

Association for Healthcare Philanthropy

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Philanthropic Gift Giving To Continue Under New Clinton Medical Privacy Rules, as Incoming Bush Administration to Be Briefed by AHP on Benefits of Charitable Programs

WASHINGTON, D.C., (January 8, 2001) – The incoming Bush Administration will be asked to retain a key provision of President Clinton's new medical privacy regulations which will allow to continue the \$6 billion nonprofit philanthropic programs and foundations that hospitals and health providers have set up, the Association for Healthcare Philanthropy (AHP) said today.

Currently, AHP membership has access to the names and addresses of patients, and respects the confidentiality of that information through the AHP'statement of Professional Standards and Conduct and its companion Bill of Donor Rights, as well as various state and federal laws governing the use of patient information. The information is used to solicit charitable contributions from grateful patients and their families, which goes to fund pre-natal screening, free dental care, community clinics, hospice programs, drug discovery programs, cancer screening initiatives and mobile mammography vans, among other programs.

However, as part of an effort to give blanket protection to patient privacy, the Department of Health and Human Services (HHS) originally considered requiring patients to give their written consent before the patients' names and addresses would be released for fundraising purposes by the health care provider. An institution forced to perform a paperwork requirement like this at the time of admittance would be showing little sensitivity in a time of need and would likely be denied a patient contribution later, the AHP argued. AHP also estimated that the original HHS proposal could reduce philanthropic gift giving by as much as \$3.5 billion annually.

AHP, which represents 3,050 members who manage philanthropic programs in more than 1,700 nonprofit hospitals, medical centers and special institutions, conducted a focused lobbying campaign and membership letter writing effort at HHS and on Capitol Hill. The campaigns were successful and HHS left in place a provision that continues AHP member access to patient information to support nonprofit philanthropic health care programs. These programs totaled almost \$6 billion in the latest year (1999).

Now, the AHP will shift its attention to the incoming Bush-Cheney Administration, with meetings sought by the Association to brief transition team leaders and the new head of HHS and his or her deputies.

In his previous lobbying effort, AHP President and CEO William C. McGinly told lawmakers that if "HHS denies us access to patient demographic records, nonprofit hospitals – which already work on razor thin budgets – will be unable to raise funds for nonprofit health care programs from grateful patients, the life blood of philanthropic gift giving." McGinly cited numerous examples from his membership that documented where HHS' original privacy proposals would hurt the support for health care programs. For instance:

Texas could lose \$500,000 in contributions with programs for Prostate Screening, Shots for Tots Immunization, and Indigent Mammography Programs being eliminated;

Florida could lose \$500,000 in contributions, which would end programs such as Hospice Indigent Care, Companion Aides, and Mobile Care Free Clinics;

California could suffer a decrease in medical funding of 28% with affected programs including Trauma, Cancer and Orthopedics.

On behalf of AHP, McGinly will send a letter to and seek a briefing meeting with, the new Secretary of HHS, asking that the agency allow its new privacy rules to stand, which will help fundraising activities of nonprofits and access to patient information to continue. Meetings with and a briefing for the Bush-Cheney transition team will also be arranged.

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Established in 1967, AHP is a nonprofit organization whose 3,050 members manage philanthropic programs in the nation's nonprofit health care providers. An estimated 75% to 80% of the US population resides in the areas served by these providers, which include community hospitals and medical centers (59%), multihospital systems (14%), specialty institutions (8%), academic institutions (5%), long-term care facilities (5%), and other nonprofit facilities (9%).

For more information on AHP and its work on HHS Privacy Rules, visit the Government Relations section of the AHP web site.