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Patient ID Now Coalition Disappointed Congress Continues to Include Rider to Stifle Progress on Patient Identification

CHICAGO – March 11, 2022 – Patient ID Now, a coalition of leading healthcare organizations, is disappointed that today the U.S. Congress reinserted a long-outdated rider in its final version of the fiscal year 2022 (FY22) budget that stifles innovation around patient identification. The rider was removed earlier in the appropriations process in both the US House of Representatives’ Labor, Health and Human Services, Education, and Related Agencies (Labor-HHS) appropriations bill, as well as the US Senate’s draft Labor-HHS appropriations bill.

Despite bipartisan support—led by Representative Bill Foster (D-IL) and Representative Mike Kelly (R-PA)—for the removal of Section 510 in the Labor-HHS appropriations bill, the rider once again was included in the federal budget, continuing its suppression of progress towards addressing the dire issue of patient misidentification within the US healthcare system. A narrow interpretation of Section 510 over the past two decades has hindered the ability to create a national strategy on patient identification and matching, endangering patient safety and privacy, and increasing the cost burden to both patients and the healthcare system.

Patient misidentification was exacerbated during the COVID-19 pandemic and challenges included thousands of duplicate records created during the vaccination registration process and disruptions in vaccine availability at provider sites because of inaccurate patient documentation.

“As long as patient misidentification remains unaddressed at the federal level, patient safety and public health will suffer, and the unnecessary costs will be borne by an already overburdened health system,” said AHIMA CEO Wylecia Wiggs Harris, PhD, CAE. “We thank our champions on the Hill for taking up this issue and encourage Congress to look seriously at the harmful effects of patient misidentification.”

The Patient ID Now coalition urges Congress to complete the progress it made towards protecting patient safety and privacy in FY22 and finally repeal Section 510 from its Labor-HHS appropriations bill within its FY23 federal budget.

“The nation’s lack of a national strategy for accurately connecting patients to their health information is a pressing public health and safety issue. As we digitize healthcare, this essential
but missing functionality becomes increasingly more important," said Intermountain Healthcare Vice President and Chief Information Officer Ryan Smith. “Intermountain Healthcare will continue to work to remove the outdated funding restriction in order to achieve a standards-based solution that will enable patients to be accurately connected to their electronic health data as they seek care across the continuum. Only then will we truly achieve a patient-centered health care delivery system that coordinates care and puts the patient first.”

Here is what leaders of other coalition member organizations said about the recent vote:

- “Once again, we are disappointed to see that Section 510 was not removed from the FY22 Omnibus Appropriations agreement. This long-standing, archaic ban has impeded our country’s ability to accurately match patients with their records, jeopardizing patient safety and resulting in significant financial strains on the U.S. healthcare system. The patient matching issues experienced throughout the COVID-19 pandemic underscore the urgency to finally address patient identification to improve care coordination and population health management,” said HIMSS President & CEO Hal Wolf. “HIMSS is undeterred and will continue working with advocates and policymakers to lift the ban and develop a nationwide patient matching strategy in the fiscal year 2023 appropriations.”

- “We are disappointed that Congress has failed to prioritize patient safety and privacy for the 24th year in a row. Until the ban is removed, patients will be unable to accurately, safely, and consistently be matched to their health data. What we would like to relay to Congress is that this is not only a patient safety issue, but also a privacy issue due to the sensitive nature of medical information,” said Cassie Ballard, Director of Congressional Affairs, CHIME.

- “The lack of an actionable national patient identifier and matching strategy hampers safe, secure and efficient electronic exchange of health data. It’s time to move beyond narrow interpretations of archaic laws that prevent forward movement to address patient safety and quality of care issues. We continue to urge Congress to repeal the ban on federal funding for patient ID standards once and for all to help improve the nation’s public safety,” said Blair Childs, Senior Vice President, Public Affairs, Premier.

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**About Patient ID Now**

Patient ID Now is a coalition of healthcare organizations representing a wide range of healthcare stakeholders committed to advancing through legislation and regulations a nationwide strategy to address patient identification. Founding members include the American College of Surgeons, the American Health Information Management Association (AHIMA), the College of Healthcare Information Management Executives (CHIME), Healthcare Information and Management Systems Society, Inc. (HIMSS), Intermountain Healthcare and Premier Healthcare Alliance.