



August 25, 2006

The Honorable Michael O. Leavitt  
U. S. Secretary of the Department of Health and Human Services  
200 Independence Avenue, S.W.  
Washington, DC 20201

Dear Secretary Leavitt:

We again respectfully request that the ABC Code set be *named* a national HIPAA code set. In a submission on October 10, 2005, we addressed the three criteria listed as “not met” and the two criteria listed as “partially met” in your HHS Review Committee Report.

In our cost-benefit analysis we provided *empirical data* on ABC codes in HIPAA transactions – including 500,000 field submissions (which you rejected). Yet, you accepted a few hundred *simulations* in your cost-benefit analysis of the ICD-10 Procedure Coding System slated for use in hospitals nationwide.

We have tried to correct false statements in the Report submitted by your HHS-appointed Review Committee regarding the cost-benefit analysis of ABC codes. However, your Review Committee has ignored this request. The ongoing procedural and contractual conflict of interest within your Department impacts a fair and impartial review of ABC codes and your ability to establish Transactions and Code Sets that will support all “covered entities” under HIPAA (see Attachment). An unbiased review committee, outside of HHS and the American Medical Association, needs to be established.

At a minimum, we request your extension of the 2003 HIPAA Exception (which was extended on December 17, 2005 and expires on October 16, 2006) to assure non-disruption of care in Alaska Medicaid, the Department of Defense, a New Mexico Medicare Advantage plan and other sites. A five-year extension will allow ABC Coding Solutions to develop a nationwide cost-benefit analysis to supplement existing empirical data. Please respond on or before October 16, 2006.

Your personal oversight of this request is imperative as your decision will impact Alaska and other state Medicaid agencies; Navy Chaplains and a DoD nursing project; seniors using alternative medicine, and millions of consumers seeking cost-effective and quality options to conventional medicine.

Respectfully,

Melinna Gianinni, President

CC: Members of the Senate Finance Committee and the Health Education, Labor and Pensions Committee; the House Committees on Energy and Commerce and Ways and Means Subcommittee on Health; Senators Pete Domenici, Michael Enzi, George Allen, Mary Landrieu, Hillary Clinton, John McCain, and John Kerry; Representative Dan Burton; United Healthcare, Aetna, Alaska Medicaid and Preferred Health Systems; the American Nurses Association; AARP; the Coalition for Patient’s Rights; the National Foundation for Women Legislators; the ChiroCode Institute; MetaNexus; American Healthcare Alliance; Zebec Data Systems; and CareVu Clearinghouse.