

**American Health Information Management Association:
*Health Information Management
Skills, Education, and Credential Research***

WHITEPAPER with KEY FINDINGS

Vault

Accounting. Analytics. Research.

TABLE OF CONTENTS

Research Background & Objectives	3
Methodology	4
Key Findings.....	7

RESEARCH BACKGROUND AND OBJECTIVES

Founded in 1928 to improve health record quality, the American Health Information Management Association (AHIMA) is the premier association of health information management (HIM) professionals worldwide:

- ❖ AHIMA serves 52 affiliated component state associations and more than 103,000 health information professionals and is recognized as the leading source of “HIM knowledge,” a respected authority for rigorous professional education and training.
- ❖ HIM is the body of knowledge and practice that ensures the availability of health information to facilitate real-time healthcare delivery and critical health-related decision making for multiple purposes across diverse organizations, settings, and disciplines.

In 2016 AHIMA launched HIM Reimagined (HIMR), an AHIMA Leadership initiative to build a framework to transform health information management and position the profession for the future:

- ❖ HIMR is intended to advance the HIM profession and professional. It offers long-term and phased implementation strategies to ensure the profession is equipped academically and professionally to advance individuals and HIM to greater levels of relevance, while keeping pace with changes in the industry.
- ❖ Because the healthcare industry is necessitating an increased level of specialization and different skills associated with education, one specific recommendation of HIMR is to transition the Registered Health Information Technician (RHIT) credential to a specialty focused associate level (RHIT + “Specialty”).

In preparation for the RHIT + “Specialty” introduction and other HIMR recommendations, AHIMA initiated a market research study to determine specific job skills, specific job competencies and/or specific role specialties that align with healthcare organizations’ future needs.

The research was executed by Vault Consulting, LLC in May-June 2017.

METHODOLOGY

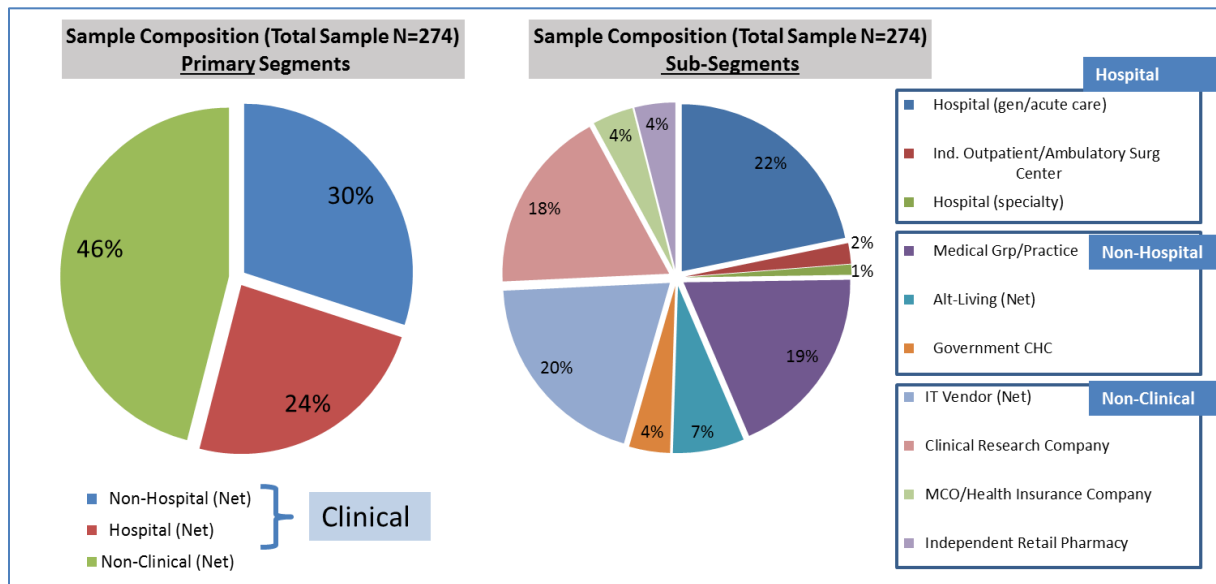
METHODOLOGY

Overview and Target Audience

This research was quantitative in nature and consisted of a 15 minute, identified, online survey among a mix of 274 respondents from Clinical and Non-Clinical healthcare organizations as shown in the chart below.

- ❖ The Clinical segment consists of Hospitals and Non-Hospitals (medical groups, alternative living facilities, government community health centers).
 - The Clinical sample includes a mix of small, medium, and large hospitals as well as a mix of those located in rural, suburban, and urban areas.
- ❖ The Non-Clinical segment consists of IT vendors, Clinical research companies, MCO/health insurance companies, and independent retail pharmacies.

It is important to note that the sample composition (i.e. specific segments and quotas) was defined to represent Clinical and Non-Clinical segments of particular interest to AHIMA’s research goals. As such, the particular mix within each primary segment (Clinical or Non-Clinical) is not necessarily representative of the universe.



Participation Qualifications

Participants qualified for the survey on the basis of:

- ❖ Healthcare segment and senior-level title – typically C-level (often a CTO/CIO) or owner.
- ❖ Being “extremely” or “very” familiar with the specific job skills or competencies required of the individual in their organization who is primarily responsible for managing electronically collected patient information.

Additionally, all respondents are highly involved in hiring decisions for senior-level HIM staff. AHIMA membership was not a requirement of participation. As it happens, 21% of respondents are AHIMA members.

Analysis Notes

The analysis primarily compares responses from respondents at Clinical vs. Non-Clinical organizations, and at sub-segments within each primary segment:

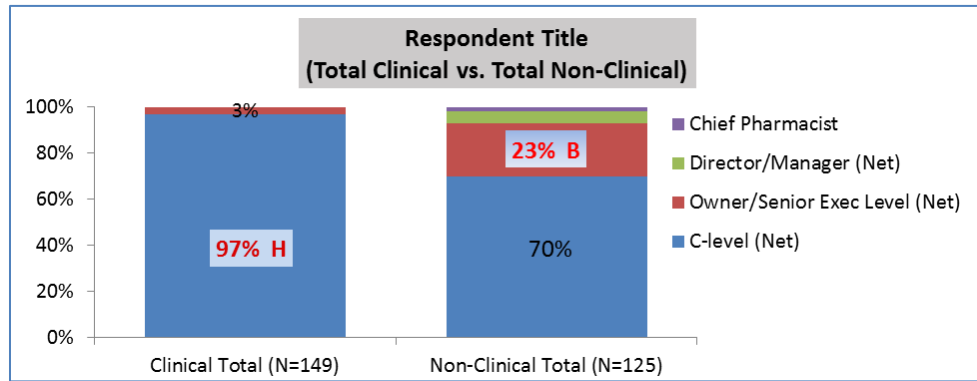
- ❖ **Within Clinical:** Hospital vs. Non-hospital organizations
 - And, within Non-hospital: Alternative Living vs. Medical Group vs. Government organizations.
- ❖ **Within Non-clinical:** IT Vendor vs. Clinical/contract research vs. Insurance/MCO vs. Independent Pharmacy organizations.

Statistical testing at the 95% confidence level has been conducted to identify true differences between the key segments outlined above. Note:

- ❖ Significant differences between the key segments are indicated on the charts within this report by a percentage + letter in red font. This is properly interpreted as an indication that the percentage noted by red font is “significantly higher than (the segment indicated by the accompanying letter – using the key shown below) at the 95% confidence level.”

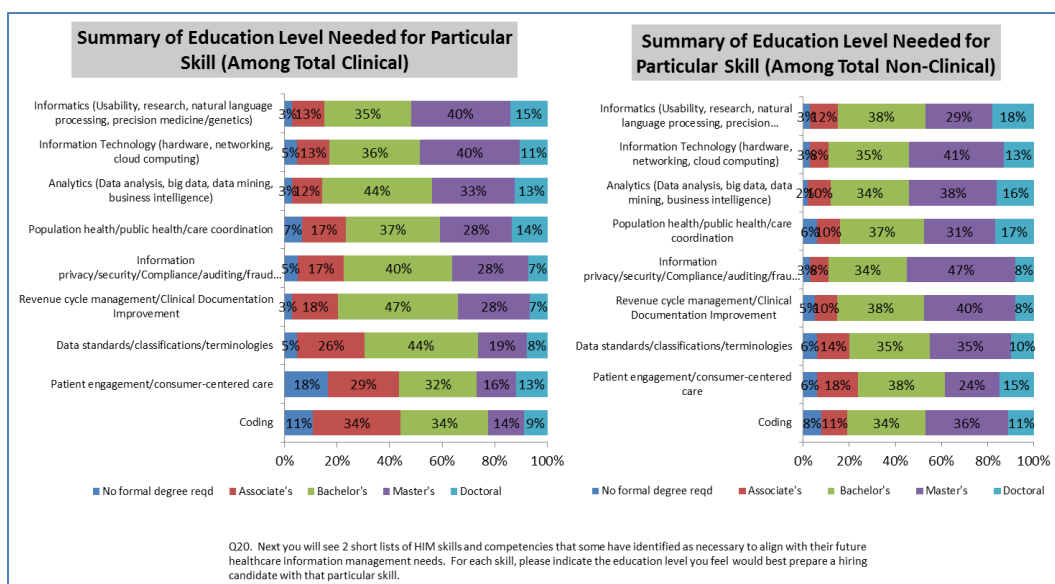
Significance Notation KEY:	
<ul style="list-style-type: none">• B Clinical Total• C Hospital• D Non-Hospital• E Alternate Living• F Medical Practice• G Government CHC	<ul style="list-style-type: none">• H Non-Clinical Total• I IT Vendor• J Clinical/Contract Research• K Insurance / MCO• L Independent Retail Pharmacy

- ❖ For example, in the chart below, 97% of the Clinical sample (B) has a “C-level” title. This is significantly higher than the 70% of Non-Clinical sample (H) having the same title.



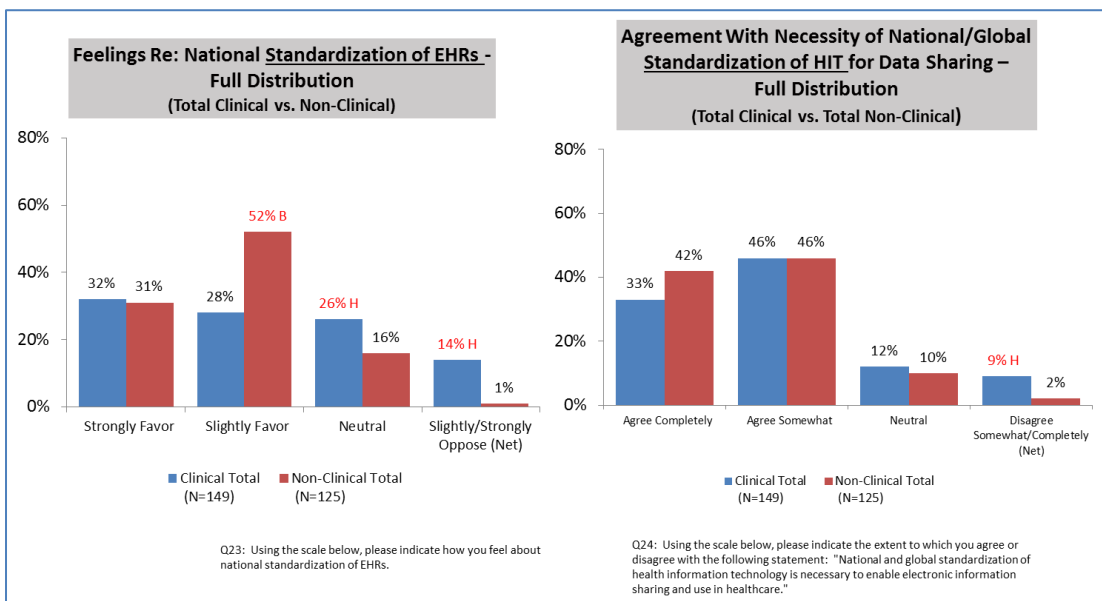
KEY FINDINGS

1. An opportunity exists for AHIMA to take the lead in preparing HIM professionals for the future, as participants representing Clinical and Non-Clinical organizations are not completely confident that today's HIM professionals are prepared for their future health information management needs.
 - ❖ Clinical organizations in particular are concerned about general preparedness, that is, their ability to find individuals who are motivated to keep abreast of changes, whether healthcare, regulatory, or technologically driven.
 - 41% from Clinical organizations feel today's HIM professionals are, at best, only somewhat well prepared for their future needs.
 - Concerns reflect organizations' difficulty finding experienced professionals who are motivated to react quickly to the changing environment, especially in small (often rural) departments).
 - ❖ Clinical and Non-Clinical segments are *both* concerned specifically about hard and soft skill preparedness.
 - 45-55% of Clinical organizations are extremely/very concerned about future hard and soft skill development.
 - The level of concern is higher among Non-Clinical organizations: 64% extremely/very concerned about soft skills; 75% about hard skills.
 - ❖ Aligning with AHIMA's vision for HIM professionals, the general consensus is that a fairly high level of education attainment is desired, particularly by Non-Clinical organizations, and particularly for HIM technology or analytic roles.

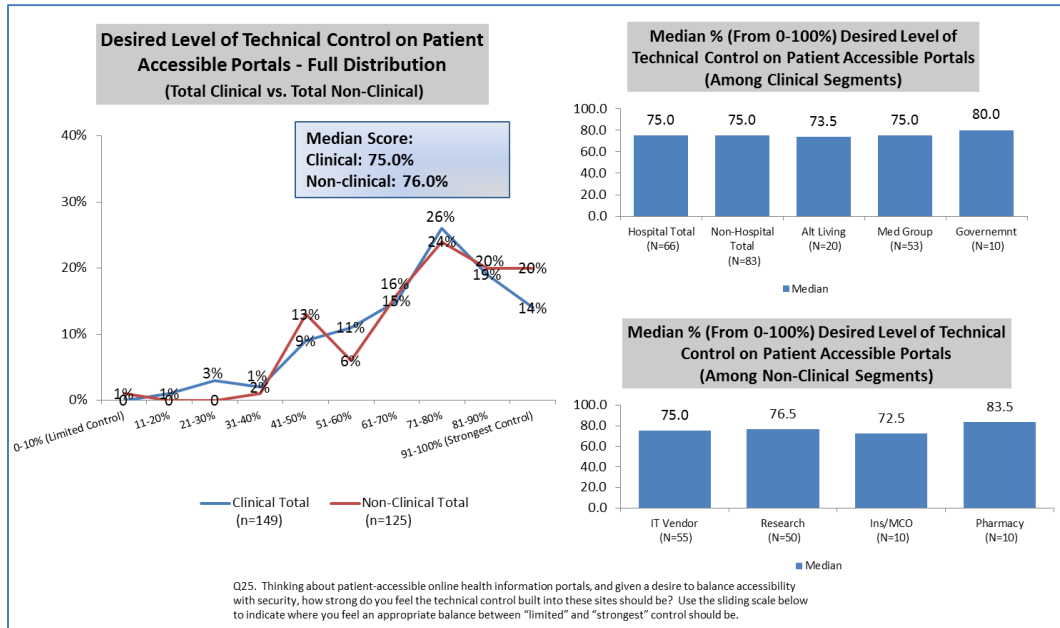


2. Executives at Clinical and Non-Clinical healthcare organizations concur that the field of health information management is rapidly changing, driven in part by expectations of data-driven technological advances. Expectations are that anticipated technological advances will simplify, yet complicate data collection, data mining, and data access.

- ❖ On the one hand, electronic connectivity will create efficiencies that allow faster, more comprehensive data sharing between systems, beginning with accurate/complete EHR documentation, inclusive of automatic coding. At the same time, HIM professionals will need to become adept at navigating electronic databases and systems to enable organizations to take advantage of the wealth of information that will be available to them for analysis.
- ❖ In line with, and presumably supporting, expectations for the future, Clinical and Non-Clinical participants strongly support standardizing EHRs, and health information technology for data sharing.



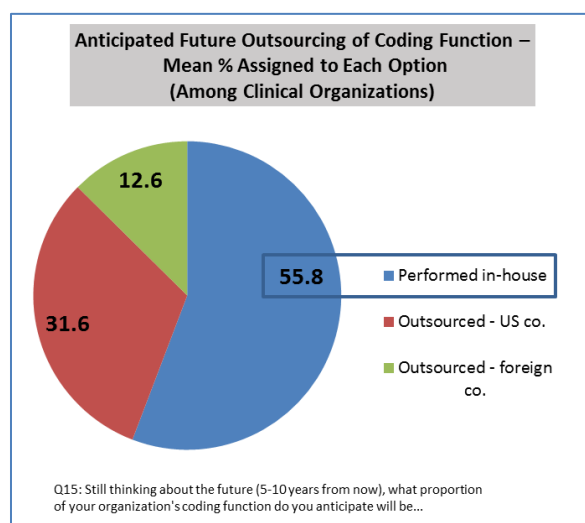
- ❖ Mindful of the consequences of security breaches, survey participants support a relatively high level of technical control applied to patient portals.



- Not surprisingly, advanced computer and information technology skills are a top priority for both Clinical and Non-Clinical organizations. Elements of this include:
 - ❖ Technological proficiency and comfort across various systems.
 - ❖ Ability to work quickly and accurately, demonstrating regulatory (e.g. ICD10) and document familiarity and an agile/detail oriented mindset.
 - ❖ Analytics capabilities working with large data sets for data analysis, big data, data mining, and business intelligence.
 - ❖ Skills training for managing electronic health information.
 - ❖ IT skills related to computer hardware, electronic networking, and cloud computing are also strongly anticipated by Clinical organizations in particular.

4. Coding and code related skills retain their relevancy across Clinical and Non-Clinical segments, but in line with HIM in general, is expected to become more complex and specialized.

- ❖ The majority of coding is expected to remain in-house. Some will be outsourced, mostly to domestic US based partners.



- ❖ Executives expect that future coding will be mostly automated, pulled directly from charts. This in turn will create a need for clinical specialty expertise, and coordination/training at the provider level.
- ❖ Desired coding and related education and skills development include accuracy and attention to detail; program and audit/review of computer generated codes, comfort with real-time EMRs, specialized clinical knowledge, and pay for performance standards.

5. Other priority skills/capabilities noted by both Clinical and Non-clinical segments include those related to:

- ❖ Leadership
- ❖ Information privacy and security
- ❖ Data standards, classifications, and terminologies

6. Although Clinical and Non-clinical organizations align in many respects, some differences between the Clinical and Non-Clinical segments are nevertheless evident:

- ❖ The **Clinical** segment places relatively greater emphasis on operational needs and soft skills, e.g.: revenue cycle management and clinical documentation improvement, compliance, auditing, and fraud surveillance policy; social skills; and critical thinking.
- ❖ **Non-Clinical** executives, on the other hand, place relatively greater emphasis on informatics, e.g. usability, research, natural language processing, precision medicine and genetics.