of impact it has on health treatment and subsequently on patient outcomes. From my perspective as a patient advocate, that’s where we often fail to make that connection.”



For instance, diabetes patients’ access to food and transportation may impact their health in ways that can inform their treatment recommendations. Curating this data with clinical and administrative records may pose challenges for healthcare entities on issues including patient trust, providers’ administrative burden, and managing privacy and security concerns. By helping address these concerns from a data management standpoint, HI professionals can play a pivotal role in helping healthcare entities capture and manage SDOH data and provide preventative care initiatives for patients. In a [recent letter to CMS](#), AHIMA outlined the challenges providers face in capturing and storing SDOH data.

Nelly Leon-Chisen, former director of Coding and Classification for the American Hospital Association, notes that SDOH ICD-10-CM codes for documenting SDOH are not always used by HI professionals. Leon-Chisen added that there is a need to build recognition of the SDOH codes to spur greater use by the field.

“The interest in codes for [SDOH is rising],” Leon-Chisen says. “With the advent of patient-centered care, providers have been addressing situations where patients require a longer visit because of more complex needs. In terms of making care more seamless and creating handoffs [with other community healthcare providers], theoretically that should have been happening, but codes were largely a way to bill and a recognition of the value of services.”

How Shifts in the Consumer Landscape May Impact the HI Workforce

From an evolving competitive landscape to addressing gaps in consumer access to care, healthcare leaders outlined several potential trends that may lead to changes in the roles that HI professionals play within their organizations in the future. In particular, the potential automation of coding and other HI functions that are currently processed manually may open opportunities for HI professionals in areas including:

- Closer coordination with clinicians to improve the design and delivery of data collection
- Increased advocacy internally and externally to support improved processes and regulatory changes to ease the exchange of information between entities

Back-end design is an emerging space

The back-end design, curation, and governance of new data sources was also cited as an emerging space for HI professional growth, given the influx of data from EHRs, payers, and new healthcare technology companies that enable patient generated data exchange. Much of that data exchange is also an inevitability given the new federal requirements that make data exchange mandatory with narrow exceptions. Ultimately, these data sources may help inform further analytics and insights—and will also require HI professionals to play a stronger role in data governance, from assessing data integrity to maintaining confidentiality, privacy, and security.

“There are really important opportunities relative to healthcare and the HI profession,” Pletcher says. “The question needs to be asked: are HI professionals in the back room curating the EHR, or are they on the front end trying to improve the quality and usability of information?”

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Workforce opportunities exist to engage directly with patients

Some, though not all, interviewees suggest HI professionals will be more directly involved with patients to collect their information or assist with their healthcare literacy. The more a consumer understands their treatment plans and options, the higher the adherence to the course of action they are likely to have, leaders say.



“Some HI professionals will help patients navigate,” the Carilion Clinic’s Agee says. “On the back end, there is a lot of work that should be automated, where we don’t need someone running through a chart to translate that for insurers.”

This may include helping consumers and employers who purchase healthcare for their employees navigate value-based care models to find needed services, supporting clinical documentation from telehealth and virtual care platforms, supporting self-scheduling technology, and educating patients, helping patients use provider portals, identifying pain points in the patient experience, and participating in efforts to alleviate potential concerns.

“The HI field has been moving along to the digital space since the implementation of EHRs,” says Eric Poon, MD, chief health information officer for Duke Medicine. “There has been a significant wave of modernization, and there are higher expectations of digital competence.”

NPWF’s Mackay notes that many efforts, including [Open Notes](#), have taken steps to share clinical notes with patients.

“The actual medical records are like a connect-the-dots drawing where you can’t always see the larger picture,” Mackay says. “The clinical notes really help to fill in the larger picture and understand what you’re looking at. However, there is potential for patients to be harmed by reading notes which contain stigmatizing language [which underscores the need for provider training in documenting encounters via clinical notes].”

Increased support for providers in their interactions with patients was also cited as a potential area for growth by HI professionals. These efforts may include:

- Supporting clinicians to improve patient engagement around the collection of data and use of their EHRs
- Managing continuity of care documents
- Advancing value-based care and care coordination through claims support and the design of online tools that allow employees to effectively shop for needed services

- Helping clinicians and other healthcare providers collect SDOH data with cultural sensitivity, including food and transportation, and curating this data in concert with existing clinical and administrative records
- Delivering data to clinicians in a timely, organized fashion
- Supporting organizational efforts to build new “digital front doors,” or online sites and portals where patients can schedule services
- Engaging in discussions about patient privacy considerations and related regulatory and legal changes
- Supporting efforts by providers to map and manage patients’ journeys for specific disease states

“HI professionals can play a key role in creating a more coordinated and connected healthcare system.”

**— Rebecca Madsen, Chief
Consumer Officer,
UnitedHealthcare**

“It’s a mistake to define consumer-centric care as different than provider-centric care,” says Brad Kittredge, founder and CEO of Brightside Health, a virtual provider of behavioral healthcare services. “We must think about providers as consumers. Provider burnout is huge, and it affects provider retention and decision-making. There’s a direct line to the quality of care.”

Advocacy roles may become increasingly important

Interviewees also cited several key advocacy and public policy opportunities for HI professionals to engage in beyond their roles with their organizations. These efforts may include:

- Collaborating with EHR vendors, industry task forces, and other stakeholders to design processes that keep up with shifts in both the organizational use of health data and consumer expectations for accessible information
- Informing [patient matching](#) efforts, and enhancing the identification and linking of one patient’s data within and across health systems
- Helping to inform expansion of the [USCDI](#), a set of standardized data classes and elements to enhance nationwide, interoperable data exchange
- Appropriately capturing data for evolving [CMS quality measures](#)
- Providing oversight and support for organizational efforts to comply with [federal price transparency requirements](#) that mandate providers and payers to share information on the price of services with consumers in advance of receiving care

“HI professionals can play a key role in creating a more coordinated and connected healthcare system,” says Rebecca Madsen, chief consumer officer, UnitedHealthcare. “Without question, the current health system is too fragmented, expensive, and difficult to navigate.”

Conclusion

Modern consumers are often frustrated by their healthcare experiences—from the scheduling of services to access to information to how they receive care—especially in comparison with their experiences in other industries. Improving this user experience is mission-critical for any healthcare entity.

Coupled with the prospect of increased automation and use of artificial intelligence, the HI profession is at a watershed moment. Moving forward, HI professionals are well-positioned to play a significant role in helping their organizations—from providers to payers to new healthcare companies to other entities—both govern, manage, and provide access to data from multiple sources, while helping inform efforts to create a better user experience for patients.



Appendix: Interviewees

This article is based on Kaufman Hall research and analysis regarding the evolving needs of the modern healthcare consumer and the ways in which the HI field may evolve to meet those needs. Kaufman Hall also interviewed leaders from health systems, insurers, health technology companies, health information exchanges, academic institutions, patient advocacy groups, and trade associations.

Interviewees for this project are listed below in alphabetical order.

1. Nancy Agee, President and CEO, Carilion Clinic
2. Tom Clark, Chief Strategy and Growth Officer, Avera Health
3. John Glaser, Executive-in-Residence, Harvard Medical School
4. George Gooch, CEO, Texas Health Services Authority
5. Mary Griskewicz, Director, Federal Government Affairs, Cigna
6. Brad Kittredge, Founder and CEO, Brightside Health
7. Nelly Leon-Chisen, former Director of Coding and Classification, American Hospital Association
8. Erin Mackay, Managing Director for Health Justice, the National Partnership for Women & Families
9. Rebecca Madsen, Chief Consumer Officer, UnitedHealthcare
10. Ruchi Medhekar, Chief Product Officer, Vyne Medical
11. Michael Meng, CEO, Stellar Health
12. Tim Pletcher, Executive Director, Michigan Health Information Network Shared Services
13. Eric Poon, MD, Chief Health Information Officer, Duke University Health System
14. Matt Schuller, Director, Health Information Technology, BCBSA

About AHIMA

The American Health Information Management Association (AHIMA) is a global nonprofit association of health information (HI) professionals. AHIMA represents professionals who work with health data for more than one billion patient visits each year. AHIMA's mission of empowering people to impact health drives our members and credentialed HI professionals to ensure that health information is accurate, complete, and available to patients and clinicians. Our leaders work at the intersection of healthcare, technology, and business, and are found in data integrity and information privacy job functions worldwide.



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