CHAPTER ADVOCACY ROUNDTABLE GUIDE

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Introductions

Advocacy: “ability to plead in favor of; support or urge by argument; recommend publicly”

Purpose

The HIMSS Chapter Advocacy Roundtable Guide outlines:
   a) The role state and local HIMSS chapters can play to further HIMSS’ national policy objectives and advocacy activities.
   b) The role state and local HIMSS chapters can play to influence state-level legislation and regulatory issues.

This guide also provides a starter set of suggested activities and tool sets to support these objectives.

History

Historically, HIMSS provided its Members with forums for learning and networking. In the mid-1990s because of activity related to the implementation of the Health Insurance Portability and Accountability Act (HIPAA) legislation, HIMSS recognized the important role advocacy could play in affecting public policy. Based on this experience and the increased attention by policymakers on technology in healthcare, HIMSS decided to form an Advocacy Task Force in 1998. The task force was comprised of HIMSS Members and charged with defining the role that HIMSS would play in the public policy arena. Based on recommendations from the task force, HIMSS launched its Advocacy Steering Committee in 2000.

In 2002, HIMSS committed additional resources to advocacy outreach by hiring a Director of Public Policy to act as a staff liaison to the Advocacy Steering Committee. Soon after, HIMSS opened an office in the Washington, D.C. area. In 2003, HIMSS hired former congressional staff member Tom Leary as Director of Federal Affairs who is now the Vice President of Government Relations. In October 2005, Tom Keefe, former Deputy Assistant Secretary at the Department of Labor was hired as Director of State Government Affairs to energize the Chapters advocacy efforts.
Today, the HIMSS State Government Affairs team works as part of the HIMSS Government Relations Team to make connections and build relationships with state elected officials, HIMSS and its Members. Through collaborative efforts between the HIMSS State Government Affairs Team and the Roundtable Leadership, the Chapter Advocacy Roundtable has become one of the most passionate and far reaching groups of Chapter Members committed to advocating for health IT at a local and regional level.

Chapter Advocacy Roundtable Program

With over 50 chapters in the United States, one of HIMSS’ many strengths is connecting HIMSS members with state, regional and national decision-makers on key health IT issues. HIMSS’ Chapter Advocacy program provides an opportunity for each HIMSS chapter to elect or appoint one or more members to serve in the Chapter Board level position as Chapter Advocate. Chapter Advocates and other volunteers interested in state level advocacy participate collectively in the Chapter Advocacy Roundtable (CAR).

The CAR provides a networking and educational opportunity for Chapter Advocates to promote chapter level advocacy programs at the grassroots level in coordination with the HIMSS advocacy and public policy Board-approved agenda. Throughout the United States today, over 60 HIMSS Chapter Advocates are actively engaging state legislators through planning and facilitating advocacy outreach campaigns alongside their local chapters.

What does it mean to be a Chapter Advocate?

To advocate on behalf of your organization and community about issues important to furthering health IT policy and ensure state government officials are aware of your qualification as a health IT subject matter expert.

At the state and local levels, chapters will need to clearly define the role of the Chapter Advocacy Roundtable Member. The conduct of this role will vary among the states based on local membership and volunteer capabilities. The HIMSS State Government Affairs team will work with each Chapter to develop this position and will support the Chapter Advocacy Roundtable in a number of ways. The responsibilities of this role should minimally include:

- Act as your Chapter’s connection to state level advocacy and keep members of your Board informed about campaign efforts
- Create an advocacy action plan specific to your community
- Recruit Chapter volunteers and other community leaders to join the campaign
• Plan a State Health IT/Advocacy Day to lead the chapter in developing and maintaining relationships with state elected officials
• Attend or designate a chapter representative to sit in on monthly calls, quarterly regional calls and advocacy workshops to discuss current advocacy initiatives and provide feedback from local efforts
• Attend or send a chapter representative to the annual HIMSS CAR Offsite Training held during HIMSS Policy Summit in Washington D.C.

To initiate a state-level advocacy program, the state/local chapter will need to do the following in addition to the things discussed above:

• Organize visits and other avenues of frequent communication with regional, state and federal elected officials
• Communicate the Society’s vision, mission, and priorities to state and local policy makers.
• Educate elected officials, policy makers and their staff about key healthcare information technology issues.
• Serve as a liaison between HIMSS and state government agencies that relate to mission.
• Encourage chapter members to contact their elected official on issues of import to the Society.
• Coordinate at least one advocacy related Chapter program per year.
• Develop state-level strategies to support HIMSS’ policy and legislative priorities.

**Top-10 Ways to get involved**
1. Invite state and federal legislators and district staff on FACILITY TOURS.
2. SCHEDULE MEETINGS with members of Congress and state legislators in their district offices.
3. Make advocacy a priority in your chapter. FUND ATTENDANCE at public policy events.
4. Plan Chapter educational events and INVITE LEGISLATORS to your chapter events ~ year round.
5. Encourage Chapter members to submit EDITORIAL COLUMNS or letters to the editor to legislators’ home local newspapers
6. Weigh in on current issues - YOUR OPINION COUNTS!
7. Present a member of Congress or state official with an award or REQUEST A RESOLUTION.
8. Advocacy resources you provide for your members every day - PUBLICIZE IT!
9. FOLLOW UP with the legislators and correspondents.
10. PLAN your 2015 Advocacy calendar

**Collaboration and Building relationships**
Part of your role as a Chapter Advocate is to build relationships at a regional and local level. Reaching out to state governments is at the core of this. However, we mustn’t forget the power in collaborating with other organizations who share the same vision as HIMSS as this can lead to expanded opportunities for future events. Build relationships with:

- State HIT Coordinators
- Regional Extension Centers
- Non-Profit Associations
- Health Information Exchanges
- Academia
- Provider health settings

**Developing relationships with Chapter Leaders**
These relationships are important when members are called to action. The most influential chapter members should be familiar with the Chapter Advocacy Roundtable (CAR) representative and the role that position plays within HIMSS.

**Developing relationships with the staffs of state and local association.**
They might have similar policy/legislative priorities (e.g., hospital, medical, software, HFMA, etc.) These relationships are important for several reasons. One, often HIMSS members are members of other trade associations. Developing shared messages and coordinating the use of shared members will help avoid overwhelming our “shared” influential members. Second, many of the trade associations have paid staff and political relationships that could help bolster visibility of shared issues with key decision-makers.
Chapter Advocacy Roundtable FY15 Leadership

The HIMSS Chapter Advocacy Roundtable is lead by one Chair. It is the responsibility of the Chair to provide leadership and focus for the CAR by leading monthly calls and representing the CAR on other public policy forums. In turn, the CAR Chair is supported by four Vice Chairs, each responsible for a designated region across the United States. The CAR Leadership holds a vital role in supporting Chapter Advocates as they play an instrumental role in furthering health IT within their state. Thank you to this year’s leadership team for their continued commitment to health IT advocacy. We encourage you to reach out to your Chair and Vice Chair as they are your regional support.

FY15 Chapter Advocacy Roundtable Leadership

Terri Ripley  
Chair, CAR  
Virginia Chapter  
runerriripley@gmail.com / (434) 200-4840

Steve Earle  
Vice Chair, Eastern Region, CAR  
New England Chapter  
Searle@carene.org / (401)921-2769

Lauren Wiseman  
Vice Chair, Midwest Region, CAR  
Greater Chicago Chapter  
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Christopher Kunney  
Vice Chair, Southern Region, CAR  
Georgia Chapter  
ckunney@comcast.net / (404) 276-0738

Nancy Hall  
Vice Chair, Western Region, CAR  
Northern California Chapter  
Nancy@cios4cloud.com / (916)769-8189
Midwest Region
Heart of America, Greater Chicago, Indiana, Iowa, Kansas, Kentucky Bluegrass, Michigan, Midwest Gateway, Minnesota, Nebraska, North Dakota, South Dakota, Wisconsin Dairyland

Eastern Region
Maryland, National Capital Area, New England, New Jersey, New York, North Carolina, Ohio-Central and Southern, Ohio-Northern, Pennsylvania-Western, Pennsylvania-Delaware Valley, Pennsylvania-Central, South Carolina, Virginia, West Virginia

Southern Region
Alabama, Arkansas, Florida-Central, Florida-South, Georgia, Louisiana, Mississippi, Oklahoma, Tennessee, Texas-Austin, Texas-Dallas Fort Worth, Texas-South Central, Texas-San Antonio

Western Region
Arizona, California-Northern, California-Southern, Colorado, Hawaii-Alaska, Montana, Nevada, New Mexico, Oregon, Utah, Washington

Chair, Terri Ripley
Lauren Wiseman, Vice Chair of Midwest Region
Christopher Kunney, Vice Chair of Southern Region

Steve Earle, Vice Chair of Eastern Region
Nancy Hall, Vice Chair of West Region
Chapter Advocacy Roundtable Meetings and Calls

**Monthly CAR Conference Calls** take place via WebEx the third Friday of every month at 12:00pm EST. Led by the CAR Chair, each call typically includes updates from HIMSS Government Relations Team and advocacy spotlights from Chapter Advocates who have led advocacy initiatives and State Health IT Days. Please contact Julie Brown, Associate Manager, HIMSS State Government Affairs for web conferencing information. All monthly calls are recorded.

**Quarterly Regional CAR Conference Calls** take place once a HIMSS fiscal year quarter. Led by your regional Vice Chair, these calls are by phone line only and attended by other Chapter Advocates within your region. These calls provide a unique space to meet and drill down to address specific issues at a regional and local level. Please contact your Vice Chair for additional information.

**Chapter Advocacy Workshops** are webinars which are offered throughout the fiscal year. Led by Chapter Advocates themselves, these webinars are meant to inform and instruct CAR members on specific advocacy initiatives they have recently delivered. Please contact Julie Brown, Associate Manager, HIMSS State Government Affairs if you would like to present an initiative to the Chapter Advocacy Roundtable.

**Chapter Advocate Offsite Advocacy Training** is an annual face-to-face meeting and advocacy training session during HIMSS Annual Policy Summit in Washington D.C. The offsite provides an opportunity for new and returning members to discuss the Roundtable’s mission and responsibilities, how education and outreach take form throughout the fiscal year and gain valuable insight from a state official on their needs and interests.

**HIMSS Public Policy Events - Mark Your Calendars!**

**HIMSS 13th Annual Policy Summit**
September 17-18, 2014
HIMSS Policy Summit attendees will receive briefings, policy updates, education, and tips on communicating with Congress. Then head to Capitol Hill to explain HIMSS' top three “Congressional Asks” to Congress.

**National Health IT Week**
September 15-19, 2014
Healthcare industry and policy stakeholders will convene for the Eighth Annual National Health IT Week, a collaborative forum for public and private healthcare constituents to discuss the value of health information technology (IT) for the U.S. healthcare system. Comprehensive healthcare reform is not possible without national...
awareness and adoption of health IT to improve the quality of healthcare delivery, increase patient safety, decrease medical errors, and strengthen the relationship between patients and their healthcare providers.

**HIMSS 15 Annual Conference & Exhibition**
April 12-16, 2015
HIMSS Annual Conference offers a once a year opportunity to network with close to 40,000 health IT professionals and 1,000+ exhibitors and gain education through 300+ sessions. Chapter Advocates who attend receive invitations to private public events.

**The Chapter Advocacy Roundtable (CAR) Recognition Program**

The CAR Recognition Program was created because HIMSS wanted a way to publically recognize HIMSS Chapter Advocates for their time, effort and commitment to advocating for the transformation of healthcare through IT.

The CAR Recognition Program consists of two awards:
1. Chapter Advocate of the Year Award
2. Chapter Level of Advocacy Award

Submissions are due at the end of each HIMSS Fiscal Year. HIMSS Fiscal Year begins July 1st and ends the following June 30th of each calendar year.

For additional details, please refer to the HIMSS Chapter Advocacy Roundtable Recognition Program Guide or contact Julie Brown, Associate Manager, HIMSS State Government Affairs.
How HIMSS Prepares Chapters

HIMSS is the healthcare industry's membership organization exclusively focused on providing leadership for the optimal use of healthcare information technology and management systems for the betterment of human health. Chapters of HIMSS are “staffed” by unpaid member volunteers. The strength of these chapters varies by state. In order for the chapters to be valuable contributors to a national advocacy action network, they will need information and support in organizing themselves from the HIMSS national office.

HIMSS State Government Affairs Planning Manuals and Guides
HIMSS National is here to support you! We are here not only to offer guidance and administrative support but to also provide toolkits in the form of planning manuals and guides to assist you with your advocacy outreach. These documents can be found on the CAR Sharepoint site.

• FY15 Chapter Advocacy Roundtable Guide
• FY15 State Health IT Day Planning Manual
• FY15 Virtual Events Planning Manual

HIMSS State Government Membership
The State Government Membership program is designed for state legislators, their designated staff, and state health IT coordinators with interest in health IT relative to their mission and objectives. Each qualifying applicant will receive a complementary one year individual membership with HIMSS. As Chapter Advocates, we encourage you to reach out to your state legislators and make them aware of this opportunity. To receive an application form, please contact Julie Brown, Associate Manager, HIMSS State Government Affairs.

Online Resources
1. HIMSS Chapter Advocacy Roundtable on SharePoint. A site created especially for Chapter Advocates to stay connected with HIMSS and each other. Includes posting on relevant announcements and documents pertaining to the CAR. Contact Julie Brown, Associate Manager, HIMSS State Government Affairs to obtain access.

2. Legislative Action Center. An electronic tool launched in 2003 for all HIMSS members to research, educate and communicate with federal officials. This
tool is updated daily and was awarded the 2005 American Society for Association Executives (ASAE) National Award for Citizenship and Democracy.

3. **HIMSS State Dashboard**. The premier resource of today’s healthcare Information technology initiatives around the United States! The Dashboard provides an easy-to-read visual interface tracking key initiatives including Regional Extension Centers, HIMSS Davies Award recipients, Health Information Exchanges, State Legislation and HIMSS Chapters.

4. **CQ StateTrack**. Chapter Advocates are able to identify and track pertinent state legislation through CQ StateTrack. CQ StateTrack also alerts CARs when target legislation requires their attention. Please contact Julie Brown, Associate Manager, HIMSS State Government Affairs to register and learn more about StateTrack.

5. **Health IT Policy Update**. Distributed via e-mail and published every Friday on the HIMSS Web site, Health IT Policy Update is packed with detailed analysis of the latest news surrounding the economic recovery bill; healthcare reform; initiatives and announcements from federal departments; and the Society’s role in transforming the healthcare industry. Please visit the HIMSS Health IT Policy Update site where you can sign up to receive the weekly update every Friday.

6. **HIMSS Principles on Government Initiatives**. HIMSS Congressional Affairs team is to support the organization and its chapters by building relationships with members of Congress and their staff, providing them with accurate information about health information technology and management systems in order to help them make effective public policy decisions. This mission is achieved through representation of board approved HIMSS Principles on Government Initiatives, and current needs and interests. In 2014, HIMSS updated these principles. The updated version can be found in the HIMSS.org Policy Center.

7. **HIMSS Health IT Policy Center**. The one-stop site for all your advocacy needs.

8. **Visit HIMSS Washington Office**. Visit us at 4300 Wilson Blvd, Suite 250 in Arlington, Virginia, to meet all HIMSS members’ advocacy needs. If you’re planning a trip to Washington, D.C., or need advocacy support, just contact the office at 703-562-8800.
The Legislative Process

There are several stages in the legislative process where grassroots advocacy efforts can impact the outcome. The following pages outline in narrative and diagrammatic form the process by which a bill becomes law. An exception is the budget process: legislation affecting many areas may be packaged into a massive budget reconciliation bill to meet budget goals. A budget process diagram also follows.

**Bill Introduction/Sponsorship** - Legislators can be encouraged to introduce a bill to address a specific issue, or to co-sponsor a bill introduced by another representative or senator. Obtaining a large number of co-sponsors on a bill is one strategy for gaining attention and credibility for an issue.

**Subcommittee** - The most important time for constituent involvement is the subcommittee stage. Legislators are not yet committed to specific bills or legislative language. Grassroots advocates can communicate their positions on the issue and suggest specific provisions or language. Action by constituents of subcommittee members can be very effective at this point.

**Committee** - Grassroots advocacy at the committee stage is also very important. Communications may focus on supporting or opposing specific language developed by the subcommittee; encouraging legislators to sponsor amendments; and asking the committee member to vote for or against the bill. Again, action by constituents of committee members can be most effective.

**Floor** - Constituent communication with all representatives and senators is important when it comes to the floor vote. Grassroots efforts at this stage focus on encouraging a legislator to either vote for or against the bill; to sponsor a floor amendment; or to vote for or against a floor amendment offered by another legislator.

**Conference** - Opportunities for grassroots impact are more limited at the conference stage. The Conference Committee works out the differences between similar bills passed by the House and Senate. However, grassroots communications—particularly from constituents of conferees—may influence whether the House or Senate provision is accepted in the compromise bill.

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**Public Policy 101**

“**All politics is local**”

Thomas “Tip” O’Neil
Former Speaker of the US House of Representatives
Floor - Once a conference committee has worked out the differences between the House and Senate version of a bill, floor passage is normally routine and not impacted by further constituent communication.

Federal Legislative Terms Glossary

Act - A bill after it has passed either the House or Senate or been enacted into law

Amendment - A change of a bill, motion, act or the Constitution

Appropriation - A formal approval to draw funds from the Treasury for specific purposes.

Authorization - A law creating a program and outlining funding. The authorization to actually draw funds from the Treasury and the amount to be drawn are established by an appropriation.

Bill - A proposed law.

Budget - The president’s annual proposal to Congress, usually submitted in January, for federal expenditures and revenues for the coming fiscal year (which starts October 1)

Budget Authority - Allows the federal government to incur a financial liability, typically a contract for direct payment, a loan, or a loan guarantee.

Budget Resolution - House and Senate-passed guidelines, and later caps, on federal budget authority and outlays. The Budget Resolution is not submitted to the President for signature or veto. It is considered a matter of internal congressional rules and procedure. Bills that would exceed budget caps are subject to a point of order - although waivers have been granted regularly in both House and Senate.

Conference Committee - The House and Senate appoint conferees to a conference committee to resolve difference between House and Senate-passed versions of the same legislation.

Conferees - Senators and representatives appointed to serve on the conference committee.

Co-sponsor - One of a group of senators or representatives who introduces a bill for consideration by Congress. The initial sponsor of the bill may send a “Dear Colleague” letter asking other Senators or Representatives to join in sponsoring the proposal. A large number of co-sponsors increases a bill’s chances for consideration.

Fiscal Year - The federal government’s fiscal year runs from October 1st through September 30th.
Hearing- Meeting of committees or subcommittees to gather information on the ramifications of proposed legislation, investigate problems or explore issues. Witnesses present testimony and answer questions.

Majority Leader- The leader of the majority party in the Senate is called the Majority Leader. The Majority Leader in the House is second in command of the majority party, after the Speaker.

Mark-up- Following hearings, members of a committee or subcommittee examine a proposed piece of legislation line-by-line to determine what additions, deletions or amendments should be made. This activity is referred to as “markup”. Often the chairman of the subcommittee will draft a starting proposal, referred to as the “chairman’s mark”.

Minority Leader -Leader of the minority party in the House or Senate.

Point of Order- An objection by a member of Congress that the pending matter or proceeding is in violation of the rules. The presiding officer accepts or rejects the objection, subject to appeal by the full House or Senate. The power of the presiding officer to rule on points of order, however, is stronger in the House than the Senate.

Report- A printed record of a committee’s actions and views on a particular bill or matter.

Speaker of the House- Presiding officer of the House, leader of the majority party in the House, and next in line to the Vice-President for succession to the presidency. The Speaker is one of the most powerful offices in Washington.

Whip- Senator or representative who serves as an internal lobbyist for the Republican or Democratic party to persuade legislators to support the party position, and who counts votes for the leadership in advance of floor action

Who’s Who on Capitol Hill

Administrative Assistant (AA) or Chief of Staff
The AA reports directly to the representative or senator, and usually is responsible for evaluating the political outcomes of various legislative proposals and constituent requests. The AA or chief of staff usually handles the overall office operations, including the assignment of work and the supervision of key staff.

Caseworker
The caseworker is the staff member usually assigned to help with constituent requests by preparing replies for the member’s signature. The caseworker’s responsibilities may also include helping resolve problems constituents present in relation to federal
agencies, e.g., Social Security and Medicare issues, veteran’s benefits, passports, etc. There are often several caseworkers in a congressional office.

Legislative Assistant (LA)
In most congressional offices, there are several legislative assistants and responsibilities are assigned to staff with particular expertise in specific areas. For example, depending on the responsibilities and interests of the member, an office may include a different LA for health issues, environment matters, taxes, etc.

Legislative Correspondent (LC)
The legislative correspondent reads, logs and tallies letters and other written correspondence from constituents and usually drafts the reply on the legislator’s behalf.

Legislative Director (LD), Senior Legislative Assistant, or Legislative Coordinator
The legislative director is usually the staff person who monitors the legislative schedule and makes recommendations regarding the pros and cons of particular issues.

Press Secretary or Communications Director
The press secretary’s responsibility is to build and maintain open and effective lines of communication between the member, his/her constituency, and the general public. The press secretary is expected to know the benefits, demands, and special requirements of both print and electronic media, and how to most effectively promote the members’ view or positions on specific issues.

Scheduler, Appointments Secretary of Personal Secretary
The scheduler is usually responsible for allocating a legislator’s time among the many demands that arise from congressional responsibilities, staff requirements, and constituent requests. The appointment secretary may also be responsible for making necessary travel arrangements, arranging speaking dates, visits to the district, etc.