# News & Views

September 2007





# President's Message

Hello to all. This time of year always proves to be challenging in my job with preparing for all the coding and DRG changes – this year even more so than ever before. It just reminds me of the wealth of knowledge each of us as HIM professionals must maintain to adequately perform our daily duties. Although it is trying, challenging and exhausting, I wouldn't want it any other way. It truly shows what a unique profession this is and makes me proud to be a part of it.

The 5 delegates attended Leadership Conference and Team Talks in Chicago over the summer. The focus of the meeting was on strategic planning and governance. It was a very motivating meeting, and all of the delegates came back inspired and full of new ideas. As a result, the Board is having a special strategic planning session the evening before the Fall Conference in Omaha. I hope to have a framework of the strategic plan to share with you at the fall meeting.

There are two resolutions that the House of Delegates will be voting on electronically in at the end of September. The first proposed resolution is on Diversity. This calls for the AHIMA Board of Directors to implement a standing Diversity Management Program and FORE to expand scholarship opportunities to underrepresented population of AHIMA. The second is on HIM adoptions of the Personal Health Record. This resolution charges all HIM professionals to create their own PHR and be the leaders in this movement. A copy of these resolutions is included in this issue as well as on the Nebraska Geographic CoP. I would like to hear your feedback on these resolutions. Please post any comments on the CoP, or email a Board member with your thoughts.

The Fall Conference on September 20<sup>th</sup> and 21<sup>st</sup> is rapidly approaching. I hope to see you all in Omaha as the planning team has worked hard to develop a diverse and educational program. Please see the brochure published in this edition. Also, the AHIMA annual convention is being held October 8<sup>th</sup>-10<sup>th</sup>.

I am so honored and excited to be serving as President of NHIMA this year. We held our first Board meeting in August, and it is a very energetic group with a lot of passion. It will prove to be a very busy and productive year. Speaking on behalf of the Board, if you have any questions or concerns, please bring them forward. Your input is valuable to us as we lead this organization.

richeokens

Kari Eskens, RHIA - NHIMA President



## **Proposed Resolution on Diversity**

Submitted by Diversity CoP members:
Dwayne M. Lewis, RHIT, CCS
Vera Rulon, RHIT, CCS
Stacie L. Buck, RHIA, CCS-P, LHRM, RCC
Supported by the Board of Directors

#### **Intent:**

This resolution is intended to advance AHIMA's commitment to a culture that respects diversity throughout its organization, the federation and the HIM profession at large. To achieve this end, this resolution calls upon AHIMA and its affiliates to reaffirm:

The inclusiveness of membership within AHIMA and the availability of opportunities for all.

- The adoption of meaningful, actionable and durable diversity practices to expand the real opportunities available to all HIM professionals, including opportunities to fully participate in AHIMA.
- Engaging the AHIMA community in advancing the goals of enhanced professional opportunities for all and improved value of the membership experience.
- The respect of individual sensibilities, personal beliefs, differences, and privacy and other rights of all HIM professionals and AHIMA members.
- Monitoring the impact of these practices to improve and strengthen them over time.

#### Preamble:

Whereas, human diversity can be defined as differences in race, ethnicity, nationality, gender, sexual orientation, socio-economic status, age, physical capabilities, and religious beliefs;

Whereas, vast professional diversity exists within the expansive domains of HIM practice;

Whereas, all humans are possessed with unique, rich cultural histories, backgrounds and personal experiences deserving of universal respect and acceptance;

Whereas, AHIMA's student population promises greater future diversity in AHIMA membership;

Whereas, it is believed that greater diversity enriches and adds value to AHIMA membership, the HIM practice experience, and the innovation and creativity of AHIMA;

Whereas, the AHIMA Code of Ethics clearly states that the "inherent dignity and worth of every person" should be respected.

## Therefore, let it be:

*Resolved*, That AHIMA's Board of Directors will examine and update as necessary the standing Diversity Program continuing to enable and encourage participation by national and state leaders of AHIMA and its membership.

*Resolved*, That the AHIMA Diversity Program will serve as an effective means for promoting a culture of diversity and expanding professional opportunities for all and volunteer leadership opportunities in the AHIMA and its affiliated organizations.

*Resolved*, That Component State Associations affiliated with AHIMA should be encouraged to adapt and implement AHIMA's Diversity Program practices to better serve their members.

*Resolved*, That AHIMA's Foundation of Research and Education should evaluate on an ongoing basis the scholarship opportunities for students of personal or professional characteristics currently underrepresented in the HIM profession and the faculty that teach them and seek additional funding where needed.





Submitted by Missouri CSA:

Marsha Dolan, MBA, RHIA Stacie Durkin, MBA, RNC, RHIA Daphne Terrill, MA, RHIA Julie Wolter, MA, RHIA Endorsed by the AHIMA Board of Directors and the PHR Practice Council

## **Intent:**

This resolution is intended to charge Health Information Management (HIM) professionals with the responsibility of creating and maintaining their own personal health record (PHR). HIM professionals are ideally suited through their education and professional capabilities to inform consumers and healthcare providers about the benefits of the PHR. They are leading the way and serving as role models in this effort.

The American Health Information Management Association (AHIMA) through its PHR workgroup developed a definition of a PHR in March, 2005.

"..an electronic, universally available, lifelong resource of health information needed by individuals to make health decisions. Individuals own and manage the information in the PHR, which comes from healthcare providers and the individual. The PHR is maintained in a secure and private environment, with the individual determining rights of access. The PHR is separate from and does not replace the legal record of any provider."

Personal health information is a valuable resource to individuals, their families, and the doctors, nurses, and other healthcare professionals who provide treatment and care. For example, in case of an emergency, having knowledge about a patient's allergies, medications or pre-existing conditions can save a life. Yet, even as advances are being made in development of electronic medical records systems, it is still almost universally the case that a complete record of any individual's personal health information cannot be found in any single location or consistent format. The various elements of any one person's health information are likely scattered across several healthcare providers, possibly in different cities, states, or even countries and are kept currently in various combinations of paper-based and electronic record-keeping formats.

This reality means that individuals need to recognize that they are the most effective source of their own complete medical history and that by managing their own health information they can help improve the quality of care they receive.

AHIMA Consumer Education Campaign launched in March, 2005, is a public service initiative that draws upon the unique expertise of AHIMA and its 51,000 members. This campaign has allowed Health Information Management (HIM) professionals to share their knowledge of health information and medical records directly with the public—at the community level—in order to help them better understand how to access, manage, and protect their personal health information.

## Objectives of the campaign

- To increase public awareness and understanding of the issues surrounding personal health information and health records.
- To provide individuals with the information they need to better manage their personal health information and to encourage them to maintain a personal health record (PHR) in order to help improve the quality of care they receive.
- To create greater public awareness of the HIM profession and the important role HIM professionals play in effective management of personal health information needed to deliver quality healthcare to the public

From the Community Education Campaign materials...

#### Preamble

Whereas, HIM professionals, through their education and professional capacity, have a unique perspective on the concept of the PHR

Whereas, HIM professionals have a long tradition of patient advocacy

Whereas, AHIMA currently has a Consumer Education Campaign in progress with most component state association's involvement

Whereas, HIM professionals are role models for proper documentation by their actions and their knowledge.

Whereas, a communication tool for consumers, the PHR offers the ability to interact and individualize decision support and problem solving with the care provider for the best optimal outcome.

Whereas, the PHR empowers consumers to take an active role in their own healthcare

Whereas, access to past and current patient health information is necessary to provide care

Whereas, documenting life time health status and risk assessments enhances the decision making process

Whereas, the PHR allows for the consumer to actively contribute to the coordination of multiple providers

## Therefore, let it be:

*Resolved*, that all HIM professionals are charged with the responsibility of creating their own PHR in the format of their choosing and to the level of complexity with which they are most comfortable, but containing all of the elements outlined in the AHIMA/AMIA joint position statement for consumers of healthcare.

*Resolved*, that all HIM professionals are charged with the responsibility of ensuring all pertinent information from each healthcare encounter is properly documented and maintained in their PHR.

*Resolved*, that all HIM professionals are charged with the responsibility of remaining informed and knowledgeable about the current trends and continuous development of the PHR concept.

## **ACE Program Puts the Action in e-HIM**

The best way to deal with change is to go out and meet it head on, says Anna Lattu, RHIA. If we sit back and wait, change happens to us and we miss the opportunity to influence it. "It's much more important to be up there and be part of change and be proactive," she says.

That's what Lattu does as director of information management services at Minnesota State Operated Services, a behavioral health agency in St. Paul, MN. And that's what she does as part of a new AHIMA program that connects e-HIM® experts with volunteer opportunities within CSAs and with individual AHIMA members.

Lattu is a member of ACE, the Action Community for e-HIM<sup>®</sup> Excellence. The program mobilizes AHIMA's network of HIM experts and change agents. It identifies, prepares, engages, mentors, and recognizes those working to transform HIM practice and connects them with volunteer and career-building opportunities.

### **How to Get Involved**

ACE members make change happen. They apply expertise, experience, and leadership skills within their organizations, communities, and states. Current ACE members are participating in regional health information exchange initiatives, leading organizational data quality improvement efforts, and speaking at state and national HIM conferences. Other ACE members have testified on HIM issues before government agencies and mentored students and new professionals.

Lattu fights hard for projects she believes in, often convincing, educating and negotiating with her clinical, technical, and administrative colleagues to garner their support. One project she is working to bring to her facility is a telehealth system, which would enable providers to communicate with patients through interactive television.

Individuals join the ACE Challenge through recommendation or self-nomination. An online self-assessment helps them gauge their expertise and experience. If they join ACE, they make a commitment to volunteering.

## Call on ACE!

ACE members like Lattu act as a "preferred pool of experts," available for mentoring, speaking, writing, testifying, and more. A CSA can seek an ACE member to give a presentation at a state meeting, for example. Individuals can request mentoring on an e-HIM initiative they face at work.

You can learn more about ACE by visiting www.ahima.org/ace. There you'll find an online nomination form and the self-assessment. A directory of ACE members available for mentoring also appears there. CSA leaders may access a directory of ACE members available for presentations. To set up access to the directory, they can call Pam Garcia in AHIMA's Volunteer Services department at 312-233-1162 or by e-mail at pamela.garcia@ahima.org.

## Welcome to New NHIMA Members

Crystal Obbink Diane Fry Pamela Shockey Cindy Miller

# HIM SPOTLIGHT - York General Hospital

By Erma Jean Heine, Director

York General Hospital is a Critical Access Hospital licensed for 25 beds (acute care and skilled nursing) with 97 physicians on staff (active, courtesy, and affiliate). We have 46 allied health, (12 PA's, 8 CRNA's, 14 APRN's, 3 clinical perfusionists, 4 mental health practitioners, and 5 surgical techs. In 2006, York General Hospital treated 1,152 inpatients and 39,871 outpatients.

Our HIM department employs 13 FTE's, one PT time and one PRN. Of the 15 employees, we have 5 transcriptionists, 1 outpatient coder, 1 inpatient/surgical coder who does Utilization Review, 1 Release of Information coordinator, 4 record processing staff, 1 chart router/floater, 1 Clerical Assistant, and 1 Director. With these 15 staff, we have over 123 years of service here!!!!!!! Employees being here the longest are for 22 years, 16 years, 15 years, 12 years, 10 years and less. That is a lot of dedication!

We transcribe all hospital encounters including radiology, physical, occupational, and speech therapy. We do not outsource. Two of our transcriptionists type from home. We sent our first lady home in April of 2001 and our second one October 2005. This is working quite well for us and increased their productivity.

Our two coding staff handle all hospital inpatient and outpatient accounts as well as the CPT-4 Professional E/M level for the emergency physicians. We use the 3m coding software which interfaces well with CPSI.

Five years ago we changed computer systems from Dairyland to CPSI out of Little Rock,

Arkansas. Our goal is to become totally electronic by fall of 2008. We have a lot of electronic forms now and some electronic signatures but have a ways to go. Currently we are scanning in reports that come to us such as pathology reports, outside history and physicals, EKG's etc. These records are accessible offsite by the physicians through Chart Link.

Thank you for giving us the opportunity to share our department with NHIMA members.



# NHIMA Fall Conference – September 20 & 21, 2007 A Kaleidoscope of Opportunity The Nebraska Medical Center – Omaha, NE

## Thursday, September 20, 2007

7:30	Registration & Continental Breakfast
8:00	Welcome
8:05	Leadership Engagement – An Update

from the AHIMA – *Rita Bowen*9:00 Physician Quality Reporting Initiative – *Robert Epps & Arnold Balanoff* 

10:00 Break & Visit the Vendors

10:30 Nebraska Coalition for Patient Safety – *Stephen Smith, MD* 

11:30 Vendormercials

11:55 Scholarships & Recognition – *Kari Eskens* 

12:00 Lunch

1:00 Six Sigma and HIM – Jason Lebsack

2:00 NHIMA Privacy Guide Tour & Highlights – Pam Koch, Charlene Tilson, Kim Johnson

3:00 Break & Visit the Vendors

3:30 Medicare Fraud & Abuse – Amy Miller

4:30 Closing Remarks

## Friday, September 21, 2007

7:30 Registration & Continental Breakfast

8:00 NHIMA Update – Kari Eskens

8:30 Reducing Stress Leads to Increasing Personal Wellness – *Kathy Nellor* 

9:30 Immunization Registries – Linda Ohri

10:30 Break

10:45 IPPS Changes to MS-DRGs – *Rita Scichilone* 

11:45 New Medicare Administrative Contractor – *Malinda Stanley* 

12:15 Closing Remarks

Full brochure and registration form are available at www.nhima.org



2007-2008 Corporate Member

www.on-lineimaging.net



# **Coding Roundtable**

by Theresa Rihanek, Coding Roundtable Chair

The Coding Roundtable Committee is working on scheduling a Traveling Audioseminar. The Coding Roundtable has contacted Region Coordinators to assist in making arrangements to host a Traveling Audioseminar. We want to use this as an outlet to revive the Nebraska Coding Roundtable. This is a great opportunity for region members to get together to earn free CEU's.

Here is how it will work: An AHIMA audioseminar CD will be mailed from region coordinator to region coordinator. The CEU's for the audioseminar will be free for NHIMA members when attending the Roundtable meeting. The region coordinator or designee will set the location, date, time and invite region members to attend. A Coding Roundtable Committee member is willing to attend the first region meeting for the Traveling Coding Audioseminar to facilitate the audioseminar

and coding discussion. Once the Roundtable meeting has concluded, the materials are to be mailed to the next location.

The committee's goal is to sponsor three audioseminars in the next year. We have selected Coding Kidney Disease and Treatment as the first audioseminar to make its way around the state. We are still in the planning phases to arrange dates and coordinators, but be on the look out for this new opportunity!

We would also like to welcome Shirley Carmichael to the Coding Roundtable Committee. We are pleased to have an additional member to provide perspective on the coding challenges that Critical Access Hospitals face.

If you have any questions about the Traveling Audioseminar, please email Theresa at trihanek@nebraskamed.com.

# NHIMA Policy & Procedure Revisions

*The following policy was revised at the August 3, 2007 Board of Director meeting:* 

**3.30 Designation of NHIMA Delegates to AHIMA National Convention** – Updated to include direction for years when NHIMA has five delegates.

The NHIMA Membership List is no longer printed in News & Views. However, the NHIMA membership list can be emailed to NHIMA members.

Request your list by emailing the NHIMA Central Office at kim@consulthi.com.

Just for fun...we asked our new board members to share a little bit about themselves...

	Liz Bechtle – 1 <sup>st</sup> Year	Janet Dooley –	Kim Hazelton – President-Elect
	Director	Treasurer	
Tell us a little bit about your family.	We have lived in NE for almost 8 years. We moved here from KS; however, we are from ND. I am married to Jim (for 20 years). We have 1 daughter – Alex who is 15, a son – Joseph who is 12 and a yellow lab, Dakota, who is also 12.	My husband, Gary, and I live in a log home on a small lake outside of Valley, NE wit hour dog and cat. Weekends are always busy with family and friends.	My husband, Rod, our 2 daughters and I live in Lincoln. Alexa is 13 and Hailey is 12. Our dog, Ginger, and Hailey's hamster, Nadia, also share our home. We all enjoy reading and family game night. Our big adventure for this year will be going to Minneapolis to see a Vikings/Packers game. Since half our family are Vikings fans and half Packer fans, it should be an interesting drive home.
What and	Utilization Review	Bishop Clarkson	After graduating from the Medical
where was your first job as an HIM professional?	Technician	Memorial Hospital in Omaha. I did coding and abstracting (on paper) of inpatient records.	College of Georgia, we moved to Portland, OR where I became director of HIM for a Long Term Care facility.
What is on	"Dell"	My mouse pad is	The Dell logo
your		plain red – pretty	
mousepad?		boring!	
What book are	If Disney ran your	Leadership	Hippopotamus Pool by Elizabeth
you currently	hospital by Fred Lee	Challenge by	Peters
reading?		Kouzes and Posner	
What is your	Fruit desserts	My mother's fried	Pizza or spaghetti or tacos or
favorite food?	(strawberries over angel	chicken and her	
NT 41	food cake)	peach pie.	T
Name the	Grandpa Fred, my	My great-	Jesus
person you'd most like to	mom's dad. He died the year I was born and from	grandmother who immigrated to NE.	
meet.	stories was a pretty	She would have	
meet.	special man.	great family stories	
	special man.	to share.	
What is your	A Knight's Tale or Pretty	Out of Africa	The Princess Bride
favorite movie?	Woman		
What was your first car?	Horizon TC3 stick shift	1974 Dodge Duster	1969 Mercury Cougar
Storms – scary	Cool	Sometimes scare	COOL!
or cool?		and sometimes cool	
Chocolate or	Chocolate if it is over	Chocolate	Definitely chocolate
vanilla?	strawberries		
Describe your	Casual: Keen sandals –	My mesh water	Low heeled black boots
favorite shoes.	light green slip ons	shoes – if I am	
	Dressy: Brown pumps,	wearing them I am	
	soft leather	somewhere on a	
		warm sandy beach.	

# President (Delegate)

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## Past President

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# **2007-2008 Chairpersons:**

**Spring 2008 Conference** 

Committee...... Brenda Moors & Christina Headrick

Fall 2007 Conference

Committee...... Malinda Stanley & Mary Miller

Coding Roundtable ....... Theresa Rihanek Professional Promotions ....... Janice Sandquist