How to Use the Digital Edition of AHIMA Advantage

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HIM: At the Core of CDI

The purpose of a clinical documentation improvement (CDI) program is to initiate concurrent and, as appropriate, retrospective reviews of health records for conflicting, incomplete, or nonspecific provider documentation. Ultimately, the goal is to identify clinical indicators to ensure the diagnoses and procedures are supported with appropriate ICD-9-CM codes (soon to be ICD-10-CM/PCS codes).

Clinical Documentation: A Foundation For Quality Care

Documentation improvement programs were formed in an effort to work with care providers to appropriately reflect the quality of patient care while increasing accuracy in coding and reporting. Health information management (HIM) and clinical staff form the core of CDI programs working within a multidisciplinary team to provide guidance on documentation challenges.

A CDI program offers many advantages for a healthcare facility, including:

• More clearly identifying the risk of mortality and severity of illness
• Improved outcomes data
• Accurate and appropriate reimbursement for services provided

In addition, precise, thorough clinical documentation provides a defense for regulatory compliance reviews, including Recovery Audit Contractors (RAC) and Medicaid Integrity Contractors (MIC).

Effective CDI efforts require in-depth knowledge of documentation requirements, coding classification standards and guidelines, and reporting requirements. An understanding of clinical records is also necessary. AHIMA offers a robust portfolio of resources to support CDI practitioners in these initiatives.

Learn more inside about AHIMA’s CDI Resources!

CDI Resources

Quality clinical documentation in a health record is vital to the patient, physician, and healthcare facility, and provides a foundation for quality care.

Video

Welcome to the June 2012 issue of AHIMA Advantage. This video clip is a summary of the 2012 Hill Day event. See page 7 for a complete wrap up of the event.

LOOK INSIDE!

HIM Professionals Guard Privacy and Security
Finding the True Meaning of Meaningful Use

When Teresa Hall, MHA, RHIT, CPC, began a new job as HIM director at MultiCare Health System in Tacoma, WA, she was very interested in learning more about the meaningful use federal incentive program for EHR adoption.

“MultiCare had already attested to stage 1 of the meaningful use program and received incentive money,” she said. Next up for their company was preparing for stage 2. When Hall looked at the Federal Register, she said, “it was overwhelming.”

So when she heard about the AHIMA Stage 2 Meaningful Use Workgroup, Hall became a member. One of the big lessons she learned was to understand the federal government’s ultimate goal—nationwide health information exchange to improve health outcomes.

“For the federal government, the bottom line is quality of care,” Hall said. “They aren’t going to pay us anymore for our mistakes. The quality of the documentation is our proof that we provide quality care. And the meaningful use objectives are the template.”

Looking for the “meaning” of meaningful use? Look to AHIMA for updates and guidance on meaningful use. Like Hall, you can also work with other AHIMA members to advance HIM practice.

Essentially, stage 2 pushes hospitals and doctors to increasing sophistication in the use of health information technology, such as providing patients electronic access to their health information and encouraging electronic health information exchange between providers.

Stage 2 NPRM Released in May
On February 24, 2012, The Centers for Medicare and Medicaid Services (CMS) released a Notice of Proposed Rule Making (NPRM) for stage 2 of meaningful use. The program provides criteria that eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) must meet in order to qualify for Medicare and/or Medicaid EHR incentive payments. Eventually, providers and hospitals who fail to demonstrate meaningful use of EHRs will face payment adjustments under Medicare.

AHIMA staff and members crafted a response to the stage 2 NPRM in May. Among other issues, the letter discussed the proposed requirement for patients to “view online, download, and transmit their health information” and the need for consistent federal quality reporting requirements.

Jennifer F. Miller, MHIS, RHIA, HIM director and compliance officer at Loma Linda University Health Care, in Loma Linda, CA, is a member of AHIMA’s Meaningful Use NPRM Response Team. Through her AHIMA

continued on page 3
We’ve combined the advanced coding expertise of A-Life Medical and Ingenix with the unique perspective and advanced capabilities of Optum, a leading provider of integrated health services.

Together, we can help your organization streamline ICD-10 preparation and implementation with our advanced computer-assisted coding (CAC) solution. Powered by our patented natural language processing technology LifeCode®—the only NLP in the industry that understands the syntax and semantics of medical records to abstract clinical facts with their full context—the Optum CAC solution delivers faster, more accurate results for faster, more accurate returns.

Our CAC solution has helped clients achieve proven results, including reduced denials, accelerated reimbursements, and improved case mix index. See how our CAC solution can help you achieve similar results and capture the revenue you’ve earned.

Learn how Optum CAC helped one hospital system eliminate coding backlog, increase CMI, and reduce DNFB days. Watch the video at www.optum.com/CACvideo.

For more information: www.optuminsight.com/cac | insight@optum.com | 866.306.1317

A-Life Medical and Ingenix are now OptumInsight™, part of Optum™—a leading health services business.

Optum™ is an information and technology-enabled health services business platform serving the broad health marketplace, including care providers, plan sponsors, life sciences companies, and consumers. Its business units—OptumHealth™, OptumInsight™, and OptumRx™—employ nearly 30,000 people worldwide who are committed to enabling Sustainable Health Communities.
volunteer activities (she is also co-chair of the AHIMA Physician Practice Council), on-the-job experience, and discussions with her vendor, Miller has gained perspective on the meaningful use program.

“Not all the measures are as clear as you would like them to be,” Miller said. “Be open to ideas and discussion within your own group, and reach out to the industry and hear what other providers are doing. That has helped my organization come to our conclusions and decide how we will proceed.”

Hot Topics You Need to Know
New Patient ROI Requirement
One of the biggest changes to stage 2 relates to the release of information to patients. Under stage 1, providers and hospitals would have “provided an electronic copy of patient’s information” when requested, presumably to a portable device, like a jump drive.

Now, under stage 2, providers and hospitals must give patients the ability to “view online, download, and transmit their health information” three days after discharge. Instead of contacting the HIM department directly, a patient might view information through an online patient portal. This change is potentially less burdensome on the HIM department’s workflow processes. However, questions remain about what information the patient should have access to within that three-day window.

Brenda Williams, RHIA, HIM operations manager of the HIM department at EvergreenHealth in Kirkland, WA, has helped her organization offer patients electronic access to their health data by a secure portal administered by a vendor.

“Patients want information more quickly than ever before.” Williams said. “One potential outcome, as you begin offering electronic access to patients at your organization, is that you may find that patients have to be educated. Lab records, for example, typically don’t come in for several days or even weeks.”

As far as meaningful use’s emphasis on a three-day window for information availability, that will likely call for a culture change throughout the healthcare industry. “It’s a paradigm shift, in my opinion,” Williams said. “Once systems are up across the nation, and people see how information flows, they’ll think, ‘Why didn’t we do this sooner?’ ”

Alignment of Quality Measures
Meaningful use shares some of the same clinical quality measures as the accountable care organization reporting requirements. That’s a step in the right direction. But most federal programs ask for different variations. “It would be a relief if we could report the quality measures to just one entity,” Hall said.

AHIMA continues to advocate for the alignment of the quality measures for meaningful use with other quality
reporting programs, such as the hospital inpatient quality reporting (IQR) program and the physician quality reporting system (PQRS). Simplifying reporting requirements will reduce the current burden on hospitals and providers.

**Information Sharing**

With stage 2 meaningful use requiring providers and hospitals to engage in health information exchange with others, the risks of breaches increase. Now, the ability to know who you’re sharing information with becomes even more important.

“We have a responsibility to patients to keep information confidential and secure,” said Williams, who was a member of AHIMA’s HIT Structural Measures (stage 2) Eligible Professionals Workgroup.

As you transition to your EHR, ask: How do you ensure that the person accessing a patient portal should be accessing information? How do you ensure that an employee at another entity has a business need to access that record? How do you give access to just the records an entity needs access to within your system?

**Inconsistent Reporting**

Consistency, quality, and comparability of data is paramount if we are to successfully achieve real, nationwide health information exchange. When providers and hospitals report data to CMS to meet meaningful use requirements, they should be pulling the same data and populating comparable data in their numerators and denominators.

To address this need, the Office of the National Coordinator for Health Information Technology (ONC) published an NPRM for Standards, Implementation Specifications, and Certification Criteria for Electronic Health Record Technology. AHIMA wrote its [response to the proposed rule](https://ahima.org) in May.

Aside from following the standards discussion, conduct internal audits to be sure the information you are reporting to CMS is meeting their quality measures and thresholds. Hall recommends running reports constantly to ensure you are pulling the right data, continually tweaking and fine-tuning with your vendor, as well as working through your organization’s education department to do the training.

**Health Information Exchanges**

As regional HIEs become operational across the country, learn how they may be interacting within your organization—locally and in your state.

In fact, HIEs can impact your ability to meet meaningful use objectives, according to Miller. Loma Linda University Health Care is participating in its local HIE, Inland Empire Health Information Exchange.

“The HIEs become very important to watch in terms of lab interfaces,” Miller said. “There are so many different labs in communities and across the state, and it’s cumbersome to build an interface with every single lab. So the HIEs will be critical for us to receive lab information, as well as other information, as our patients move through the state.”

In addition, HIEs are becoming a new source of jobs for HIM professionals. In the past year, at least two HIEs have hired an HIM professional as executive director. However, HIEs may be looking for skill sets that go beyond traditional HIM skill sets. To ascertain the staffing needs of HIEs, AHIMA joined with the Healthcare Information and Management Systems Society (HIMSS) to create the HIMSS/AHIMA HIE Staffing Model Environmental Scan Joint Workgroup. The group developed a survey and interviewed 35 HIEs across the nation. A white paper summarizing the results will be published this September.

**More Meaningful Use Resources**

- **Look for** an updated meaningful use vocabulary resource guide in the [Meaningful Use Toolkit](https://ahima.org).
- **Find** a new edition of the book, *Electronic Health Records: A Practical Guide for Professionals and Organizations* with the latest information on meaningful use and the federal HITECH rule that created it.
- **Log onto** ahima.org to discover a range of free policy and analysis resources on the evolution of meaningful use.
- **Read** the *Journal of AHIMA* for meaningful use news and practical guidance.
- **Listen** to a rebroadcast of an audio seminar on the NPRM for meaningful use stage 2.
Seriously, You Can Learn ICD-10: Trainer Says

You can learn ICD-10-CM/PCS. Kim Felix, RHIA, CCS, knows you can—and she knows from experience. As an AHIMA-approved ICD-10 trainer and director of education and training, coding/HIM consulting, EMR and Abstraction Division at IOD, Felix has begun working with healthcare facilities to train and transition employees to ICD-10. While it is a new code set, and in-depth training is required, Felix says HIM and coding professionals shouldn’t find ICD-10 “terrifying.”

As the director of coding education and training at IOD, Felix trains both in-house coders and coders in the field. The specific education ranges from taking audit results and building it into an education platform to providing coders with a refresher on anatomy and terminology (A&T). “You have heard the term A&P for anatomy and physiology, but terminology is the more relevant term for coders,” Felix said. “They need to know the verbiage of medical terminology.”

Felix and a co-worker write all the online education her company offers on ICD-10-CM/PCS. It was important for her to shepherd the creation of that program, since she is a coder herself. “I really wanted it to be written by people who code, for people who code,” she said.

A Passion for Coding

An HIM professional for over 20 years, Felix started out as a coder after graduating from Temple University with a degree in HIM and landing her first job with the University of Pennsylvania Health System. “I had a wonderful mentor there who just kind of got me sucked in and I really became a true coding nerd,” Felix said. “I became very passionate about it.” That passion remains today, undeterred by the daunting challenges ICD-10 brings the coding profession. She sees the change as an opportunity to upgrade to a better code set.

Even though even she admits the “days of memorizing codes is over” due to the high number of codes contained in ICD-10, the differences between ICD-9 and ICD-10 are not vast. “I thought this was a completely new animal and I’d have to learn from square one, and that is not the case,” she said. “So many of the guidelines are identical to ICD-9. That is something in any of my education sessions I make very clear to the coders.”

In addition to coding, Felix has worked as a coding supervisor, had roles in revenue cycle management, and eventually moved on to teaching coding at the university level. Teaching became her second passion. “I just loved it, I embraced it,” she said. “I loved seeing students have their ‘a-ha!’ moment,” she said. “The light bulb moment when they actually got coding.” Felix’s goal with each classroom is to motivate students and get them excited about coding. “My goal was to take the person who was the crankiest in the class and make them smile once, and actually have the light bulb moment,” she said.

Staying in the Trenches

In 2006 Felix moved into her current position with IOD but has continued to work as an adjunct professor of coding at various universities. Keeping one foot in education and one foot in the coding field will keep any professional sharp. “You have to keep your hands in the trenches somehow,” Felix said. To ease her staff and clients into ICD-10, Felix distributes weekly education tips that often focus on ICD-10. While the proposed ICD-10 delay has caused some to back off ICD-10 training, others are moving full steam ahead. Clinical documentation improvement audits are a hot item at IOD, as facilities realize they need to amp-up their documentation in order to supply the necessary information for the more specific ICD-10 codes.

While it is understandable that some coders would be intimidated by ICD-10, there is no reason for anyone to be scared of the new code set. Yes, the PCS code set is cumbersome and difficult to learn, Felix admitted. But not all charts have a procedure to code, and coders can lean on their code books and encoders for help. Cheat sheets will come in handy again for even experienced coders, she said. “Coders are creatures of habit, but they will find a way to streamline (ICD-10) and put their little tricks in there,” she said. ICD-10 CM/PCS can be learned, she assured. “The better ICD-9 coder you are the better ICD-10 coder you will be,” Felix said. “Granted I can’t punch in the number anymore, I can’t memorize it right away, but I know the guidelines and that is going to save me a little bit of time.”

“So many of the guidelines are identical to ICD-9. That is something in any of my education sessions I make very clear to the coders.”
AHIMA’s Convention and Exhibit: The Next Stop to Health Innovation

Plan now to attend AHIMA’s 84th Convention and Exhibit, September 29–October 4, in Chicago, IL. Get ready for unparalleled educational sessions, unlimited networking opportunities, and immense fun. Get set for a stellar event with inspirational and motivational presenters and speakers.

Already this year, HIM professionals have been impacted by significant changes within the healthcare industry—proposed delays in ICD-10 and HIPAA 5010, meaningful use, and EHR implementation, to name a few. The AHIMA Convention and Exhibit provides the perfect opportunity to catch up on the latest, learn how recent industry changes are likely to affect HIM, and prepare for what’s coming.

At this year’s convention, attendees will learn to lead and manage the changes in healthcare with innovative thought and action by exploring current and emerging issues affecting HIM’s transformation. This week-long event has everything HIM professionals need to excel.

You’ll be enlightened during educational tracks focused on ICD-10, HIE, ACO, privacy and security, CAC, meaningful use, clinical documentation improvement, EHR implementation, physician practice, revenue cycle, and other emerging issues. There’s also the opportunity to visit some of the nation’s leading hospitals and medical centers with site visits to Cermak Health Services of Cook County, a correctional healthcare facility, Loyola University Hospital, Mt. Sinai Hospital and Schwab Rehabilitation Hospital, Northwestern Memorial Hospital, and the brand new facilities for Rush University Medical Center and the Ann and Robert H. Lurie Children’s Hospital of Chicago.

Exciting Speakers Take Center Stage

You’ll be inspired by general session speakers, including: the nation’s first chief technology officer Aneesh Chopra; vascular surgeon, healthcare executive, scholar, and author John W. Kenagy, MD, MPA, ScD, FACS; and special assistant of innovations and research at the Office of the National Coordinator for Health Information Technology Wil Yu. Also, Emmy award-winning co-host of “The View,” Joy Behar, in her presentation, “Innovation, Inspiration, Change,” will share how at age 40 after a divorce, getting fired from her job, and a near-death experience, she realized it’s never too late to start and began her journey to success.

New This Year

The Health Information Innovation Leadership Conference will convene recognized leaders for presentations and networking to showcase innovative progress in workforce development, technology, and education that will transform healthcare information and the delivery of healthcare services.

You also won’t want to miss old favorites like the AHIMA Foundation Silent Auction which allows you to provide important support to HIM students while picking up some great items. The exhibit hall will feature more than 215 exhibitors, providing information on the latest and greatest products available to help HIM professionals advance their organization and the profession. And this year’s Appreciation Celebration: President’s Premier Party will return you to the roaring 20s—Chicago style. Slap on your fedora and flapper dress and get ready to dance the Charleston, enjoy a full buffet dinner, and get your fill of giggle juice and bathtub gin.

Plan to come early and stay late to expand your learning opportunities with pre- and post-convention meetings such as the clinical coding meeting, privacy and security institute, as well as workshops covering a vast array of subjects including Certified in Healthcare Privacy and Security and Certified in Health Data Analysis exam preps. There’s also a special not-to-be missed pre-convention workshop on September 29 titled, “What is Your Thinking Style: Using Ned Hermann’s Whole Brain Model for Effective ICD-10 Implementation.”

With all that in mind, it’s hard to imaging needing another reason to attend. But, just in case, here’s one more: this year’s convention is in Chicago. A world-class city, Chicago offers world-famous dining, entertainment, attractions, shopping, and culture. Sitting along the beautiful western shore of Lake Michigan, Chicago also boasts one of the nation’s most scenic skylines.

The 84th AHIMA Convention and Exhibit is your one-stop place to gather all the career-advancing information you need. You can earn up to a year’s worth of continuing education units too. Plan now to attend. AHIMA has secured special rates at some of Chicago’s finest hotels for convention participants. Visit ahima.org/convention for more information and to reserve your hotel accommodations. ❧
2012 Hill Day Introduces a New Social Media Element

AHIMA’s annual Hill Day is the association’s premier advocacy event that brings together AHIMA members from across the country to Washington, DC, for the sole purpose of advocating for AHIMA and the HIM profession. HIM professionals face a range of issues that impact their jobs on a daily basis and Hill Day provides the opportunity to tell policymakers and their staff members about those issues. Nearly 200 AHIMA members from 42 component state associations made the trip to Washington so that their voices could be heard.

This Year’s Key Issues
AHIMA’s Hill Day advocacy efforts focused on three key issues:

- **AHIMA**—expanding congressional awareness of who we are, what we do, and the important role of health information management professionals.
- **ICD-10**—insuring that Congress was made aware of AHIMA’s opposition to any effort to delay the October 1, 2013 compliance date for ICD-10.
- **Patient data matching**—encouraging members of Congress to sign a letter to the Government Accountability Office and directing them to complete a study on patient data matching mechanisms and strategies.

A New Social Media Component
AHIMA’s Hill Day attendees participated in educational webinars during the months leading up to Hill Day to provide them with a strong and thorough knowledge of the issues to be brought before Congress. AHIMA also provided webinars on the issue sets as well as social media and advocacy for Hill Day first timers.

The social advocacy focus was new for AHIMA and was only a small part of new elements brought to our 2012 Hill Day. These ideas took on a much grander scale in 2012 by enabling our attendees to not only interact with policymakers in Washington, but to also interact with their peers who could not attend Hill Day through the use of various social media outlets like Facebook and Twitter. AHIMA’s Washington event started with AHIMA’s Team Talks on March 26. Following AHIMA’s Team Talks, our March 27 Hill Day began with a new event, a breakfast on Capitol Hill in the Rayburn House Office Building. The Hill Day Breakfast was sponsored by MetaHealth. The breakfast was headlined by Representative Mike Rogers (R-MI) who gave an inspiring talk on the importance of advocacy as well as the engagement of individual citizens with policymakers.

Congressman Rogers was not the only highlight that morning, as several members of Congress and over 20 congressional staff members from different offices sat with the Hill Day attendees from their respective states to discuss advocacy and issues. This novel approach provided our HIM professionals the ability to interact with staff and acquire first-hand knowledge about effective approaches for advocacy before they even went to their meetings.

Maintaining the Momentum
Through the years, Hill Day has spawned many outstanding legislative opportunities for AHIMA. This year was no different, as our members were regularly complimented by congressional offices for their knowledge, approach, demeanor, and the informational resources that they provided. Creating relationships between our members and policymakers opens the door for not only AHIMA’s issues, but for our attendees to become expert resources on issues impacting health information management. Ultimately, this only represents the beginning of what we can accomplish in the months and years to come. Our members were excited about their accomplishments; to watch a video of their Hill Day experiences visit AHIMA’s YouTube channel, AHIMA on Demand.

AHIMA’s Hill Day has inspired many states to plan advocacy days in their state capitols. If you are interested in planning a CSA advocacy day in your state, AHIMA has the tools and resources to help—from a step-by-step guide to planning the day to discussing how to introduce social media into your event. If you have any questions, please do not hesitate to contact AHIMA’s director of government relations Don Asmonga, at (202) 659-9440.
Vote Now in the 2012 Election
The polls are now open for the AHIMA election and will close on June 22 at 11:59 p.m. (CT). Active members (student members are not eligible) will be able to cast their vote via iVote. The ballot includes the candidates’ photos, position statements, and detailed bios. The June Journal of AHIMA includes the candidate’s brief bio and photo and the AHIMA Community of Practice topic contains a more detailed profile of the candidates and their position statements. Vote now and encourage your colleagues to vote as well.

Plan to Attend the 2012 Leadership Symposium
AHIMA’s Leadership Symposium is July 13–15 in Chicago, IL, at the Swissotel. This three-day event engages AHIMA volunteers, CSA leaders, and central office coordinators/directors in strategic direction, envisioning the future, and HIM focus. Attendees will sharpen their association management competencies and participate in continued discussion on the roles and functions of the House of Delegates. Learn more.

Participate in AHIMA’s New Mentor Program
As a member of AHIMA, you belong to a community of HIM professionals and industry leaders with a powerful commitment to this important work. To better impart your knowledge and passion to the next generation of HIM professionals, AHIMA’s latest member benefit is a new and improved mentor program.

The mentor program will pair interested members with more experienced mentors who can answer questions, provide insight, and offer guidance about advancing your HIM career. Interested members should e-mail Erin Duvic to be assigned a mentor. If you are interested in becoming a mentor and sharing your knowledge and skills, contact Erin Duvic. We will add you to our mentor list and you can help make a difference.

Save the Date: Free Career Prep Webinars
AHIMA is committed to the success of its members. We want to prepare students and new grads for landing that first job and beginning their HIM career. We also want to empower more seasoned professionals to seek a promotion or apply for a new position. AHIMA’s new free Career Prep Webinar Series aims to do just that. The webinars will be facilitated by career coach Lyne Tumlinson, CAE. The session, “5 Prep Steps for Job Interviews that Rock,” will take place on June 20 from 1–2 p.m. CT. The session, “From First Job to Career Success” will be held July 18 from 1–2 p.m. CT. Learn more.

AHIMA’s New Student Advisory Council Announced
AHIMA staff was incredibly pleased with the response to the recent call for volunteers to apply for AHIMA’s Student Advisory Council. AHIMA received many applications from impressively qualified student members. The 2012–2013 Student Advisory Council members are:

- Sebrina Campbell—Saint Louis University
- Kimberly Palma—Herzing University Online
- Alicia Patrick—Temple University
- Steve V. Stevens—Illinois State University
- Samantha Thomas—ITT Tech
- Kayla Zirbes—The College of St. Scholastica

If you applied for the SAC but were not selected, AHIMA will have other volunteer opportunities for students in the upcoming year. Stay tuned to future issues of AHIMA Advantage for more information about how you can get involved.

MHIMA Announces Scholarships and Awards
The Michigan Health Information Management Association (MHIMA) announced news regarding awards and scholarships. MHIMA awarded four Michigan Medical Record Charities Scholarships of $750. Recipients of the...
AHIMA Celebrates New Fellow
Recently, the AHIMA Fellows welcomed a new member to their prestigious group, bringing the total number of Fellows to 112. The latest AHIMA member to become a fellow is Nancy K. Coffman-Kadish, MS, RHIA, CAPM, FAHIMA.

The Fellowship Program was established in 2001 to recognize AHIMA members who make significant and sustained contributions to the profession. Individuals who earn fellowship may use the designation Fellow of the American Health Information Management Association (FAHIMA), and their names are maintained in the AHIMA Registry of Fellows. The next application deadline is August 31. Learn more and view a complete list of Fellows.

Renewal Notice for AHIMA Approved ICD-10-CM/PCS Trainers
Certificate renewal is required for all AHIMA-approved ICD-10 trainers by June 30. A fee of $199 is due upon renewal and includes two web replays (a $358 value), an electronic copy of the 2012 instructors guide (a $75 value), and a self-review worth four continuing education units. After June 30 a $50 late fee will be added and you will not be listed on the Web page or have access to the 2012 instructors guide. Learn more.

Renew Your AHIMA Membership Today
There are three easy ways to renew your AHIMA membership: online, by mail, or by phone at (800) 335-5535. AHIMA is committed to your success and provides the benefits and resources to enhance your career. Renew your membership today and continue to utilize AHIMA’s many benefits, including the Journal of AHIMA, AHIMA Advantage, legislative updates, professional development, discounts on education, certification, publications, and other products and services such as Communities of Practice and the AHIMA Body of Knowledge. We look forward to another year of partnering with you to support your professional endeavors and deliver opportunities to advance your career.
Industry Leaders, AHIMA Members to Judge Grace Award

A panel of seven distinguished judges, including HIM industry leaders and AHIMA members, will review applications for the AHIMA Grace Award: In Recognition of Excellence in Health Information Management to determine recipients of the inaugural award.

Announced in March during Health Information Professionals Week, the award will recognize healthcare delivery organizations that demonstrate effective and innovative approaches in using health information to deliver high quality healthcare. The award is named for AHIMA founder Grace Whiting Myers.

The judges include:

- Gloryanne Bryant, BS, RHIA, CCS, CDIP, CCDS, AHIMA Approved ICD-10-CM/PCS Trainer, regional managing HIM director for Kaiser Permanente, Kaiser Foundation Health Plan, Inc. & Hospitals
- Richard Correll, MBA, president and CEO, College of Healthcare Information Management Executives (CHIME)
- Thomas C. Dolan, PhD, FACHE, CAE, president and CEO, American College of Healthcare Executives (ACHE)
- Rose Ann Laureto, MA, F HIMSS, FCHIME, vice president and CIO, University of North Carolina Health Care System
- Barbara Odom-Wesley, PhD, RHIA, FAHIMA, AHIMA past-president and past AHIMA Triumph Award chair; HIT program chair for DeVry University
- Helga Rippen, MD, PhD, MPH, FACP QM, chief health information officer and vice president, WESTAT; chair, Executive Council, HealthITxChange
- Julie Wolter, MA, RHIA, FAHIMA, co-chair of the AHIMA Consumer Health Practice Council and associate professor at St. Louis University

“We are thrilled to have these highly-regarded healthcare leaders participate as judges in the first year of this distinguished award,” said AHIMA CEO Lynne Thomas Gordon, MBA, RHIA, FACHE. “They all know health information management, and each has a unique perspective on the industry.”

Promoting HIM Excellence

These perspectives will help the judges select the best of the best HIM practices. “Excellence in HIM is a critical component in quality patient care,” said CHIME’s Correll. “It’s just not the responsibility of one department; it’s an integral part of the healthcare system. Not only do HIM practitioners protect the privacy and security of patients’ health information, but they are the stewards of trusted data that have many public health implications. The AHIMA Grace Award offers an opportunity for the best organizations to showcase their HIM staff and spotlight their innovative approaches to HIM.”

The application deadline is June 30. Applications are available here. The award will be presented at the 84th AHIMA Annual Convention and Exhibit in Chicago September 29–October 4.

Evaluation criteria include:

- How organizations use health information to contribute to a patient-centered model of care
- How they use and advance electronic health records
- How HIM is integrated throughout the workplace
- Plans for improvement of health information and how this will improve the quality of patient care
- Recent innovations in health information that distinguish the organization amongst its peers
- Opportunities for continuing education and development for HIM employees

“We have seen a tremendous response to this new award from members, many of whom have award applications in progress,” Thomas Gordon said. “We are eager and excited to learn about the many different ways HIM practitioners contribute innovative and outstanding approaches to the profession.”

The award is one element of AHIMA’s broader awareness campaign to reach employers and help them better understand the value of hiring credentialed HIM professionals. The campaign is being supported with ads appearing online and in Health Leaders, Healthcare Financial Management, Healthcare Executive, Hospital & Health Networks, and Modern Healthcare throughout 2012. In addition, advertisements are running to promote the Grace Award.

Whiting Myers founded AHIMA in 1928 in partnership with the American College of Surgeons who wanted to “elevate the standards of clinical records in hospitals and other medical institutions.” This recognition of the importance of medical record quality to patient care and research guides AHIMA today.

Members can learn more about nominating their employer for the Grace Award and the related benefits here and in AHIMA’s publications, including the Journal of AHIMA. The application deadline is June 30. Award recipients will be notified this summer and will be invited to the award presentation during the AHIMA Convention in Chicago.
Sharing What Works: A Look Inside Successful HIM Student Clubs

AHIMA’s Student Advisory Council (SAC) recently launched a new HIM club toolkit to promote the development of local HIM student clubs at campuses across the country. HIM clubs help to better engage students than classroom participation alone. HIM clubs add to the educational experience not only by generating enthusiasm about the industry, but also by providing a forum for students to gather, share ideas, and connect to the profession outside of their mandatory coursework.

Framework of a Successful HIM Club

Some schools with CAHIIM-accredited programs already have HIM student clubs. These clubs are a valuable resource to those looking to get a club started at their school. One example of a club’s success is at the University of Pittsburgh (Pitt). Pitt’s HIM club has existed for several years but only recently became an official student organization on campus. It has 28 student members, who are all currently juniors. To grow the club, they have also reached out to incoming freshman, sophomores, and other students campus-wide who may have an interest in HIM.

In the past year, the club has focused on fundraising like holding bake sales, washing cars, and selling candles. Specifically, the club members are working to raise money to attend AHIMA’s annual convention. In the future, they also hope to use some funds to bring in speakers and hold a formal banquet with alumni from the school’s HIM program.

Sarah Christian is a student at Pitt and president of the school’s Health Information Management Student Association (HIMSA). “Being involved in HIMSA is an opportunity to use our peers as a resource. It is great to build relationships with peers outside of the classroom where we can learn from each other and encourage each other to succeed,” Christian said. “Students can also gain leadership experience and network with past graduates through HIMSA.”

Another school with a successful HIM club is Southwestern Oklahoma State University (SWOSU). Ashley Worlund is the club’s secretary and philanthropy chair. SWOSU’s HIM student club currently has about 15–20 active members. “The club gives the students a chance to spend time together outside of class and we can turn to each other for advice or to share concerns. It helps us form stronger bonds before we graduate and get into the field,” Worlund said.

SWOSU’s HIM club also participates in fundraising activities like bake sales and volunteers at the Special Olympics, Relay for Life, and reading to young children. While this work is important, SWOSU students in the club value their friendships as well. “Fellow club members are some of my closest friends now. I love getting to spend time with them eating pizza, listening to their ideas, and prepping for club activities,” said Worlund. “It also provides a way to connect our junior and senior classes. I probably never would have known the seniors if it wasn’t for meeting them through the club.”

Start Your Own HIM Student Club

Is your school missing an HIM student club? Start your own! Christian and Worlund have some advice for getting a club going on your campus. “It is a lot of fun but a lot of hard work, so be willing to ask for help from peers and faculty,” Christian said. She also recommends finding out what student organization resources such as poster boards, funding, and organizational tools are available at your school and using them when possible.

Worlund agrees. “Never give up. I thought the club was going to end up with hardly anyone since the seniors left, but I’m happy that the juniors have stepped up to keep the club going,” she said. “Another big thing that helped was advertisement like putting flyers up throughout campus, having a Facebook page, sending e-mails, and writing dates on boards in different classrooms where interested students may be,” said Worlund.

For more information on making your HIM club dream become a reality, check out the new HIM club toolkit.
AHIMA Rolls out New Credential, Updates Guidelines for Existing Credentials

In response to industry demand, we have developed a new credential—the Clinical Documentation Improvement Practitioner (CDIP). Now more than ever, a CDIP certification can help move the industry forward to achieve the goals of RAC audits, ARRA HITECH, and other initiatives that aim to improve the quality of healthcare. Many acute care hospitals have already initiated documentation improvement programs and processes, and more experts are needed to initiate, implement, and maintain these CDI programs and processes in order to ensure long-term, high-quality documentation. This certification will assure the competency of individuals who capture the documentation necessary to fully communicate the patient’s health status and conditions. Learn more about CDIP eligibility requirements and exam pricing.

RHIA, RHIT Candidates: Don’t Miss out on Early Testing
Students now in their final term of study and graduating at the end of the current term are eligible to take advantage of early testing. To apply for early testing, candidates must submit a paper application. Early testing candidates must also include a signed verification form from the program director. Then upon graduating early, testers must submit a copy of their official transcripts to complete the certification process. Learn more.

CCA, CCS, CCS-P Exam Updates
Beginning in 2013, the CCA, CCS, and CCS-P exams will also be undergoing some changes. As you may know, the CCS and CCS-P exams recently launched with new alternate item types. Learn more about the new alternate item types.

CCHIIM has also been working on expanding the eligibility requirements for the CCA, CCS, and CCS-P exams. The new requirements will not go into effect until January 1, 2013. Beginning in 2013, the eligibility requirements will be the following:

CCA
Required
• High school diploma or equivalant
(No change)

Training and Recommendations
(expanded)
• Six months of coding experience directly applying codes; or

• Completion of an AHIMA-approved coding program; or
• Completion of other coding training program to include anatomy and physiology, medical terminology, basic ICD diagnostic/procedural and basic CPT coding.

CCS and CCS-P
Candidates must meet one of the following:

• By credential—RHIA, RHIT, or CCS/CCS-P
• By education—Completion of a coding training program that includes anatomy and physiology, pathophysiology, pharmacology, medical terminology, reimbursement methodology, intermediate/advanced ICD-10 diagnostic/procedural and CPT coding
• By experience—Minimum of two years related coding experience directly applying codes
• By credential with experience—CCA plus one year of coding experience directly applying codes
• Other—Coding credential from other certifying organization plus one year coding experience directly applying codes.

Contact AHIMA’s certification department with any questions.

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House Team Highlights Accomplishments

The House of Delegates (HoD) is a grassroots AHIMA member forum that governs the HIM profession. Comprised of delegates elected or appointed from each of the 52 Component State Associations (CSAs) and the AHIMA Board of Directors, the House is chaired by the Speaker of the House and is organized into six teams which are led by co-chairs. These six teams provide a forum for delegate discussion, debate, and problem solving to advance the HIM profession. The 2011–2012 HoD have shown active participation and CSA representation on the House teams which were vital to the success and achievement of the teams’ charges. Through their hard work and dedication, we would like to highlight the 2011–2012 HoD accomplishments:

1. Best Practices, Standards
   - Supported work on revising the resolution for “Managing the Master Patient Index in an Integrated Delivery System”
   - Recommended revisions for two resolutions: Advocating for Quality Documentation and Adherence to Official Coding Guidelines and Healthcare Organizations Most Create Consistent Privacy and Security Practices
   - Provided feedback on various practice briefs and statements for AHIMA
   - Provided recommendations to support the transformation efforts of Action Community for Excellence (ACE) program.

2. Environmental Scan
   - Discussed the current scanning process and changes needed to better reflect membership needs and focus on forecasting emerging issues and trends
   - Recommended to improve the survey tool and methodology; resulted in a change in how AHIMA conducts CSA environment scan
   - For any CSA interested in conducting environmental scanning in their state, members may still do so using the 2011 Environmental Scan form for their annual meeting.

3. HIM Higher Education, Workforce
   - Revised the Professional Practice Experience (PPE) guide and created a PPE Site Link presentation to educate and promote the importance of professional development and mentorship;
   - Provided feedback to the Council for Excellence in Education’s Reality 2016 initiative;
   - Developed and approved a student liaison job description for CSAs to further engage students and offer professional development opportunities.

4. House Operations
   - Focused efforts on exploring best practices to enable the HoD to become more forward-thinking, collaborative and agile in today’s rapidly changing environment
   - Advanced the Speaker of the House job description and processes for the next election
   - Discussed ideas and concepts for a new HoD governance framework.

5. Professional Development, Recognition
   - Developed an “Elevator Speech” to provide a uniform statement defining the purpose and role of the HIM profession to the general public and for healthcare professionals
   - Recommended a central repository for House members to access; resulted in updated HoD Web site
   - Provided input and feedback on AHIMA’s marketing campaign and initiatives.

6. Volunteer, Leadership Development
   - Revised the Volunteer Leadership Competencies Self-Assessment form to outline the core competencies expected of volunteer leaders. It is a useful resource available to members considering volunteering for leadership positions and can also be used as a professional development tool
   - Provided input and feedback on how to best develop current and future volunteer leaders and increase nomination and election involvement.

AHIMA would like to thank the HoD members for volunteering their time and talents in support of their respective team’s charges and activities. As the HoD evolves to best govern our profession, the projects and activities performed by these House teams will provide new and additional materials and resources—adding value and better serving the needs of our members at large.

AHIMA ADVANTAGE
The last lecture has been given; the last assignment graded; and final grades entered. The semester is now close to being history. But before you pack up for summer break, there’s one more task HIM educators should complete in order to prepare for the upcoming school year. Register for AHIMA’s Assembly on Education Symposium/Faculty Development Institute (AOE/FDI), “HIM Educators: Making Dreams Come True,” July 21–25 in Orlando, FL.

Held at the Disney Coronado Springs Resort, this year’s premier event for HIM educators presents the perfect opportunity to learn and share best practices to advance your teaching techniques, preview new educational content and textbooks, earn continuing education units, and have a fun family vacation.

Plan now to bring along your entire family. Disney is offering special room rates at its Coronado Springs Resort and discount tickets for Disney attractions. And guests of the Disney Coronado Springs Resort can experience Disney’s free Magical Express shuttle service to and from the resort and the Orlando International Airport.

What New for 2012?

AOE/FDI is the premier conference for HIM educators. This year’s AOE Symposium/FDI features:

- Educational sessions focused on emerging curriculum content such as ICD-10 and data analysis, usage, and mapping
- Innovation, research, and leadership development and engagement
- Networking with AHIMA presidents
- A special post-AOE three-hour ICD-10 academic workshop
- Full-day off-site virtual lab training sessions for hands-on learning
- Involvement in Vision 2016: Roadmap 2012 to Reality 2016 discussion
- Special rate to attend the AHIMA Trainer Academy for ICD-10-CM/PCS following AOE
- Earn up to 29.5 continuing education units

What Can You Expect?

Over the course of two days, Faculty Development Institute attendees can expect 19 sessions dedicated to faculty development, including a CAHIIM session. With topics focusing on making learning relevant, critical aspects of program development, student resources for educators, and integrating research into the curriculum, new faculty will gain effective teaching strategies while exploring how students learn best and discovering best practices for program administration.

The Assembly on Education Symposium will feature more than 80 speakers and 56 sessions. Educators can enjoy professional discussions and connecting with other HIM educators to learn about best practices, find out how to integrate ICD-10-CM/PCS, EHR reforms and information literacy skills into their curriculums, and explore future trends that affect how to prepare the workforce.

Special VLab Sessions

Educators will also have the opportunity to learn more about AHIMA’s Virtual Lab (VLab) through hands-on off-site sessions held at local educational facilities at the following dates and times.

- July 21, 9:30 a.m.–3:30 p.m.—VLab Basics
- July 22, 9:30 a.m.–3:30 p.m.—What’s New in VLab
- July 25, 1–7 p.m.—What’s New in VLab

There’s also a VLab track during the AOE meeting, “Tomorrowland: VLAB and EHRs,” covering topics such as “Creative Reports through the VLab Application,” and “Engaging First Year Students in Meaningful Lab Activities,” as well as VLab demonstration showcases.

Consider staying over for two special post-AOE learning opportunities:

- AHIMA Academic Workshop, “ICD-10 Preparations for the Classroom,” July 25 at 1 p.m., immediately following the close of AOE. This session is designed to help faculty prepare for a successful migration from ICD-9 to ICD-10 coding instruction.
- AHIMA Academy for ICD-10-CM/PCS: Building Expert Trainers in Diagnosis and Procedure Coding, July 26–28. This dynamic program will help educators prepare to train others in the ICD-10-CM and ICD-10-PCS coding systems. Attendees of AOE/FDI who stay for the Academy will receive a $300 discount off the price of the Academy. Register today to reserve your space and secure your savings.

So before you erase the white board, clear off your desk, and lock your classroom, take a few moments to make sure you’re prepared to take your students to the next level in HIM education. Plan now and register to attend the 2012 Assembly on Education Symposium/Faculty Development Institute. This is the one educator’s event you can’t afford to miss. For more information, visit ahima.org/events.
E-Discovery is HIM’s Next Big Challenge

On the verge of the new millennium, December 1999, Kim Baldwin-Stried Reich, MBA, MJ, RHIA, CPHQ, made a prediction that she inscribed on her company’s time capsule. “In 100 years, I bet medical records will finally be electronic and paper-based medical records will be obsolete. Doctors, nurses, and patients will have the ability to share and exchange their medical records electronically, just like we do with e-mail today.”

That prediction was the first step Reich made toward becoming a strong advocate for not just interoperable electronic medical records, but records that provide solid evidence for use in litigation and regulation.

As the compliance and case manager for Lake County Physicians’ Association and an independent e-discovery and regulatory compliance consultant, Reich has closely followed the e-discovery topic from its infancy. This culminated with the release of the new book e-Discovery and Electronic Records, which Reich co-authored for the AHIMA Press. “In essence, the writing of this book was something I didn’t seek out to do, spiritually it became something I needed, or was ‘supposed’ to do,” she said.

The book is a first-of-its-kind professional resource developed to provide HIM, IT, legal counsel and other industry professionals with best practices and thought-provoking questions surrounding the management, preservation, and production of electronic health records for litigation and regulatory investigations, Reich said.

As electronic records have evolved into reality over the last several years, so have the legal issues. HIM and other healthcare professionals have struggled to understand the complex nature of discovery in electronically stored information, Reich said. e-Discovery and Electronic Records was written to help healthcare industry professionals secure the “just, speedy and inexpensive determination of every action and proceeding” in healthcare litigation, as well as shed light on a complex issue.

Below is a Q&A with Reich on the book and its creation.

What is an HIM professional’s role in e-discovery?

Given the complexity of electronic health information management, I believe one day healthcare e-discovery will become its own unique job skill. HIM professionals are well positioned and qualified to take on this important role because they can help legal professionals understand how EHRs are structured and how data are coded using classification schemes.

The HIM profession must be recognized as the information governors and trusted data stewards who are responsible for working collaboratively with legal counsel and governmental regulations in understanding the forms, formats, and location of all potentially relevant electronically stored health and administrative data that will be needed to respond to litigation and/or a regulatory investigation.

What is one main takeaway you hope readers get from the book?

If you haven't started preparing, don't delay, get started today! Talk to your legal counsel and risk managers and ask to become a member of the organization’s litigation response team (LRT). Ask them what they know, if anything, about the status of adoption of e-discovery rules within the state and local courts.

How is litigation-driven discovery different in electronic records versus paper records?

The differences are vast and significant. In the paper realm, we could touch, see and feel the records we produced for litigation. Traditionally, the HIM director functioned as the official records custodian and the role of the HIM department was to collect, sort, process, copy, file, and produce copies of paper-based medical records for litigation. However, now in the EHR and electronic health exchange world, issues related to custodianship and the role and responsibilities of the HIM director and HIM department are blurred.

Kim Baldwin-Stried Reich, MBA, MJ, RHIA, CPHQ

In our evolving role as information governors, HIM professionals now have a responsibility to facilitate the exchange of information while ensuring the security and integrity of the information that is created and transmitted about an individual.

What motivated you to take on this challenge?

After my participation in the Y2K planning exercise, I began to seriously think a lot about the future of the HIM profession and how and why health information should be exchanged electronically. As a result, I enrolled in the Loyola School of Law Beazley Institute for Health Law and Policy. I wanted to examine the legal issues impacting our care delivery process and work to support the establishment of our nation’s Health Information Infrastructure (NHII). I spent time working for CMS as an intern and worked to support the implementation of Title II of HIPAA, and wrote my final thesis entitled, “The SSA Disability Determination Process, Making the Case for the NHII.”

Following my graduation from Loyola, I was fortunate to become actively involved with The Sedona Conference and an AHIMA work group, where I met my co-authors and talked to them about the future of e-discovery in healthcare and why it was important for us to take on this project. ❖
As the AHIMA Foundation celebrates its 50th anniversary, the need to support the scholarship program is greater than ever before. In 2011 only 26 percent of qualified applicants received scholarships, yet the number of qualified applicants increased from 146 in 2010 to 215 in 2011. The success of the scholarship program depends on member support, whether through donations to AHIMA’s Annual Fund, participation in the yearly Silent Auction at the AHIMA Convention, or with a named scholarship. The AHIMA Foundation hopes you will help us meet this “golden opportunity” to attract and support new talent in the HIM industry by improving the educational opportunities for current and future HIM professionals through scholarships.

The AHIMA Foundation would like to introduce a few of the Merit Scholarship recipients from the latest round of awards. Their own words demonstrate the impact these scholarships can have on members of the HIM profession.

**Richelle Beckman, MHSA, RHIA, CPC, CEMC, CPMA, CPC-I—Dott Wagg Memorial Scholarship Recipient**

Richelle Beckman is a law student at the University of Missouri-Kansas City School of Law. She completed her undergraduate degree in health information management, becoming an RHIA and finishing graduate school in health services administration and health policy. She began working on a law degree in order to complete her formal academic career and combine her interests in healthcare, business, law, and policy.

“The HIM field continues to fascinate and challenge me. I look forward to playing an active role as an AHIMA member in the healthcare community and to being a resource in all aspects of health information management,” Beckman said. “Your support of my educational and professional aspirations is appreciated beyond words, and I hope to return the favor by re-investing time and energy into AHIMA so that its benefits and resources continue to grow and reach others in our field. I cannot thank you enough for your support through student scholarships, your time spent reviewing applications, and your decision to invest some of those resources in my education.”

**Lora Snodgrass, RHIT—Rose T. Dunn Honorary Merit Scholarship Recipient**

At 34 years-old, Lora Snodgrass is considered a “non-traditional” student. She goes to school, holds a full time job, and is raising a family. And all the while, Snodgrass has carried a 4.0 grade point average. She has been working in the HIM field for two years and believes she has found her passion.

“I would like to sincerely thank AHIMA, the sponsors of the AHIMA Foundation, and the generous donors for their time, efforts, and gifts,” Snodgrass said after receiving her scholarship from the Foundation. “Receiving this award is a great honor for me and I will put it to good use by continuing to strive for academic and professional excellence. I look forward to being able to pay this generosity forward to future students.”

These scholarship recipient’s words demonstrate that this program continues to be vital in shaping the future of health information. The merit scholarship program is a golden opportunity for so many HIM students. Help the AHIMA Foundation sustain this program through a donation while helping the Foundation celebrate its 50th anniversary. Learn more about supporting the AHIMA Foundation’s Student Merit Scholarship Program.

**Ryan Sanderfer, MA, CPHIT—Rita Finnegan Memorial Scholarship Recipient**

Ryan Sanderfer is chair of the department of health informatics and information management at the College of St. Scholastica in Duluth, MN. He is pursuing a PhD in health informatics at the University of Minnesota-Twin Cities. In addition to his teaching responsibilities and student responsibilities, Sanderfer is working on federal grant projects, consulting for the REACH regional extension center program for Minnesota and North Dakota, and is an evaluator for a multi-hospital EHR quality measures reporting project.

“I would like to express my gratitude to the AHIMA Foundation and its donors on behalf of myself, my family, and the College of St. Scholastica’s department of health informatics and information management,” Sanderfer said. “I am extremely honored and humbled to have been selected to receive this scholarship. The scholarship will be used to directly offset the cost of tuition in a doctoral program. Thank you for your generosity.”

**Ryan Sanderfer, MEd, RHIA, AHIMA ’s Future Initiative**

Ryan Sanderfer is chair of the department of health informatics and information management at the College of St. Scholastica in Duluth, MN. He is pursuing a PhD in health informatics at the University of Minnesota-Twin Cities. In addition to his teaching responsibilities and student responsibilities, Sanderfer is working on federal grant projects, consulting for the REACH regional extension center program for Minnesota and North Dakota, and is an evaluator for a multi-hospital EHR quality measures reporting project.

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House of Delegates Rolls out a New “Governing the Profession” Initiative

Susanne Morgan, MEd, RHIA, AHIMA’s 2012 Speaker of the House, is leading the charge. She has worked with the AHIMA Board of Directors to transition the House of Delegates to increase collaboration and address the issues influencing our profession. The House of Delegates is an assembly of state leaders representing AHIMA’s grassroots member forum. The House is charged with governing the health information management profession. An open dialogue with delegates has been taking place via conference calls since March.

Role of the Delegate
Delegates work virtually, year-round advocating for the profession, the members, and the Association. With a special focus on the HIM profession, activities will consist of participating in discussions, conducting environmental scanning, developing and approving house resolutions, and vetting professional practice content. Delegates are elected by respective state members and serve as a vital communication and membership link between AHIMA and its members. These leaders help keep our profession strong and moving forward by contributing or recommending action on issues affecting the industry and facilitating the voice of the member.

Our Journey
During the 2011 annual House business meeting, delegates revised the bylaws and experienced a new way of thinking and working. Facilitated by Glenn Tecker from Tecker International LLC, delegates discussed, collaborated, and recommended action on 11 mega issues facing our profession. The work on the mega issues is being accomplished through a variety of groups.

At Winter Team Talks, Parker presented a new, forward-thinking approach to the operations and configuration of the House of Delegates, also referred to as the Governing the Profession Initiative. The initiative will allow for improved agility and diverse input into strategic planning to better address and meet the needs of our members, the profession, and the industry.

Governing the Profession Initiative
In 2007, the House of Delegates implemented a structure comprised of six standing House teams representing individual facets of health information management. This structure allowed for more tactical work, engagement, and valuable contributions. Team charges were set by the AHIMA Board of Directors and accomplished over time. The new approach will position the House of Delegates to move more agilely to address the issues facing our profession today, tomorrow, and in the future. Below is a brief summary of the proposed structure and operations for the House of Delegates.

Task Forces
In replacement of the six standing House teams, the formation of task forces will create a member-focused objective linked to AHIMA strategy that includes a defined set of issues. This will allow for more flexibility and agility in the completion of projects. Members of the task forces can volunteer for projects that best fit their interests, expertise, and time commitment.

The Envisioning Collaborative
The Envisioning Collaborative will serve as a think tank comprised of delegates, subject matter experts, and industry leaders bringing forward emerging issues and trends that can impact our profession. In this environment, there needs to be a robust exchange of perspectives, innovation, and ideas that will enable us to make sound decisions to help generate strategic solutions advancing the profession.

House Leadership
House Leadership will include all 52 CSAs providing oversight to the designated task forces. Additionally, it will carry some of the same responsibilities as the former House Operations House Team. Similar to task forces, the leadership team will divide and conquer specific initiatives in respect to the House of Delegates. Responsibilities include, but are not limited to, planning the annual meeting, developing procedural guidelines, and monitoring performance measures.

The role of the House is to govern the profession, and this plan will not affect or impact in any way the powers or duties, composition, or voting eligibility of the House of Delegates. The proposed operational framework will allow the House to make the best use of time and effort in governing the profession. Please share your thoughts and join in the discussion in the AHIMA Community topic, House Governs the Profession.

AHIMA ADVANTAGE
Volunteer for AHIMA, Gain Leadership Skills

Volunteering is a great way to get involved at the regional, state, and national level. Ginna Evans, MBA, RHIA, FAHIMA, chair of the Nominating Committee can attest. “As a volunteer with a passion for what I do, I always receive more than I give. There are volunteer roles for everyone—whether you have a little or a lot of time to give. If you want a one-on-one experience then volunteer to mentor a student or new professional—they are the future of our profession,” Evans said. If you’re ready to take the next step at the national level then go to the AHIMA Web site and complete the Application to Serve (for appointed and elected positions). “You won’t regret it—you’ll make new friends, have new mentors, and professional growth, all for free!” exclaims Evans.

Carolyn Valo, MS, RHIT, FAHIMA, currently serves as the chair of the Fellowship Review Committee and also has a long history of volunteering for AHIMA. “I believe volunteering offers tremendous opportunities to enhance and enrich one’s own career goals,” Valo said. “In addition to expanding our own knowledge and learning, we gain by creating an extensive network of invaluable and knowledgeable peers. AHIMA has made the volunteer application process so easy, I encourage all to seek ways that they can offer their time and talent.”

Consider completing the Application to Serve. Applications are accepted year-round, but complete one before August 1 to be considered for the 2013 appointments. Access the Application to Serve to review descriptions of the groups available on the Volunteer Opportunities page. Click the Application to Serve link to apply. Also, it is never too early to consider an elected position. Applications are due in early 2013. Consider volunteering today.

Members of the Georgia State Association network during the 2011 AHIMA Convention. (left to right) Jennifer McCollum, RHIA, CCS; Edward Farr, RHIA; Charlotte McCuen, MS, RHIA; Ralph Morrison, RHIA, CPC; and Ginna Evans, MBA, RHIA, FAHIMA
The purpose of a clinical documentation improvement (CDI) program is to initiate concurrent and, as appropriate, retrospective reviews of health records for conflicting, incomplete, or nonspecific provider documentation. Ultimately, the goal is to identify clinical indicators to ensure the diagnoses and procedures are supported with appropriate ICD-9-CM codes (soon to be ICD-10-CM/PCS codes).

HIM: At the Core of CDI

Documentation improvement programs were formed in an effort to work with care providers to appropriately reflect the quality of patient care while increasing accuracy in coding and reporting. Health information management (HIM) and clinical staff form the core of CDI programs working within a multidisciplinary team to provide guidance on documentation challenges.

A CDI program offers many advantages for a healthcare facility, including:
- More clearly identifying the risk of mortality and severity of illness
- Improved outcomes data
- Accurate and appropriate reimbursement for services provided

In addition, precise, thorough clinical documentation provides a defense for regulatory compliance reviews, including Recovery Audit Contractors (RAC) and Medicaid Integrity Contractors (MIC).

CDI Resources

Effective CDI efforts require in-depth knowledge of documentation requirements, coding classification standards and guidelines, and reporting requirements. An understanding of clinical records is also necessary. AHIMA offers a robust portfolio of resources to support CDI practitioners in these initiatives.

Learn more inside about AHIMA’s CDI Resources!
AHIMA’s CDI Resources

NEW! Certified Documentation Improvement Practitioner (CDIP) Credential

A CDI practitioner provides the crucial link between the physician and the documentation. AHIMA’s newest credential, the CDIP, confirms the commitment of AHIMA to globally improve and maintain quality information for those involved in healthcare and support the integrity of the patient’s health record. The CDIP certification distinguishes professionals as knowledgeable and competent to provide guidance relative to clinical documentation in the patient’s health record, thus promoting the HIM profession overall. Find more information including eligibility requirements, exam preparation, FAQs, Candidate Guide, and application at ahima.org/certification/cdip.aspx.

Practice Briefs/Articles

Ethical Standards for Clinical Documentation Improvement (CDI) Professionals
Clinical Documentation Improvement Toolkit
Guidance for Clinical Documentation Improvement Programs
Clinical Documentation Improvement Gauging the Need, Starting Off Right
Managing an Effective Query Process
Clinical Documentation Improvement and Use of Templates and Standards

Clinical Documentation Improvement: Achieving Excellence

Ruthann Russo, PhD, JD, MPH, RHIT

Clinical documentation is the foundation of every patient health record. In this book, expert author Ruthann Russo clearly defines the term, explains its importance, and presents an objective and uniform set of principles that can be applied reliably in any healthcare organization’s clinical documentation improvement (CDI) program. The author identifies the key users of clinical documentation—from patients to clinicians to coding professionals to reimbursement entities—and throughout the book addresses how a strong CDI program affects them all.

Order Information
Price: $81.95  •  Member Price: $64.95
Clinical Documentation Improvement: Issues

This course will introduce HIM professionals to the exciting new world of Clinical Documentation Specialists (CDSs). The objectives of this six-lesson course are to:

- Discover what Clinical Documentation Specialists (CDS) and the necessary skill sets for CDSs.
- Discuss necessary coding skills and knowledge about the MS-DRG system needed to be a successful CDS.
- Evaluate methods of communication with physicians and promote new ways of communication.
- Discuss specificity and the reason for the necessity of concrete documentation in the medical record.
- Examine how minimal documentation can affect potential reimbursement.
- Identify best queries and value the physician as part of the query process.

Order Information
Price: $96 • Member Price : $80
Product No: H0CDII • CEUs: 2

Clinical Documentation Improvement: Program Success

This two-CEU, six-lesson course reviews the overall aspects of managing a clinical documentation improvement (CDI) program:

- List the data necessary to sell a Clinical Documentation Improvement Program
- Assemble a team of key players and explain the factors involved in the design and implementation of a CDI program.
- Identify who to hire as the CDI specialist, define their role, and identify when and where to begin.
- Explain how to get buy-in from the physicians. Discuss communication barriers, and identify educational opportunities.
- Describe the concurrent review process and create an effective query.
- Illustrate how to measure the success of the CDI program and the effectiveness of the CDI Specialist.

Order Information
Price: $96 • Member Price : $80
Product No: H0CDIPS • CEUs: 2

CDI: Clinical Documentation in Preparation for ICD-10-CM/PCS

This training provides information on the terminology utilized in ICD-10-CM/PCS that impacts clinical documentation. The objectives of this six-lesson course are to:

- Identify areas in ICD-10-CM/PCS that include new terminology.
- Define areas in ICD-10-CM/PCS that enable improved data capture if more specific conditions and procedures are documented and coded.
- Discuss methods to employ to educate physicians of new documentation opportunities.

Order Information
Price: $96 • Member Price : $80
Product No: H0CDIICD10 • CEUs: 2

Clinical Documentation Improvement: Quality Measures and Documentation Standards

This two-CEU, six-lesson course reviews how clinical documentation improvement (CDI) programs relate to quality measures in addition to being in an electronic environment. The objectives of this course are to:

- Identify how documentation affects quality measure reporting.
- Differentiate various organizations’ documentation standards.
- Examine how coded data affects quality outcome report cards.
- Examine best practices in ensuring data quality in the electronic environment.

Order Information
Price: $96 • Member Price : $80
Product No: H0CDIQMDS • CEUs: 2
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