**1. Define - Vocabulary:**

**Accreditation – 1. A voluntary process of institutional or organizational review in which a quasi- independent body created for this purpose periodically evaluates the quality of the entity’s work against pre-established written criteria. 2. A determination by an accrediting body that an eligible organization, network, program, group, or individual complies with applicable standards. 3. The act of granting approval to a healthcare organization based on whether the organization has met a set of voluntary standards developed by an accreditation agency.b**

**AAPC – American Academy of Professional Coders**

**AAMRL – American Association of Medical Record Librarians**

**ACS – American College of Surgeons**

**AHIMA – American Health Information Management Association**

**AMRA – American Medical Record Association**

**AHDI – Association for Healthcare Documentation Integrity**

**ARLNA – Association of Record Librarians of North America**

**AHIMA CODE OF ETHICS**

**CAHIIM – Commission on Accreditation for Health Informatics and Information Management**

**CCHIM – Commission for Health Informatics and Information Management**

**CEUs – Continuing education units**

**HIM – Health Information Management**

**HOSPITAL STANDARDIZATION PROGRAM – to raise the standards of surgery by establishing minimum quality standards for hospitals.**

**AHIMA's Mission and Core Values – Mission: AHIMA leads the health informatics and information management community to advance professional practice and standards. Core Values: Quality, Integrity, Respect, Leadership**

**1.**

**a. Summarize the development of health information management (HIM) profession from its beginnings to the present**.

HIM started out because ACS realized that an important part of patient care was an accurate and complete patient chart. In the beginning the focus of HIM was to maintain records, and as time went on it became clear that HIM needed to focus more on the management of health information. Over time the name of HIM changed a few times to accommodate HIM’s changing roles, as well as the titles of the professionals in the field. HIM changed so much because of our quickly changing technology. So to keep up with the demands of today, HIM needed to evolve as well.

**b. Explain AHIMA's certification processes**

To become certified by AHIMA, an individual has to meet specific eligibility requirements for whichever certification they are seeking, and the successfully complete the certification exam. Even after that the individual must stay up to date with HIM knowledge by taking CEU’s.

**c. How is AHIMA governed?** [**http://www.ahima.org/about/governance**](http://www.ahima.org/about/governance)

Board of Directors

**d. Identify the appropriate professional organizations for the various specializations of HIM.**

Health Information and Management Systems Society (HIMSS)

Association for Healthcare Documentation Integrity (AHDI)

American Academy of Professional Coders (AAPC)

National Cancer Registrars Association (NCRA

**2. Name the AHIMA credentials available to students and membership?**

Active membership, student membership, new graduate membership, emeritus membership, group membership

**3. What is AHIMA's fellowship program?**

The fellowship program if for active or senior members who have earned recognition through significant contributions to the HIM profession.

**4. What is the AAPC? What are their credentials?**

The American Academy of Professional Coders educates and certifies medical coders. Some credentials are Certified Professional Coder, Certified Inpatient Coder, and Certified Medical Auditor.

**5. What is the National Cancer Registrars Association?**

The NCRA represents cancer registrar professionals. Their mission is to serve as the premier education, credentialing, and advocacy resource for cancer data professionals

**6. Answers to "check your understanding” 1.1 and 1.2**

1.1 – 1.B, 2.C, 3.A, 4.A, 5.A, 6. B

1.2 – 1,B, 2.A, 3.B, 4.D, 5.B

**7. Visit** [**http://hicareers.com/CareerMap/**](http://hicareers.com/CareerMap/)**re: Career paths. Write a career plan.**

My career plan is to finish my degree in medical coding and emr, while I continue to work as a medical secretary at emmc internal medicine to gain experience. After I receive my degree and pass my exam I want to transfer to emmc’s billing and coding dept. once I get there I want to continue to gain experience and eventually start to work my way up to a supervisor position.

**8. Visit** [**http://www.ahima.org/certification**](http://www.ahima.org/certification)**research the qualifications for taking each certification examination and the continuing education requirements for maintaining each credential. What are the differences and similarities?**

For almost all of the certification examinations you need to have some type of experience or degree to be able to sit for the test. With the exception of the CCA exam. For the registered health information exams the require is at least an associate degree. The specialty certificate exams require RHIT certificates to sit for those exams.