

September 21, 2023

The Honorable Bill Cassidy, M.D.
Ranking Member
Health, Education, Labor, and Pensions Committee
US Senate
455 Dirksen Senate Office Building
Washington, DC 20510

RE: Response to Request for Information on “Exploring Congress’ Framework for the Future of AI”

Submitted via email to HELPGOP_AIComments@help.senate.gov

Dear Ranking Member Cassidy:

Thank you for the opportunity to provide feedback to ensure we are prepared for the continued deployment of artificial intelligence (AI). In coming years, AI and machine learning (ML) will change not only the way healthcare and health information is delivered, administered, and managed, but will also change the makeup of the healthcare workforce, including the training and skills needed for available jobs in the future. Safeguarding patient and consumer health data privacy will also be even more important, and ensuring the health system has a framework with which to identify and correct potential biases within AI and ML will be paramount.

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. The AHIMA mission of empowering people to impact health drives our members and credentialed HI professionals to ensure that HI 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. AHIMA members also bring the expertise and knowledge around HI and data that is necessary to inform investments in our healthcare system.

We appreciate the commitment to addressing challenges associated with building a framework to prepare for the changes AI will bring in the coming years. As the healthcare ecosystem begins to deploy and integrate AI and ML into its workflows, we must ensure that the ecosystem is viewed holistically to include operational staff and tasks that are vital to the safety of patients, the privacy and security of their health information (HI), and the maintenance of the revenue cycle in healthcare which supports

over 3.7 billion claims per year.¹ This includes the work currently performed by HI professionals. AHIMA offers the following feedback in response to the Request for Information.

Recommendations for Congress Regarding the Increased Adoption of AI and ML within the Healthcare Workforce

The management of patient HI is integral to our healthcare system. In August, AHIMA undertook a survey of health information professionals in collaboration with NORC at the University of Chicago. The survey sought to understand the specific workforce challenges that impact the HI profession and assess the role that emerging and evolving technologies like AI and ML will have on the HI workforce. Over the past two years, 66% of respondents in the survey experienced understaffing within their departments, leading to decreased reimbursements and increased claims denials, lowered data quality, and slower release of medical records. While it is likely that the adoption of AI and ML will lead to changes within the HI workforce, it is clear that the work must still be performed at a level that involves humans to ensure patient safety, privacy, data quality, and accuracy within the revenue cycle. With deployment of AI and ML resulting in increased technical complexity and need for oversight and auditing to ensure the technology works as anticipated, there are vital roles for HI professionals that require upskilling and different types of training. Further, it is clear that not all healthcare settings are able to integrate and adopt AI and ML at the same rates — something Congress should consider as it moves forward. As it considers federal laws and regulatory frameworks around AI and ML, AHIMA recommends the following:

- **Federally funded grants for education and training.** Congress should include the HI profession and its educational programs as potential recipients to existing grants or in the creation of new grants within the US Department of Health and Human Services for programs that include trainings on the use of new and emerging technologies including AI. The cost of education is a barrier to many wanting to enter the field, and the HI profession must ensure that new entrants to the field are prepared to handle the future HI needs of the US health system. Specifically, grants should be provided support training and education for HI professionals in rural and underserved areas.
- **Federally funded grants for rapid upskilling programs for HI professionals.** As technology progresses, the privacy and accuracy of patient HI becomes more complex, and as AI solutions are adopted, the health ecosystem needs to ensure that the HI workforce is in place to handle these complex transactions using patient data. The creation of federally funded rapid upskilling programs for the current HI workforce would help ensure that the workforce is appropriately trained for the advanced technological skills and increased oversight needed for the adoption of AI and ML as they progress throughout their careers.
- **Federal incentives or grants to support the adoption of AI and ML within rural and underserved hospitals and health systems.** Workplaces in rural areas and smaller organizations currently lag behind others with the adoption of AI and ML. Congress should consider ways, such as federal incentives or grants, to ensure that the technologies available for the management of patient HI are equitably available.
- **Comprehensive privacy legislation that considers the role of AI and ML.** Congress should move forward comprehensive privacy legislation that includes non-HIPAA covered health information and consider the effects that AI and ML will have on the privacy of patient and consumer health data.

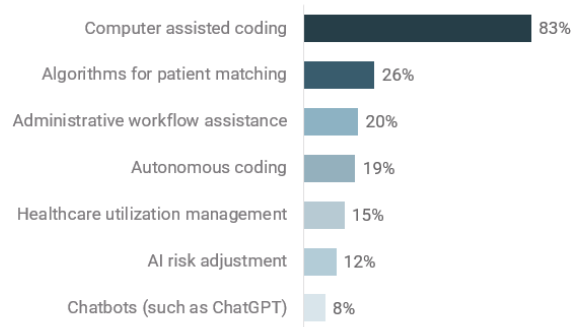
¹ Available at: <https://www.caqh.org/sites/default/files/2022-caqh-index-report%20FINAL%20SPREAD%20VERSION.pdf>.

The HI Profession

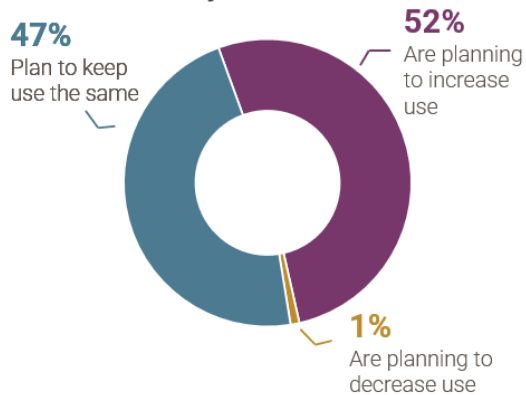
HI professionals fill a wide range of roles within the healthcare system to ensure patient HI is complete, accurate, timely, and secure. HI professionals work in several areas, including:

- **Privacy, Risk, and Compliance:** Positions within the privacy, risk, and compliance sector ensure regulatory compliance for healthcare organizations and ensure patient safety, including overseeing compliance with the Health Insurance Portability and Accountability Act (HIPAA) and state/local privacy and health information laws. Jobs may include Compliance Managers, Privacy Analysts and Privacy Officers, and Directors of HI Management.
- **Data Quality:** Patient HI must be complete, accurate, and timely to reflect the full scope of services and to ensure that all parties involved in the health ecosystem – patients, providers, and payers, are able to make the best decisions with regard to the patient’s health. Data quality jobs include Clinical Documentation Improvement (CDI) Quality Assurance Auditors, Coding Auditors and Educators, medical coders, Master Patient Index Specialists, and Disease Registry Registrars.
- **Data Analytics:** Data analytics in healthcare analyzes HI to predict trends, manage spread of diseases, improve clinical decision-making, and improve patient outcomes. Data analytics jobs include Clinical Researchers, Clinical Data Managers, and Health Data Analysts.
- **Revenue Cycle Management:** The Revenue Cycle Management sector oversees billing, reimbursement, customer service, and medical coding. Revenue Cycle Management jobs include Directors of Revenue Cycle Management, Revenue Integrity Specialists and Analysts, Chagemaster Analysts, and Medical Billers and Coders.
- **Consumer HI:** Consumer HI jobs involve working in patient services by supporting patient-facing administrative tasks, navigating health and social services for patients, and interfacing with diverse agencies to ensure optimal patient care is provided. Jobs may include Patient Service Representatives, Community Health Workers, Patient Navigators, and Medical Records Clerks.

AI and ML have already begun to be integrated into the work that HI professionals do on a daily basis. In our soon-to-be released, AHIMA-NORC survey of HI professionals, 45% stated that their departments already use AI and ML. Of those departments that use AI, 83% noted that computer assisted coding is used in their workplace, and other types of AI are also being deployed, including algorithms for patient matching, administrative workflow assistance, and healthcare utilization management.



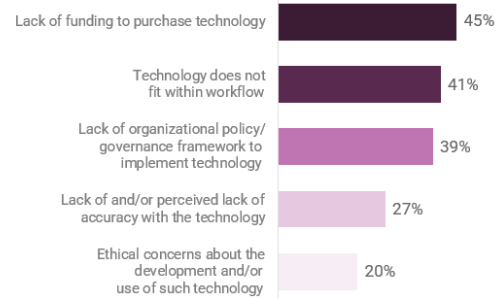
Q22: What types of AI/ ML does your department use? Select all that apply. (N=1,068)



Q25: Is your department currently planning to increase or decrease its use of artificial intelligence or machine learning (AI/ML) over the next 12 months? (N=1,391)

99% of respondents also said they anticipate use of AI and ML over the next 12 months to increase or stay the same, and only 1% were planning a decrease in use.

Respondents cited the following as reasons for not using AI/ML:



Q21: Why don't you currently use artificial intelligence or machine learning (AI/ML) with coding, documentation, or other HI-related workflows? Select all that apply. (N=1,227)

Within the 55% of respondents that do not currently use AI, rural and small workplaces were disproportionately represented. Only 28% of rural respondents stated they use AI or ML, compared with 50% in urban and 51% in suburban areas. Within HI departments of 1-25 employees, only 23% use AI or ML, compared to more than half of respondents from all other workplace sizes.

A lack of funding to purchase the technology is a top cited reason by 45% of respondents who do not use AI or ML. This response was again disproportionately higher in rural areas, with 57% of the responses citing resource challenges, compared with 41% in urban areas and 38% in suburban areas. Smaller workplaces also disproportionately noted a lack of funding to support the implementation of AI, with 49% of respondents in HI departments of 1-25 employees citing funding as a reason they do not currently use AI, compared with 38% of respondents in departments with more than 100 employees.

Medical Ethics and Protecting Patients

The use of AI and ML in the management of patient HI has a direct impact on patient safety and privacy, including the accuracy and quality of data found in patient medical records. In its survey, AHIMA asked HI professionals about their use of the following AI or ML technologies:

- autonomous coding
- computer assisted coding
- algorithms for patient matching
- AI risk adjustment;
- healthcare utilization management
- administrative workflow assistance
- chatbots (such as ChatGPT).

Of those respondents that reported their department's use of these AI, a number reported the technology improved data quality of patients' HI. These technologies included: algorithms for patient matching (66%), AI risk adjustment (63%), healthcare utilization management (57%), administrative workflow assistance (48%), and computer assisted coding (48%). Increased data quality related to

patient matching not only protects patients' safety, but increases patient privacy, reducing the risk of overlaid records where two or more patients' medical records are combined.

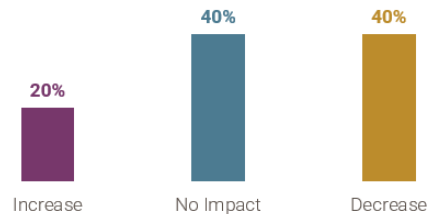
When asked about which technologies increased patient safety, algorithms for patient matching led the way with 66% of respondents that used the technology reporting increases in patient safety, with nearly a third also reporting the same for healthcare utilization management tools (30%).

When asked about challenges related to the use of these technologies, 32% of respondents that use autonomous coding said it increased errors, 26% said it reduced data quality, and 22% said increased claims denials, suggesting that human oversight is still a necessity.

AI and the Job Market

As AI and ML have become integral parts of the workflows within the HI profession, this has direct implications on the future of this workforce. In its survey, AHIMA asked HI professionals what impact they thought AI or ML would have on the number of HI jobs available at their organizations over the next five years. Forty percent believed these technologies would result in a decrease in HI jobs, 40% saw no impact, and 20% predicted an increase in jobs.

While **20%** of respondents believe that AI/ML will lead to an **increase in the number of HI jobs at their organization**, **40%** of respondents believe that it will lead to a **decrease**, and **40%** believe it will have **no impact**

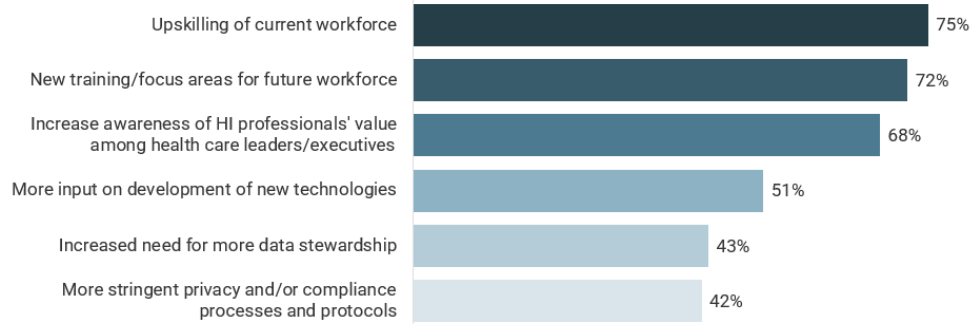


Q26: What impact do you think artificial intelligence or machine learning (AI/ML) will have on the total number of HI jobs available at your organization over the next 5 years? (n=2,345)

At a time when 66% of respondents reported experiencing understaffing within their departments over the past two years, the use of AI and ML did lessen the impacts felt by the understaffing. Respondents noted that some technologies significantly alleviated staff burnout and overwork, including autonomous coding (48%), administrative workflow assistance (46%), chatbots (32%), and healthcare utilization management (30%). Reduced administrative burden was another benefit, cited by those who used administrative workflow assistance (71%), chatbots (53%), algorithms for patient matching (49%), healthcare utilization management (42%), autonomous coding (37%), and AI risk adjustment (36%). Finally, improved productivity was cited as a benefit by a significant portion of users for each technology: computer assisted coding (75%), autonomous coding (67%), administrative workflow assistance (64%), algorithms for patient matching (57%), healthcare utilization management (54%), AI risk adjustment (53%), and chatbots (46%).

It is notable that when respondents were asked about the challenges related to the specific types of AI and ML technologies used at their jobs, few saw increased errors or lowered data quality, but two challenges that were identified by a significant portion of respondents were increased technical burdens and the need for increased oversight (through the need for more quality assurance, or through increased regulatory reporting burdens). Increased technical burdens were seen with AI risk adjustment (42%), administrative workflow assistance (33%), autonomous coding (32%), computer assisted coding (31%), and chatbots (30%). The need for increased oversight was seen with autonomous coding (42%), AI risk adjustment (34%), computer assisted coding (33%), and algorithms for patient matching (31%).

While benefits are being seen with the inclusion of AI and ML within the HI profession, the increased technical burdens and oversight point to changes for the profession as a whole. In its survey, AHIMA found that 75% of respondents noted that upskilling within the current workforce would be needed with the increased adoption of AI and ML tools. New training and focus areas for the workforce were also recommended by 72% of respondents, and more than half noted the need for HI professionals to have input on these technologies, as they bring the perspectives needed on the management of patient HI.



Q27: What do you think is necessary for the HI profession to succeed amid the increased adoption of artificial intelligence or machine learning (AI/ML) tools? (N=2,329)

AHIMA thanks Ranking Member Cassidy for his leadership in the conversations around the adoption of AI within the healthcare workforce and for the opportunity to provide feedback. We look forward to working with you to ensure a healthcare system and workforce that is prepared for the needs of the future. Should you or your staff have any additional questions or comments, please contact Kate McFadyen, Director, Government Affairs, at kate.mcfadyen@ahima.org or (202) 480-6058.

Sincerely,

Lauren Riplinger
Chief Public Policy & Impact Officer