HIEs: Get Involved with Your State’s Initiatives

The number of health information exchanges (HIEs) has risen from 234 in 2010 to 255 in 2011, according to a recent report by the eHealth Initiative (eHI) titled, “2011 Report on Health Information Exchange: The Changing Landscape.” The Office of the National Coordinator for Health IT (ONC) hopes to create a Nationwide Health Information Network (NwHIN) in the next decade. Will this goal become a reality, and what role should HIM professionals play?

Know the HIE Landscape

In general, HIEs come in all shapes and sizes, ranging from the geographic distance they cover, the information they exchange, the number of providers they include, the consent models under which they operate, and more.

States are currently approaching HIEs in one of the following two ways:

- Initiating one statewide HIE to which all providers connect
- Engaging multiple—and potentially interconnected—Regional Health Information Organizations (RHIO)

On a more granular level, some hospitals and other providers, all of whom use the same EHR vendor, have also been creating smaller-scale HIEs. Although these HIEs are more grass-roots and locally focused, they are also desirable from an implementation standpoint, as there are far fewer technological challenges to overcome.

Some industry experts worry that each of the different HIE approaches may delay or even prohibit the establishment of an NwHIN. Others fear that HIM professionals aren’t providing sufficient input into the creation of HIEs, which may lead to future complications with information exchange. Experts say HIM professionals possess a
Welcome TO THE DIGITAL EDITION OF THE
AHIMA Advantage

How to Use the Digital Edition of AHIMA Advantage

Magnify it! Use the magnifying glass to zoom in. Use the slide zoom tool to set the same magnification for all pages.

Share it! E-mail articles to colleagues, post them to Facebook, and Tweet them.

Search it! Search for keywords throughout the entire issue—and all back issues.

Download it! Save a copy to your computer.

Print it! Print stories or single pages.

Remember, you can always access tips and help from the “Help” tab in the menu tray on the left.
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 Actus®. 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—Actus 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 Actus can help you achieve similar results and capture the revenue you’ve earned.

Brilliant coding processes begin with a full spectrum of coding solutions. Contact Optum today to schedule a demo or learn more.

For more information: www.optuminsight.com/cac | insight@optum.com | 866.306.1317
Provide Input Regarding Consent Management

Consent management is an extremely important part of an HIE’s success, says Jackie Raymond, RHIA, director, health information services and privacy officer at Brigham and Women’s Hospital in Boston, MA. Raymond, says she got involved with her state’s HIE because she wanted to learn about how HIE would affect the more than 6,000 monthly requests for release of information at Brigham and Women’s Hospital.

Getting involved with the Commonwealth of Massachusetts HIE was relatively easy for Raymond. When the Massachusetts eHealth Institute (a division of the Mass Technology Collaborative) began its statewide HIE initiative, it solicited input from the Massachusetts HIM Association of which Raymond was president at the time.

“We’re qualified to join state HIE workgroups and for open positions because we’re experts in health information exchange, in protecting patient information, and in overseeing the consent process and release of information. We know the HIPAA standards. We should be front and center in this whole new area of information exchange.”

Raymond led a group of physicians, attorneys, HIV advocates, and HIM professionals that met monthly starting in March 2010 to focus on a consent management model that will be deployed for the statewide HIE by 2015. The workgroup researched opt-in and op-out consent models as well as whether information should be filtered in terms of sending or viewing or whether it should be flagged to denote opt-in for emergency care only.

Another consideration was how—and whether—to exchange privileged information (e.g., HIV, substance abuse, genetic testing, and mental health), much of which is also dictated by state law, she adds. “We already worry about this in our daily work, but when you’re talking about sharing information on a state level, you wonder whether patients will want to consent.”

Like Raymond, Susan Carey, RHIT, PMP, system director of HIM at Norton Healthcare in Louisville, KY, serves on the privacy and security council for her state’s HIE—the Kentucky HIE (KHIE). The KHIE was launched in April 2010 as part of a pilot project that included Medicaid claims data exchange among six hospitals and one clinic. Statewide rollout began in January 2011, and the KHIE is currently averaging nearly 9,000 queries per week. Although Norton Healthcare isn’t yet connected to the KHIE, nearly 300 providers are connected to date, and that number keeps growing.

“Getting involved with the KHIE was relatively easy for me as well, because I’m already working with state officials,” says Carey. “As we work to bring in more providers, we can_phase in opt-in and opt-out consent models as well. That is the only way we can function in this new world.”
says Carey, who also serves as president of the Kentucky Health Information Management Association (KHIMA).

Although the KHIE currently operates using an opt-in model only, it is considering a no-consent model in the future as it continues to add participants and data, says Carey, who is helping to research the model. Carey says HIM professionals should definitely have input into choosing the consent model as well as answering more complex questions, such as how to restrict data upon patient request, how to operationalize changes that patients make to their consent, and how to address consent across state lines.

**Engage in Patient Identity Discussions**

Data integrity is an essential element of HIE and one in which HIM professionals should be involved, says Caryl Greaves, RHIA, MPA, CPC, senior HIM director at Montefiore Medical Center in New York City. Montefiore Medical Center is one of 25 participating facilities and providers in the Bronx RHIO.

The Bronx RHIO is somewhat unique in that an HIM committee made up of HIM representatives from each major participating facility focuses on issues related to the integrity of patient identity and ensuring an accurate master patient index (MPI). Greaves, who is the chairperson for the committee, says it’s crucial for HIM professionals to lead the discussions about patient identity.

“HIM individuals are the most qualified individuals to handle this. If HIM is not involved in HIE, I think it will be a failure,” Greaves says. “There will be too many instances where people should be matched and aren’t or too many situations in which people are matched who shouldn’t be matched, and that’s dangerous.”

The HIM committee’s goal is to prevent improper linking as well as minimize the number of false negatives, meaning patients who should have been linked but who weren’t, Greaves explains. The committee meets regularly to establish rules around what can be automatically matched versus what requires a manual review. For example, some hospitals in the RHIO may use Bronx, the abbreviation BX, or some other variation (including a misspelling) when recording patient addresses. In these instances, the committee decided that automatic links can be made. On the other hand, if two digits of a patient’s Social Security Number are transposed—and all other data remains the same—this would require a manual review.

“It is a huge issue to match in your own institution. It is exponentially much more difficult across different enterprises,” says Greaves.

HIE matching software is not as sophisticated as many in the industry hope it would be; however, improvements will likely occur over time, says Nance Shatzkin, principal at Shatzkin Systems, Inc. in Croton-on-Hudson, NY, who also provides IT consulting for the Bronx RHIO. In the meantime, HIM’s role is—and will continue to be—crucial. “I think the committee has been instrumental in exposing issues of potential risk, developing approaches to help minimize that risk, and in establishing policies for the RHIO as the RHIO takes on a stewardship role over the data,” she says.

As New York State moves toward a RHIO-to-RHIO model over the next three to five years—and eventually a consortium involving four other neighboring states—the topic of maintaining an accurate MPI must be revisited frequently, she says. HIM professionals should also engage in other discussions related to data quality, such as:

- Quality audits of consents, including a closer examination of whether consents are properly dated, signed, and registered into the record.
- Standardized definitions of data (e.g., HTN versus hypertension) across settings.

**Future Challenges**

A lack of standards related to HIE exchange (including interstate HIE) and the reporting of meaningful use criteria related to HIE also continue to challenge the industry, says Shatzkin. “One of the challenges quite honestly is that the technology is changing. The iceberg is moving while we’re standing on it. That makes it harder for people to understand what the options are,” she adds.
Financial sustainability is another challenge. According to the 2011 report by the eHI, only 24 initiatives report they are sustainable. "I don't think ARRA in any way pays for HIEs. It helps, but I think the HIEs are going to have to understand who their customer base is, and the customers are going to have to pay for it," says Shatzkin, adding that customers include health plans, providers, and the government.

Another topic of ongoing discussions is whether HIEs will proactively push information to participants in addition to allowing them to request it. For example, when a patient is transferred from a nursing home to a hospital, the nursing home could send a Continuity of Care document to the RHIO for providers at the acute care hospital to view.

RHIOs are doing more and more of this, although it will get more complicated once RHIO-to-RHIO exchange begins, says Shatzkin. "The potential improvement in coordination of care is probably the most important focus. It's what accountable care organizations and medical homes are all about," she says. "It's where I think the feds are trying to push this."

Some HIEs are also considering adding retail pharmacies, which would allow physicians greater access to information about whether patients actually fill prescriptions, says Greaves.

"It makes sense, but again, you need to make sure that the pharmacist may be able to access his or her records online," says Carey. "What does this mean to state law, federal law, and physician patient relations?"

The good news is that HIEs may spur several new job opportunities for which HIM professionals are qualified, including:

• Coordinator for regional extension centers
• Directors of HIEs
• HIE MPI administrator or data integrity expert
• HIE facility representative, serving as a liaison between the facility and HIE.

Author Offers CDM Best Practices

Over the past 10 years, the Charge Description Master (CDM) has evolved significantly from a simple price list to an important compliance tool. With the implementation of Medicare's Outpatient Prospective Payment System (OPPS) came the need for CDMs to be complete, accurate, and compliant. Without good CDM practices, a healthcare organization places a significant amount of outpatient revenue at risk for non-capture or re-payments.

In her new book, *The Charge Description Master Handbook*, author Anne Casto, RHIA, CCS, discusses best practices in CDM management and maintenance while conveying a solid understanding of CDM compliance necessities. *AHIMA Advantage* spoke with Casto, president of Casto Consulting, about her book and why HIM professionals should be concerned with CDM at their organization.

**Who is the audience for your book?**

*The CDM Handbook* was written for healthcare professionals new to the revenue integrity arena. The information in this book will help CDM analysts and coordinators design policies, procedures, and processes that will not only keep the CDM up-to-date and compliant, but will also help them improve revenue capture related to hard-coded services at their facility.

**What is one CDM best practice that will lead to compliant processes and data?**

Creating a CDM committee or team is an invaluable best practice. CDM management cannot solely be the responsibility of the CDM coordinator. Rather it should be a united effort between all service areas; finance, revenue cycle participants, health information management, and information systems. Creating a CDM team allows the stakeholders to share their perspective and expertise when considering the direction or pathways for CDM activities.

**What is a typical CDM trouble area?**

Pharmacy CDM always comes up. Whether pharmacy line items are a part of the master CDM or are contained in their own separate CDM, a team approach is required to create complete and accurate pharmacy line items. Failing to give proper attention to the pharmacy section of the CDM can result in significant lost or at-risk revenue. Matching dosage to billable units and understanding the self-administered drug regulations is complicated. Creating a pharmacy CDM sub-group is a good way to address pharmacy-specific issues. A sub-group structure allows group members to explore the various issues in-depth and to create policies and procedures that will support the unique issues that surround pharmacy charge capture and compliance.

**Why is CDM maintenance so important to a healthcare facility?**

Creating a good CDM maintenance plan is one of the most important best practices. Creating a project plan with tasks and timelines allows all CDM stakeholders to understand the complexity of managing the CDM. A well-written plan also allows for each participant to fully understand his/her role and expectations for CDM maintenance. Additionally, it allows for everyone to see how the tasks are inter-related and helps to keep individuals on task so that activities can be completed in a timely manner.

---

Author: Anne Casto
RHIA, CCS

**About the Author:**

Anne Casto has some 25 years of experience in the healthcare industry, most recently as the national CDM program manager for a large healthcare system. Anne has written numerous articles in the area of CDM and has been recognized for her expertise in CDM compliance. Her leadership in this area earned her a 2008 Leadership Award from the Healthcare Financial Management Association (HFMA).

---

**AMERICAN HEALTHInformation Management Association**

**AHIMA Advantage**

**December 2011**

**Author Profile**

Anne Casto
RHIA, CCS

**The Charge Description Master Handbook**

Anne Casto, RHIA, CCS, discusses best practices in CDM management and maintenance while conveying a solid understanding of CDM compliance necessities. *AHIMA Advantage* spoke with Casto, president of Casto Consulting, about her book and why HIM professionals should be concerned with CDM at their organization.
Harman Receives Dorland Health People Award

A HIM member and associate professor of the health information management program at Temple University Laurinda Harman, PhD, RHIA, FAHIMA, received this year’s second annual Dorland Health’s People Award in the Ethics Category. The award ceremony was held in October at the National Press Club in Washington, DC.

During this luncheon, Dorland Health recognized the best of the best among those who deliver success and contribute to quality healthcare in America. AHIMA is proud to have one of its legendary members bestowed with this honor. Joining Harman at the luncheon awards ceremony were her husband, Gilbert Lee Hoffer, and AHIMA’s Director of Government Relations, Don Asmonga, MBA.

Prestigious Award

The Dorland Health People Awards recognize those healthcare professionals who are changing the culture of healthcare to be patient and family focused while providing access to consumers of healthcare across the care continuum.

Harman was given the Ethicist Award because of her definitive textbook *Ethical Challenges in the Management of Health Information*, which guides HIM and healthcare professionals on ethical issues in this era of expansive health information.

Other Dorland awards included practitioners in behavioral therapy, case/care manager, clinical nurse, disability manager, geriatric care manager, healthcare educator, hospice/palliative care professional, medical director, occupational therapist, patient advocate, pharmacist, public health specialist, quality manager, social worker, vocational rehabilitation specialist, and wound, ostomy and continence nurse.

Dorland Health is a leading publisher and media company providing education, training, tools, information resources, guidance, and practical advice for practitioners and specialists in the healthcare field. View a complete list of finalists here.

I was honored to be nominated by AHIMA for the Ethicist Award and to receive this award from Dorland Health. Health information management and ethics received important recognition and I look forward to future publications and presentations that will highlight the importance of our profession, as we face the increased ethical complexities in our electronic health record systems.

AHIMA’s National Convention and Exhibit in Salt Lake City, UT.

A History of Service

Harman has been on the front lines of developing health information management professionals for years and insuring their understanding of the ethical challenges facing the profession.

An HIM professional and educator for over 40 years, Harman has directed HIM programs at George Washington University in Washington, DC, the Ohio State University, in Columbus, OH, and Temple University in Philadelphia, PA.

Her teaching and consulting experience includes health information systems with emphasis on ethical/genetic implications, bioethics, continuous quality improvement, and organizational development.

Harman’s body of work leading to the Dorland award includes research on health information, social, ethical, and legal implications of the use of genetic information and genetic engineering when making reproductive decisions, and has resulted in several national and state presentations on this theme.

Harman has also had several articles published on this topic. Harman has made presentations at international, national, state, and local association meetings on the topic of ethics and health information management.

Harman received the AHIMA 2001 Triumph Legacy Award for the first edition of her book, *Ethical Challenges in the Management of Health Information*. In 2011, she received the esteemed AHIMA Educator award at AHIMA’s National Convention and Exhibit in Salt Lake City, UT.
Top CoP Facilitators for 2011 Recognized

As 2011 comes to an end, AHIMA would like to thank the more than 400 volunteer Communities of Practice (CoP) facilitators for their hard work this past year. Like staff, facilitators are dedicated to AHIMA members and strive to make the CoP the best member benefit that it can be.

By taking time to share their HIM knowledge and experience on the CoP, facilitators impact not only AHIMA members, but also the entire profession which looks towards the association for guidance and expertise. In addition, facilitators play an important role as champions of the CoP, working to spread the word to those who are not already taking advantage of this tremendous member benefit.

Each year, we have honored some of these members as our top facilitators. For 2011, 10 members received this distinction for outstanding service and exemplary performance. (See sidebar.) To view the complete listing since 2004, go to the AHIMA Community, Topic: CoP Facilitators. Also posted is a list of all the current CoP facilitators and the communities they moderate.

Why Volunteer to be a CoP Facilitator?

People choose to volunteer for a variety of reasons. Giving back to their professional field and socializing with peers are at the top of the list. While many CoP facilitators enjoy helping other members, they also know that volunteering is mutually beneficial. “I find the AHIMA CoP to be a valuable tool for staying in tune with the latest HIM topics and discussions and informed about AHIMA’s involvement in national issues,” says Kathy Westhafer, RHIA, CHPS. “I’ve also found a number of the resources posted to be helpful in projects that I am working on.”

CoP facilitator Patricia Maccariella-Hafey, RHIA, CCS, CCS-P, CIRCC agrees. “I really enjoy facilitating the coding community. I have found it to be a great place to keep the pulse on the current hot topics that professionals across the country are dealing with. It is also a wonderful way for AHIMA members to help each other and network. I help out when I can and almost always learn something new in the process,” she says.

Facilitator of the CoP for Release of Information Janet Mohlenhoff, RHIA, CCS, enjoys learning from the CoP as well. “I almost feel guilty being called a facilitator because I get more out of it than I put in! Where else can you post a question on a complex problem and have an answer usually within a day? It’s such a great resource because these are practical, everyday situations from people who are in the HIM trenches daily,” she says.

Facilitators also help members network and communicate information by posting topics pertinent to their members. Patience J. Hoag, RHIT, CCS, CCS-P, CHCA, comments, “The CoP is the perfect networking tool for busy HIM professionals, and being a facilitator is an easy, fun way to volunteer!”

Have you visited the CoP lately? The CoP offers specialized communities for diverse HIM settings, serving as a repository for the most current information pertaining to our ever-changing HIM environment.

Top 10 Facilitators

1. Lindsey Asmus, RHIT, CCS, CCS-P
2. Dawson Ballard, CCS-P
3. Nancy Davis, RHIA
4. Carolyn Roberts, CCS, CCS-P, CPC, CPC-I
5. Rose Goeden, RHIA
6. Sarah Keppen, RHIA
7. Patricia Maccariella-Hafey, RHIA, CCS, CCS-P
8. Lance Smith, RHIT, CCS-P, MPA, CHC
9. Janet Mohlenhoff, RHIA, CCS
10. Laura L. Vondenhuevel, RHIT, CTR

To get started, Login today and see what the CoP has to offer. Check out the featured communities or browse the entire CoP. Don’t see a community you’re looking for? You can suggest a new one and even offer to be the facilitator. Interested in getting more active in the CoP? Make it a point to login at least once a week and comment on a topic.

For more information on becoming a facilitator, please visit the Volunteer Leadership Development Web site.
**Upcoming Audio Seminars and Webinars**

Audio seminars last 90 minutes, beginning at 1 p.m. ET. Bundle up and save. Register for a Live + Web Replay bundle for just $40 more than the price of the live seminar, and you can attend the live seminar and access and share its Web replay version for future use at your facility.

**December 1**  
Quality Measures for Meaningful Use and Value-based Purchasing  
*Presented with the support of 3M*

**December 6**  
ICD-10-CM/PCS Focus: Respiratory System Review

**December 8**  
CY12 CPT Code Updates  
*Presented in cooperation with ACMCS*

**December 13**  
Catch and Release: Processing Electronic ROI Requests

**December 15**  
CY12 CMS OPPS Updates  
*Presented in cooperation with ACMCS*

**Virtual Meeting**

**December 12**  
Noon–3 p.m. CT  
Data Structures and ICD-10-CM/PCS  
*Presented with the support of 3M*

**New Online Course**

Pharmaceutical Terminologies: An Overview of RxNorm

---

**FOR YOUR BENEFIT**

**HOD Strategic Work Session a Success**

At the AHIMA National Convention, the House of Delegates had a busy and productive strategic work session. The in-depth discussion, led by consultant and author Glenn Tecker, chairman and co-CEO of Tecker Consultants, focused on how the House collectively governs the HIM profession. The discussion concentrated on timely issues like how to position HIM professionals as experts in the practice of clinical documentation improvement, compliance, and quality assurance, as well as how to continue advancing the profession. AHIMA President Bonnie Cassidy, MPA, RHIA, FAHIMA, FHIMSS, congratulated the participants. “You have really set the stage for everything we will do for the next couple of years,” she said. For more information on the House of Delegates and its goals, visit the State Leaders and House of Delegates CoP, which is open to all members. Join this CoP by logging on at [www.ahima.org](http://www.ahima.org) and going to myAHIMA.

**AHIMA Elected Positions Call for Nominations**

Are you looking to learn something new or to share your knowledge and skills? Need a challenge to get out of a workplace rut? Consider volunteering for AHIMA. Volunteering with AHIMA is a rewarding experience that you simply can’t get on the job or in a class. Start considering a nomination for an elected position today. There are positions available on the AHIMA Board of Directors (President-elect and Directors positions) or the Commission on Certification for Health Informatics and Information Management (privacy professional, HIA educator, and CCS-P Professional). The deadline for the elected positions is January 31, 2012.

**Save the Date for Winter 2012 Team Talks, Hill Day**

Save the date for 2012 Winter Team Talks and Hill Day. These events will take place March 26–27 in Washington, DC, at the Capital Hilton Hotel. More information on registration and an agenda will be available in mid-January on the State Leader and House of Delegates CoP. Stay tuned for more details.

**AHIMA Hires New PR Firm**

AHIMA has hired [Public Communications Inc. (PCI)](http://www.pcirelations.com) to manage its public relations. PCI, a 49-year-old national firm based in Chicago, has a large healthcare practice and provides results-oriented, measurable public relations and marketing services. PCI will assist AHIMA with strategic counsel, media relations, event planning, video development, convention organization, and other outreach activities.

**Plan to Attend Free Education Webinar**

The number of colleges implementing HIM programs continues to increase, while student enrollment in HIM programs is growing and faculty members are retiring in larger numbers. These changes are creating new job openings for educators with practical HIM experience. Now is a great time to consider a career teaching HIM. Learn what requirements are needed to teach, where the jobs are, and how you can transition into teaching part time or full time.

Plan to attend the free AHIMA Webinar, “Shaping the Future—Transitioning Your Career to Teaching” on December 14 from noon to 1 pm ET. This session will be moderated by AHIMA’s director of education, Patt Peterson, MA, RHIA. [Register now.](http://www.ahima.org/events/viewEvent.cfm?eventID=31808)

**Congratulations to Advantage Survey Winner**

Congratulations to Laurie A. Ruybal, RHIT, who was the winner of the drawing for participating in a recent survey on the digital edition of AHIMA Advantage. Ruybal is the winner of a $50 American Express gift card.

**2011 AHIMA Convention Photos Now Available**

Smile! You may have been on AHIMA’s camera. If you attended the 83rd AHIMA Convention & Exhibit last month, you’ll want to peruse the event’s photo album. Our photographers roamed sessions, receptions, and the exhibit hall, capturing many memorable moments. For those who didn’t attend, check out the photos and see what you missed. View the photographs [here.](http://www.ahima.org/about-us/convention-conference/2011-ahtma-convention-heart-museum)
New Toolkits Available
Information Integrity in the Electronic Health Record: Data Integrity Toolkit
This paper explores best practices to ensure information integrity in the course of using and managing an EHR system, whether fully electronic or in a hybrid state, and covers practices for multiple processes from capturing information all the way through the continuum to sharing information.

Government Audit Toolkit
This toolkit is designed to provide guidance to HIM professionals on how to prepare for and ensure compliance in managing governmental audits. Reform of our healthcare system is currently under way. We can be certain that there will be intense pressure to squeeze every last dollar out of any and every possible governmental funding source. This financial pressure will further solidify the permanence of a multitude of governmental audits.

Call for Abstracts for 2012 Convention, AOE Now Open
AOE Call for Abstracts
The 2012 Assembly on Education and Faculty Development Institute meeting will take place July 23–27, 2012, in San Antonio, TX. Abstracts will be accepted through January 23, 2012. Submit your abstract before December 16, 2011, to be entered into a drawing for a $100 American Express gift card. Learn more and review the abstract guidelines.

Convention Call for Abstracts
The program committee for the 2012 AHIMA Convention and Exhibit invites you to submit papers for presentation during the 84th AHIMA Convention and Exhibit, September 29–October 4, 2012, at Chicago’s McCormick Place Convention Center. Learn more by visiting AHIMA’s Speaking Opportunities page.

Don’t Forget to Renew Your AHIMA Membership
AHIMA is committed to your success and provides the benefits and resources to enhance your career. Renew your member-ship today and continue receiving exclusive benefits such as access to expert trade publications like the Journal of AHIMA, AHIMA Advantage, and other publications; professional development programs; online and in-person networking opportunities; discounts on products and services; the Career Assist Job Board; and much more.

Don't forget with the ICD-10 transition close at hand, this is a more critical time than ever to renew your membership. We look forward to another year of supporting your professional endeavors and delivering opportunities to advance your career. There are three easy ways to renew online by logging into myAHIMA, mailing in your renewal notice, or by phone at (800) 335-5535.

CCS and CCS-P Exams Now Live
CCS and CCS-P exams have re-launched with immediate scoring. For more information on the exams, code books, or the new alternate item types, visit AHIMA's certification Web site.

The Date is Set for ICD-10
All coding exams will become ICD-10 compliant in March 2013. Stay tuned for more information on ICD-10 exam updates in 2012.

AHIMA’s Washington Office Welcomes Margarita Valdez
The AHIMA Advocacy and Influence team is excited to announce the hiring of Margarita Valdez as congressional relations manager. Valdez comes to AHIMA with a wealth of Capitol Hill legislative and communications experience from her service with the offices of Congressman Blake Farenthold (R-TX), Congressman Mike Rogers (R-MI), and C-SPAN. Congressman Rogers is a senior member of an important congressional committees with jurisdiction over health information management and technology issues, the House Energy and Commerce Committee, and its Health Subcommittee. The congressional relations manager is a new position in the AHIMA Washington, DC, office whose primary role will be to represent AHIMA before Congress. Please join us in welcoming Margarita Valdez to AHIMA.
Interview with Lynne Thomas Gordon, AHIMA CEO

What are some aspects of HIM that you really love?

One thing that I really love about HIM is that you really get the big picture of the hospital. You know what is going on. So, having that health information background gives you that depth of knowledge that you need. You get medical terminology, you understand the information flow, you understand the revenue cycle. It has just been a great background for me.

What interested you about the AHIMA CEO position?

When I saw the position’s specs I said, ‘You know what, I could really make a difference with this job,’ specifically in this time that we are facing now with this big change over from ICD-9 to ICD-10.

I’m a big fan of B-HAGs—the big hairy audacious goals—and I thought, ‘Okay this is a good B-HAG I would love to get my hands on.’ And the other thing was the fact that (HIM) is changing so much. We have such an opportunity in hospitals to be the go-to person for decision making.

How can HIM professionals become that go-to person?

Well, I do think we (HIM professionals) have the information at our finger tips and we understand the information better than anyone in the organization. But we need to do a better job of being proactive and providing information, or putting ourselves out there to be that go-to person.

What do you think you will bring to the association?

I did work myself up from the bottom, so I’ve seen (HIM) from an entry-level position all the way up to the HIM director and then healthcare administration. I can see the importance of our role and how it is viewed from the c-suite. It is almost like I’ve been preparing for this job all my life and I just didn’t know it.

What do you think you will bring to the association?

I did work myself up from the bottom, so I’ve seen (HIM) from an entry-level position all the way up to the HIM director and then healthcare administration. I can see the importance of our role and how it is viewed from the c-suite. It is almost like I’ve been preparing for this job all my life and I just didn’t know it.

How can AHIMA help its members change and adapt to some of the new initiatives (ICD-10, accountable care organizations, meaningful use, HITECH/HIPAA changes) that are presenting challenges?

We are going to need to listen to our membership so that we become sponges and say, ‘Okay, if this is going on what products and services do we provide to the members to make them successful?’

What is one piece of advice you could give to members on how to weather these exciting but also challenging times?

The great thing is our members are not alone. They have AHIMA that is going to be right there with them, partnering with them, listening to them, trying to do what they can to make sure that everyone is successful. Patient care is the ultimate issue that we can’t forget. Even though our job as an association is to be here for the members, it is all about the patients. And that is what I always try to say, ‘How can we tie this back to care?’ You can lose that when you are in your day-to-day, because you are so busy, but it always ties back to that.

Why is the work that AHIMA members do so vital to the healthcare industry?

I think accurate, timely data is critical for quality patient care. The other thing is we are so critical for future research. Future changes that need to take place in critical care will become evident through our coding. We make sure that people can pull up what they need to do research down the road.

The revenue cycle piece—it is so critical that we get our job done so that we can get bills out and paid on time. And then of course privacy, security, and confidentiality. We are the conscience of healthcare. We need to be the people that are really saying, ‘Wait, have you thought about this?’ Because if we don’t do it, who is going to do it?
CSA Core Service Awards Announced

Congratulations to the Louisiana Health Information Management Association (LHIMA) for winning the CSA Core Service Award for Diversity with its employer awareness letter-writing campaign. The LHIMA state president sent a customized letter to each employer detailing that volunteer’s role in the Association, describing more about LHIMA, and thanking them for allowing and encouraging their employee to volunteer. At the end of the year, another letter will be sent thanking the employer for their support and outlining the accomplishments of LHIMA.

AHIMA also congratulates the Florida Health Information Management Association (FHIMA) on winning for Legislative and Regulatory Advocacy. FHIMA developed and implemented a local/regional-based approach to reaching state representatives. The overall goal was to improve visibility of FHIMA and the HIM profession. They created the slogan, the “missing piece of the healthcare puzzle,” along with a jigsaw logo. The essential message is that the HIM profession is the lifeblood of the healthcare system. FHIMA’s state leaders have already met face-to-face with 10 legislators and plan to continue these efforts into 2012.

House of Delegates Adopts New Bylaws, Updated Code of Ethics

At AHIMA’s National Convention last October, the House of Delegates passed new bylaws bringing the association into the 21st century in regard to governance. The revised bylaws better reflect AHIMA’s strategic alignment and its strong commitment to members.

The new bylaws arose from the need for authority, oversight, and the roles of Board of Directors and the House of Delegates to be more clearly delineated. The idea of developing new bylaws was the result of a presentation in 2010 at the Leadership Conference about the importance of fiduciary responsibility. It increased awareness of the official duties of the Board and the need to clarify the roles of AHIMA’s two governing bodies.

A Timeline of the Process
Since bylaws are a legal and governing document of the association, the AHIMA attorneys worked with the House’s guidance to craft a first draft of bylaws, which was shared at Summer Team Talks in July. Through an iterative process, the proposed bylaws were thoroughly examined and discussed by both delegates and members. After extensive review, the bylaws were ready to be voted on at the October meeting.

The new bylaws specify that the role of the House of Delegates is to govern the profession of HIM, providing a forum to establish and maintain professional standards, while the role of the Board is to govern the association. In addition, the greater flexibility incorporated in the revised bylaws enables AHIMA to respond to regulatory and market challenges more efficiently. This increased agility is critical to success in today’s rapidly changing HIM environment.

What the New Bylaws Mean for You
The revised bylaws are also now in line with corporate, federal, and state laws that have evolved since the last bylaws revision occurred in 2000. For example, there are now increased transparency and accountability standards being applied to nonprofits. Further, many of the association’s best practices have changed much over time and are now reflected in the revised bylaws.

Another important new feature of the revised bylaws is the creation of the speaker and speaker-elect positions for the House of Delegates. Unlike the Board of Directors, the speaker and speaker-elect will be voted on by delegates only. The speaker will serve as a member of the Board of Directors and chair the House of Delegates. Learn more about AHIMA’s revised bylaws, here.

New Code of Ethics Adopted
Another success at the national convention was the adoption of a new Code of Ethics. Thanks to the hard work and dedication of the 2011 and 2010 Professional Ethics Committees (PEC), the House of Delegates approved the new code on October 2.

Why was a revised Code of Ethics necessary and what is its purpose? Imagine a colleague is lying about his or her credentials, engaging in negligent coding practices, or disclosing private patient information. These are the types of activities that the new Code of Ethics is designed to prevent. Undoubtedly, ethical obligations are central to the work of HIM professionals. Thus, guidelines must be provided not only to promote high standards, but also to establish ethical principles and determine a framework for professional behavior.

The new code replaces the previous code which was last updated in 2004. While the principles and guidelines from the 2004 version remain similar, the language was updated to reflect changes in healthcare, association management, and technology. The new code also includes stronger language based on recent ethics violations encountered by the PEC, such as the misrepresentation of one’s credentials or past professional experience.

In addition to strengthening some guidelines, new guidelines were added. The new guidelines focus on the duties of health information management professionals such as cooperating with authorities, facilitating collaboration among colleagues, and working as mentor for students and peers. As with the previous Code of Ethics, alleged violations are subject to a thorough peer review process. Learn more about the new Code of Ethics and other ethics-related information.
Fellowship IDs AHIMA Super Members

Carolyn Valo, MS, RHIT, FAHIMA

AHIMA Fellows are the super members of the association. Their vast HIM experience, high education, and lifelong commitment to the HIM industry and AHIMA have earned these members the acknowledgment of being the best of the best. Those five letters—FAHIMA—show that an HIM professional is a lifer, unflinchingly devoted to the cause of quality healthcare through quality information.

Carolyn Valo, MS, RHIT, FAHIMA, will help decide who can join that exclusive AHIMA club when she becomes chair of the AHIMA Fellowship Committee in 2012. Valo, who achieved Fellow status in 2007, takes the responsibility of vetting Fellow candidates seriously. The right mix of experience, background, and involvement is necessary for someone to be considered a Fellow. Out of the association’s 63,000 members, only just over 100 members have been named Fellows.

For Valo, earning the designation was a validation of her years of hard work and a proud moment in a long HIM career that began just before she joined AHIMA in 1975. Applying for Fellowship is like auditing your life and career—going through all of the experiences, volunteering, and career choices to see if they add up to meet the strict Fellow criteria.

“Fellowship was a good way for me to look back and see, ’Did I really commit myself to giving back to this organization that has become the basis for my chosen career and profession?’” Valo said. “Did I meet those markers? Did I really support my organization? Did I give back in a diverse enough way?”

Becoming a Fellow

Valo is currently the senior proposal specialist for Siemens Medical Solutions, but she has worked in every facet of the HIM industry—public health, hospitals, home health, consulting, education, and for vendors. Through it all she stayed active in AHIMA and the industry.

Her path to Fellowship began in college, where a HIM professor encouraged her to not just join AHIMA but get actively involved from the start of her career. The day she graduated, Valo signed up for an education committee at her state AHIMA association. She would go on to serve on many task forces, councils, and committees, including serving as president of the Minnesota Health Information Management Association, serving as a member of the AHIMA Nominating Committee, writing Journal of AHIMA articles, serving as a national convention speaker, and receiving the Distinguished Member Award from the MHIMA.

One reason Valo wanted to become a Fellow was to honor her parents, who were strong advocates for education and “choosing a profession that you could really feel good about,” she said. She joined the Fellowship Committee for the same reason she has taken on the numerous other AHIMA volunteer opportunities—it gives her a chance to expand her knowledge of HIM and learn from other HIM professionals.

Committee Currently Seeking Fellows

The AHIMA Fellowship Committee is a group of fellows responsible for reviewing candidate applications and appointing qualified members Fellowship status. A strict set of criteria is used to evaluate a candidates’ application and essays using a point system, looking at categories like years of AHIMA membership, education, credentials and certifications, awards, professional title, and professional participation—such as one’s frequency of volunteering in the industry. Points are assigned for the various categories, with a minimum number of points required to become a Fellow. If a candidate is not named a Fellow, the committee can appoint a mentor to help the candidate fill out the missing elements of their resumes. For example, if a candidate is lacking in the participation area, a mentoring Fellow could help the mentee identify volunteer opportunities for the next year that round out their application.

Recently Valo mentored a Fellow candidate who was unsuccessful their first time applying. Valo used a Fellowship guide she wrote to help her mentee, identifying areas they should strengthen before reapplying for Fellowship. With the help of her mentorship, Valo’s mentee was able to become a Fellow at their next review.

“We want everyone to succeed,” Valo said. “So if they are not quite there, we offer those (mentoring) services. The goal from my perspective is to use the opportunity as a way for the candidate to just have some time to dialogue and look at how they might progress in certain areas. It is very collaborative. These are our peers, so you want to approach this in a way that is really supportive because many have excellent applications— they are just a little short in a few areas.”

HIM Passion Needed

AHIMA Fellows are expected to be the leaders of the association; active, engaged and devoted to the HIM profession and its association, Valo said. Fellows provide guidance, support, and encouragement to fellow HIM professionals and volunteer their time to grow both the association and the HIM industry.

All Fellows share a passion for the HIM industry. For Valo, HIM has held her interest all these years because it keeps changing and offers a wide variety of diverse areas. Over the years Valo has appreciated that she didn’t have to stick to one area of expertise, but could move around HIM learning new areas.

Part of being a Fellow is having diverse experiences and expertise. As an AHIMA Fellow and incoming chair of the Fellowship Committee, Valo encourages others to sample the different areas of HIM and dive into those that pique their interest. “From standards to regulatory to coding to quality management to whatever the case may be, there are just a lot of component pieces that make up HIM,” she said. “What it does for me is it keeps me fresh, it allows me to grow.”

AHIMA ADVANTAGE
AHIMA Foundation Silent Auction, Booth Bring in Generous Donations at Convention

The AHIMA Foundation’s 16th annual Silent Auction and booth were once again a resounding success at the 2011 AHIMA convention, generating more than $49,000 in philanthropic donations and gifts to the Foundation. The Foundation collected more than $21,000 in donations at the auction. Over 90 desirable items were generously donated (from component state associations, corporations, and AHIMA members) for the auction bidding, including iPads, Kindles, Coach purses, and art work. Additionally, several charitable contributions were made from donors in lieu of auction items.

Silent Auction Highlights
For three and a half days at convention, members stopped by to place bids and check the status of their favorite items. Right up to the last minute when the auction closed, there were several heated bidding wars going on to take home some popular items. Many convention attendees also elected to give an outright donation at the Foundation booth, helping to raise more than $28,000.

Auction Supports Education
All proceeds from the Silent Auction will support the Foundation’s Merit Scholarship Program, which provides educational funding to outstanding students pursuing graduate and undergraduate degrees in HIM. In 2010, more than $94,000 was awarded to 72 students, and through fundraising activities like the Silent Auction, the Foundation hopes to increase the number of scholarships awarded in 2011. For more information on the Merit Scholarship Program, visit the Foundation Web site.

The AHIMA Foundation Board and Staff would like to sincerely thank everyone who helped make this year’s Silent Auction such a success: those who contributed to the auction, convention attendees who took part in the bidding, the high bidders, those who donated at the booth, and especially our outstanding volunteers for helping us manage the auction and booth activities. Keep an eye out in the coming months for information on how you can contribute to the 2012 Silent Auction in Chicago, IL, where we look forward to celebrating the Foundation’s 50th anniversary.

Consider the AHIMA Foundation in Your Year-end Giving
As the end of the year approaches, the AHIMA Foundation reminds members to consider their giving options to support the Foundation’s important programs, while realizing the tax benefits that come from making a donation. For members who did not have a chance to donate at convention—whether you could not attend or you did not place the top bid for the item of your choice, you can still help support the Merit Scholarship Program. Online donations and pledges may be made via the secure Foundation Web site. Also, keep in mind that this time of year is an excellent opportunity to honor or memorialize HIM colleagues, family members, and friends, and the Foundation provides options to recognize your donation in tribute to a loved one.

As you make your philanthropic plans for 2012, we hope you will consider the AHIMA Foundation as an important organization to support, one that is directly contributing to the future of the health information industry, through Merit Scholarships and other vital programs. The AHIMA Foundation sends our thanks to all of the members for their support this year, along with best wishes for a wonderful holiday season and a healthy and prosperous 2012.

AHIMA Foundation Acknowledges Memorial Gifts
The following memorial gifts were made to the AHIMA Foundation between September 1–30:

In Memory of the sister of AHIMA staff member Reta Blue
Donald T. Mon, PhD, FHIMSS
In Memory of Donna M. Roberts, CCS
Debra A. Boppre, RHIA, CCS, CCS-P

The Foundation welcomes and greatly appreciates support from AHIMA members, friends, and other individuals, as well as corporations and component state associations. Your contribution helps us continue to provide important HIM education and research funding. Gifts can be made in honor or in memory of someone special, and named scholarship funds can also be established. Visit the Foundation Web site to learn more about ways to support the AHIMA Foundation.
Mentors, Mentees Share their Perspectives

The implementation of EHRs and the upcoming transition to ICD-10-CM/PCS are enough to keep HIM professionals busy. However, HIM professionals also have a duty that goes beyond the workplace. With so many new professionals entering the growing HIM field, the need for mentors is skyrocketing. AHIMA Advantage recently spoke with a mentor and a mentee about their experiences and what they have learned from the mentor program. Learn more about AHIMAs mentoring program here.

A Mentee’s Perspective
by Elizabeth Horn
2011–2012 Student Advisory Council Member

Attending the 2011 AHIMA National Convention was a life-changing experience as a student taking a non-traditional HIM path. I’m pursuing a career in medicine as a doctor and then hope to move up the ranks as a hospital administrator. Sometimes it can get very discouraging knowing that my HIM career won’t really start for some time.

However, meeting AHIMA board member Diann H. Brown, MS, RHIA, CHP, and connecting with her during the convention changed my perspective on my path. Brown encouraged me to keep up my hard work and assured me that it will help with my career in HIM. She explained that her boss at her facility was a physician. Brown’s enthusiasm, encouragement, and excitement over my educational path provided me with the push and motivation I needed.

I encourage professionals to reach out and serve as mentors because not only does it help students gain experience but you make a real difference in a mentee’s career path and even become their role model.

In my experience, there is no better way to give back and serve new HIM professionals than participating in the mentoring program and fostering the future professionals within the field.

A Mentor’s Perspective
by Patience Hoag
RHIT, CHCA, CCS, CCS-P, CPHQ, AHIMA Mentor

Laquan Black contacted me about four years ago while she was a student. She found my name on the list of mentors on the Student CoP, and requested my assistance as she began her career. From time to time, we would exchange e-mails, and even as Black’s career blossomed our communication never ceased.

She was always thoughtful and considerate of my time, and understanding when travel or family circumstances prohibited my immediate response to her question.

Last June, I notified Laquan that my e-mail address would be changing due to a new job. She encouraged me as I made the leap from a company I’d been with for over nine years, which meant a lot. Laquan e-mailed to let me know she was attending the 2011 AHIMA convention and to ask if I was attending. I was so excited at the prospect of finally meeting her, and on October 2, it finally happened. We had a great evening of talking and sharing and now we are convinced that our connection was meant to be. We are excited at the prospect of growing our friendship as a result of this meeting.

I want to share with the AHIMA community that all members should take time to mentor a student or new grad as they begin their career. Don’t think that your time is so valuable that you can’t invest it in the next generation of HIM professionals. I’ve gained far more than I invested when I responded to Laquan’s initial e-mail; I gained a true friend.

Become a Mentor Today

Experienced HIM professionals are needed to guide students, new members, and current members as they transition into the field or into a new job role. Share your knowledge and skills with the next generation. If you are interested in becoming a mentor, e-mail your resume and a brief paragraph stating why you would like to become a mentor before December 31.
Revised Eligibility Requirements for CHPS/CHDA Exams Begin in 2012

The Commission on Certification for Health Informatics and Information Management (CCHIIM) has expanded the pathways for eligibility for the Certified in Healthcare Privacy and Security (CHPS) and Certified Health Data Analyst (CHDA) exams.

According to the new requirements, candidates with an associate's degree and the pre-requisite years of HIM experience would be eligible to sit for the exam. This would allow a significant-sized group of AHIMA certificants to sit for the exams that were previously not eligible to despite many years of experience.

Changing the eligibility requirements for these credentials paves the way for many qualified AHIMA members who would otherwise have no way of obtaining the credentials without the time and expense of obtaining a higher degree. In providing the updated requirements, CCHIIM hopes to certify more CHPS and CHDA candidates and provide more ways for HIM professionals to grow and advance.

Reasons for the Change

The driving force behind the revised requirements is to allow more opportunity for those who are RHITs without bachelor's degrees to obtain advanced credentials. Since the inception of these exams, CCHIIM has received a great deal of feedback from professionals who perform the job duties associated with these credentials, yet are not currently eligible to sit for the exams. Time has shown that individuals who work in privacy, security, and data analysis have a variety of backgrounds beyond what was initially slated in the eligibility requirements.

CCHIIM decided to update the eligibility requirements to better reflect current education and experience levels as found in the industry. This is important to the HIM field because increasing the number of individuals with recognized advanced specialty credentials demonstrates the increasing expertise of HIM certified professionals.

By implementing the revised eligibility requirements, CCHIIM hopes to empower AHIMA certificants who have extensive industry experience but previously didn't qualify for mastery level certifications solely because of lacking a higher degree. The alternate pathways are also intended to be more inclusive of individuals from sectors besides HIM, such as informaticists or individuals in information technology who desire a credential to expand their careers into the realm of HIM.

Rationale for Revised Eligibility Requirements

The revised eligibility requirements were determined based on a combination of education and experience. Exam applicants must meet one of the following eligibility requirements for the CHPS Examination:

- Associate's degree and six years experience in healthcare privacy or security management
- Healthcare information management credential (RHIT) and minimum of four years of experience in healthcare privacy or security management
- Baccalaureate degree and a minimum of four years experience in healthcare privacy or security management

The revised eligibility requirements will go into effect in January 2012. For more information, visit AHIMA's certification Web site.
**Ambassador Program Supports ICD-10 Trainers**

The AHIMA Ambassador program was developed to support AHIMA approved ICD-10 trainers. AHIMA approved trainers must attend an ICD-10 Train the Trainers Academy and pass the end of learning assessment (scoring an 80 percent or higher) after the academy. Approved trainers must renew their certificate each year to remain as an AHIMA-approved trainer. The renewal process occurs between April and June in a calendar year, which includes required learning activities on the newly released ICD-10 information, completion of a self-assessment, and the renewal fee.

**Program Benefits**
Ambassadors enjoy several benefits that assist them in their training.

1. Program continuing education unit (CEU) prior approval (waived fees, valued at $225 or more for nonprofits and $450 or more for for-profits)
2. Special discounts on ICD-10 Academy student manuals
3. Access to a dedicated Ambassador Web page, where ambassadors are marketed for training opportunities
4. Dedicated ICD-10 Ambassador Community of Practice (CoP)
5. Online meeting support and registration (through an outside vendor)

**Expedited CEU Approval**
Program CEU prior approval allows an ICD-10 Ambassador to have the ability to provide CEUs to prospective students within a prior approval format. Students who attend an ambassador training session know that the curriculum is AHIMA approved. Ambassadors are automatically approved under this benefit and do not have to file the prior approval application. Ambassadors must provide students with either a certificate or other document that states the number of CEUs for the training session. Training programs conducted by ambassadors also can assist certified AHIMA professionals meet their ICD-10 CEU requirements. For additional information on ICD-10 CEU requirements, please review AHIMA’s “ICD-10 CE Requirements for AHIMA Certified Professionals.”

**Discounts on Resources**
Ambassadors receive discounts on the ICD-10-CM and PCS coder training manuals, the ICD-10-CM and PCS draft code set books, and the ICD-10-CM mapping book. Designed in a cost-effective model, the discounts allow AHIMA ICD-10 trainers the ability to use AHIMA materials in their curriculum. The discount structuring continues to be examined and if additional discounts should be applied.

**Communication Tools**
AHIMA is developing a Web page dedicated to promoting the ambassador program and ambassadors. The proposed page will allow potential clients to search for ambassadors by demographic information and training specific criteria. AHIMA has collected specific training data on ambassadors through the enrollment process such as outpatient experience, public health experience, and mapping. Ambassadors will also have the ability to link their personal Web site for potential clients.

Ambassadors are provided a dedicated ICD-10 Ambassador CoP to allow communication and collaboration. The CoP is the primary method by which AHIMA communicates with ambassadors. However, access to the CoP is limited to ambassadors who are AHIMA members, therefore non-AHIMA member ambassadors receive information outside the CoP. Potential training leads will be posted to the CoP for ambassadors to contact potential clients.

AHIMA and an online meeting support vendor have collaborated to provide ambassadors logistical support. This support will include, personalized training Web pages, online meeting registration, payment processing, and post-training session surveys. Ambassadors are not required to use this vendor; however, to become eligible for the Ambassador Recognition program, the ambassadors must use the online service. AHIMA plans to use aggregated data from the vendor to identify top AHIMA ICD-10 trainers in areas such as most students trained and highest rated trainer.

Further development of the Ambassador program will include additional benefits. Potential other benefits for ambassadors may include discounts on distance education courses that could be offered to students in the training courses and the new ICD-10 CM and PCS assessments. These new ICD-10 CM and PCS assessments provide students with an instant score and the strengths and weaknesses in ICD-10 topic areas. Ambassadors could use the assessments to test the post-training session knowledge.

We encourage any AHIMA approved ICD-10 trainers to enroll in the Ambassador program to support their ICD-10 training. Starting January 1, 2012, a fee will be charged to enroll in the Ambassador program but will include all the program benefits.
AHIMA Recognizes 2011 RACE Winners

Coding is at the core of the work that many HIM professionals do each day. AHIMA understands the importance of excellence in coding and provides annual awards to exceptional individuals and Component State Associations (CSAs) with the prestigious RACE recognitions.

The Roundtable Achievement in Coding Excellence (RACE) awards are distributed to coding roundtable coordinators, coding round table teams, and CSA supporters. Each year the outstanding recipients are recognized at the Clinical Coding Community Meeting which takes place at AHIMA’s National Convention. It is with pleasure that we congratulate the following winners.

AHIMA Coding Roundtable Coordinator Recognition for Excellence

First place: Jennifer Artigue, RHIT, CCS – Louisiana
Second place: Natalie Sartori, MEd, RHIA – South Carolina

AHIMA CSA Recognition for Coding Leadership

First place: Louisiana Health Information Management Association (LHIMA)

Second place: North Dakota Health Information Management Association (NDHIMA)

AHIMA CSA Team Recognition for Coding Roundtable Activities

First place (three-way tie): Louisiana (LHIMA), North Carolina (NCHIMA), and South Carolina (SCHIMA)

Second place winner Natalie Sartori was thrilled to be a part of this exciting effort. “It was an honor to be a winner of the AHIMA RACE award. This recognition would not have been possible without the hard work and strong foundation constructed by coding roundtable leaders before me, the support of the current SCHIMA Board, and the SCHIMA members who also selflessly volunteer their time and expertise in the pursuit of excellence in coding education,” she says.

AHIMA’s Professional Practice Resources Manager Kathy DeVault echoes Sartori’s sentiments. “The Coding Roundtables provide affordable coding education throughout the states and without their efforts many coders would not have this opportunity for continuing education,” she says.

Are you interested in getting involved in 2012? Contact your state association for more information, and remember nominations for the RACE awards begin in July. Any AHIMA member can nominate their state coding roundtable for recognition. Your work to make roundtables successful in your state is very much appreciated. Let’s keep doing great work in 2012.
AHIMA Certification Exam Preparation Resources

AHIMA CERTIFICATION ENSURES MAXIMUM CAREER POTENTIAL
AHIMA issues credentials in health information management (HIM), coding, health data analysis, clinical documentation improvement and healthcare privacy and security, establishing professional standards of excellence. AHIMA offers exam preparation resources to help you prepare for your exam, including online practice exams, books, and online courses. For a complete list of publications and online training recommended as resources for AHIMA exams, visit ahima.org/certification and select “Exam Resources.”

EFFECTIVE JANUARY 1, 2012
AHIMA’s Commission on Certification has revised the eligibility criteria for CHDA and CHPS. Now more people will be able to meet the requirements to sit for the exams. See the new eligibility requirements on the CHDA and CHPS pages at ahima.org/certification.
E-Learning and E-Assessments

ONLINE COURSES

RHIT Exam Prep Series
Confidently prepare for the Registered Health Information Technician (RHIT) certification exam with AHIMA's RHIT Exam Prep series! This series is for candidates who successfully finished a CAHIIM-accredited HIM college program and plan to sit for the RHIT certification exam. With these self-paced 6- and 12-lesson courses, you can thoroughly review and reinforce your knowledge of specific domains covered by the examination:
- RHIT Domain 1—Health Data Management (12 lessons)
- RHIT Domain 2—Health Statistics, Biomedical Research, and Quality Management (6 lessons)
- RHIT Domain 3—Health Services Organization and Delivery (6 lessons)
- RHIT Domain 4—Information Technology and Systems (6 lessons)
- RHIT Domain 5—Organizational Resources (6 lessons)

Each course sold separately.
6-Lesson Course Price: $59, Member Price: $49
12-Lesson Course Price: $89, Member Price: $79

CHDA Exam Prep Series
Ready yourself for the Certified Health Data Analyst (CHDA) certification exam with AHIMA's CHDA Exam Prep series! This series is for individuals preparing to obtain the CHDA credential. With these self-paced six-lesson courses, you can thoroughly review and reinforce your knowledge of specific domains covered by the examination:
- CHDA Domain 1—Data Management (6 lessons)
- CHDA Domain 2—Data Analytics (6 lessons)
- CHDA Domain 3—Data Reporting (6 lessons)

Each course sold separately.
6-Lesson Course Price: $59, Member Price: $49

NEW! CHPS Exam Prep Series
AHIMA has just launched a new series of online courses designed for those who are preparing to take the Certified in Healthcare Privacy and Security (CHPS) certification examination. These courses will review and reinforce your knowledge of specific domains covered by the examination:
- CHPS Domains 1 and 4—Ethics, Regulation, Investigation, and Compliance (6 lessons)
- CHPS Domain 2—Program Management and Administration
- CHPS Domain 3—Information Technology
- CHPS Domain 5—Customer, Client, Patient Services

Each course sold separately.
6-Lesson Course Price: $59, Member Price: $49
12-Lesson Course Price: $89, Member Price: $79

ONLINE PRACTICE EXAMS
Are you taking your certification exam? Are you considering registering for the exam but not sure if you are ready? AHIMA's RHIT, RHIA, and CCA online practice exams are the perfect tool for you! The computer-based practice exams measure your skills and general readiness to sit for the exam, and feature questions from domains of the exam blueprint, written by the same item writers who developed questions for the official exam. Upon completion, you will receive a score report that shows your strengths and where knowledge enhancement is needed. Use that information to determine your next steps in the exam preparation process. Take the practice exam before you register or take it close to your exam date to gain the confidence you need to succeed!

For more information, please visit: ahima.org/certification.

Prices and course availability subject to change
**New Edition**

**Certified Coding Associate (CCA) Exam Preparation**

**Second Edition**

Dorine L. Bennett, EdD, MBA, RHIA, FAHIMA, and Kathy L. Dorale, RHIA, CCS, CCS-P, Editors

Certified Coding Associate (CCA) Exam Preparation provides ICD-9-CM and CPT® practice you need to face the CCA certification exam with confidence. The practice exams and practice questions included on the accompanying CD-ROM simulate the exam experience and provide opportunities to apply your knowledge and skills.

CCA Exam Preparation includes general exam information and covers the following CCA domains:

- Domain 1: Classification Systems
- Domain 2: Reimbursement Methodologies
- Domain 3: Health Records and Data Content
- Domain 4: Compliance
- Domain 5: Information Technology
- Domain 6: Confidentiality and Privacy

**Order Information:**

Prod. No. AC400311 • ISBN: 9781584263111 • Approx. 140 pages • © 2012 • Softcover • Member Price: $52.95 • Price: $65.95

**New Edition**

**Certified Coding Specialist (CCS) Exam Preparation**

**Fourth Edition**

Jennifer Hornung Garvin, PhD, MBA, RHIA, CPHQ, CCS, CTR, FAHIMA

Combining in-depth study materials covering CPT, ICD-9-CM, and HCPCS Level II with comprehensive testing practice, Certified Coding Specialist (CCS) Exam Preparation provides the added knowledge and test-taking skills to help you face the CCS certification exam with confidence. The practice exams, supplemental practice questions, case studies, and accompanying CD-ROM help simulate the exam experience, providing opportunities to test your knowledge and skills.

**Key Features**

- Two practice exams based on and organized by the CCS competency statements
- Inpatient and outpatient medical cases and multiple choice questions
- CD-ROM contains 180 practice questions

**Order Information:**

Prod. No. AC400411 • ISBN: 9781584263135 • 304 pages • © 2012 • Softcover • Member Price: $52.95 • Price: $65.95

**New Edition**

**Certified Coding Specialist—Physician-based (CCS–P) Exam Preparation**

**Fourth Edition**

Anita C. Hazelwood, MLS, RHIA, FAHIMA; Lynn Kuehn, MS, RHIA, CCS-P, FAHIMA; and Carol A. Venable, MPH, RHIA, FAHIMA

Whether you’re still a student or already on the job, Certified Coding Specialist—Physician-based (CCS–P) Exam Preparation provides the direction, skills, and knowledge you need to successfully prepare for the exam. The book’s practice exams are based on and organized by the CCS–P competency statements and will help prepare you for the exam experience.


**Key Features**

- Each practice exam contains 60 multiple choice items and 16 complex medical cases for coding
- Answers include rationales and references to enhance learning
- 240 multiple choice items covering all seven CCS–P domains are also on CD-ROM to help simulate the exam experience
- CD includes self-scoring feature and is Windows-compatible

**Order Information:**

Prod. No. AC400211 • ISBN: 9781584263128 • 248 pages • © 2012 • Softcover • Member Price: $52.95 • Price: $65.95

**Order online anytime—ahimastore.org**

(800) 335-5535
New Edition
Registered Health Information Administrator (RHIA)
Exam Preparation
Third Edition
Patricia Shaw, MEd, RHIA, FAHIMA, and Darcy Carter, MHA, RHIA, Editors

Confidently prepare for the RHIA exam with Registered Health Information Administrator (RHIA) Exam Preparation. The exam experience is effectively simulated with nearly 1,000 multiple choice questions, including three complete practice exams based on the RHIA competency statements. Whether you’re still learning or ready to test your skills immediately, RHIA Exam Preparation will help prepare you for exam day.

The practice exams and practice questions are organized by the following RHIA domains:
• Domain 1: Health Data Management
• Domain 2: Health Statistics and Research Support
• Domain 3: Information Technology and Systems
• Domain 4: Organization and Management
• Domain 5: Privacy, Security, and Confidentiality
• Domain 6: Legal and Regulatory Standards

Key Features
• Three complete practice exams
• More than 900 additional practice questions organized by the RHIA domains
• Answers include rationales and references
• 4,500 HIM e-flashcards on CD-ROM

Order Information
Prod. No. AB106011 • ISBN: 9781584263357 • Approx. 236 pages • Softcover
• © 2012 • Member Price: $52.95 • Price: $65.95

Coming in 2012!
EXAM PREP WORKSHOPS
Learn the information you need to master the exams for:
• Certified Health Data Analyst (CHDA)
• Certified in Healthcare Privacy & Security (CHPS)

Visit ahima.org/events for more information.

(800) 335-5535

Certified Health Data Analyst (CHDA) Reference Guide
Susan White, PhD, CHDA, and June E. Bronnert, RHIA, CCS, CCS-P

Certified Health Data Analyst (CHDA) Reference Guide is a collection of readings intended to prepare candidates for the CHDA exam. The CHDA credential was created to meet the demands of a health information management (HIM) industry that is increasingly data-driven and data-dependent. Individuals who earn the CHDA designation achieve recognition of their expertise in health data analysis, and validation of their mastery of this domain. Candidates may also find A Practical Approach to Analyzing Healthcare Data useful in preparing for the CHDA exam (page 35).

Key Features
• Three sections, one for each CHDA domain: data management, data analytics, and data reporting
• Compilation of more than 80 readings from AHIMA Practice Briefs, Journal of AHIMA, and other sources organized by CHDA domains
• Alphabetical list of resources and an extensive glossary
• Basic CHDA exam information, including exam competencies

Order Information
Prod. No. AB100909 • ISBN: 9781584262671 • 654 pages • Softcover • © 2010
• Member Price: $62.95 • Price: $77.95

Order online anytime—ahimastore.org