**Anita Hakala-Homework Assignments:**

**Week 1**

**1. Define Vocabulary:**

**Accreditation** is a voluntary process of intuitional 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. I s is also termed as a determination by an accrediting body that an eligible organization, network, program, group, or individual complies with applicable standards.

**AAPC** is the pneumonic for the American Academy of Professional Coders which provides certified credentials to medical coders in physician offices, hospital out-patient facilities, ambulatory surgical centers and in payor organizations.

**AAMRL** is the American Association of Medical Record Librarians which was adopted by the Association of Record Librarians of North America in 1944. It is the precursor of the American Health Information Management Association

**ACS** is the American College of Surgeons; a scientific and education association of surgeons formed to improve the quality of surgical care by setting high standards for surgical education and practice.

**AHIMA** is t American Health Information Management Association which is a professional membership organization for managers of health record services and healthcare information systems and coding services. The organization provides accreditation, certification and educational services, also.

**AMRA** is the American Medical Record Association, a name adopted by the America Association of Medical Record Librarians in 1970. It is the precursor to the American Health Information Management Association.

**AHD**I is the Association for Healthcare Documentation Integrity. This was formerly the American Association for Medical Transcription (AAMT). This organization has a model curriculum for formal educational programs that includes the study of medical terminology, anatomy and physiology, medical science, operative procedures, instruments, supplies, laboratory values, reference use, research techniques and English grammar.

**ARLNA** is the Association of Record Librarians of North America. The organization was formed ten years after the beginning of the hospital standardization movement whose original objective was to elevate the standards of clinical record keeping in hospitals, dispensaries, and other healthcare facilities. It is a precursor of American Health Information Management Association

**AHIMA CODE OF ETHICS** serves seven purposes:

* Promotes high standard if HIM practice
* Identifies core values on which the HIM mission is based
* Summarizes broad ethical principals that reflect the profession’s core values
* Establishes a set of ethical principles to be used to guide decision-making and actions
* Establishes a framework for professional behavior and responsibilities when professional obligations conflict or ethical uncertainties arise
* Provides ethical principles by which the general public can hold HIM professional accountable
* Mentors practitioners new to the field of HIM’s mission, values and ethical principles

**CAHIM** is the Commission on Accreditation for Health Informatics and Information Management Education which is the accrediting organization for educational programs in health information and information management.

**CCHIM** is the Commission on Certification for Health Informatics and Information Management. This is an independent body within AHIMA that serves the public and the profession by establishing and enforcing standards for the initial certification and certification maintenance of health informatics and information managements. professional

**CEUs** is the abbreviation for Continuing Education Unit.

**HIM** is Health Information Management, an allied health profession that is responsible for ensuring the availability, accuracy and protection of the clinical information that is needed to deliver health care services and to make appropriate health care decisions.

**HOSPITAL STANDARDIZATION PROGRAM** is a mechanism instituted in the early twentieth century by the ACS and aimed at identifying quality-of-care problems and improving patient care. It is the precursor to the survey program offered by the Joint Commission on Accreditation of Healthcare Organizations

**AHIMA's Mission** is “to be the professional community that improves healthcare by advancing best practices and standards for health information management and the trusted source for education, research, and professional credentialing.

**Core Values of AHIMA** are:

* The public’s right to accurate and confidential personal health information
* Innovation and leadership in advancing health information practices and standards worldwide
* Adherence to AHIMA Code of Ethics
* Advocacy and interdisciplinary collaboration with other professional organizations

**2. Please answer the following questions:**

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

Health Information Management has been recognized since 1928, when the Association of Record Librarians of North America formed ten years after the beginning of the hospital standardization movement which was started by the American College of Surgeons. The purpose was to establish minimum quality standards for hospitals which included complete and accurate report of care and treatment provided during hospitalization.

The early HIM professionals developed a prescribed course of study that included intellect, knowledge and learning. A Board of Registration organized a certification board to have a baseline to measure qualified medical librarians.

As the profession grew, there were many name changes, based on the healthcare environment and roles and functions of the members. The association leaders, in 1991believe the future would be management of healthcare information, rather than management of records, and so the HIM progressed into the AHIMA, with role changes as well as credentialed name changes. As technology changes the roles continue to change today providing new opportunities in the healthcare information management field.

1. Explain AHIMA's certification processes.

AHIMA’s certification processes are based on the Credential itself. There are Eligibility requirement for each Credential. The current credentials available are Registered Health Information Administrator, Registered Health Information Technician, Certified Coding Associate, Certified Coding Specialist, Certified Coding Specialist-Physician Based, Certified health Data Analyst, Certified in Healthcare Privacy and Security, Certified Documentation Improvement Practitioner, and Certified Healthcare Technology Specialist. One must review the guidelines for applying for and scheduling the exam. The Commission on Certification for Health Informatics and Information Management Candidate guide can be found at <http://www.ahima.org/certification/cchiim>.

1. How is AHIMA governed?

AHIMA is governed by the Board of Directors. Members of AHIMA elect a president-elect and directors each year to serve in the role of governing the association, setting strategy and maintaining fiscal oversight and fiduciary responsibility. The AHIMA Board of Directors consists of 13 members including the CEO, who serves in an ex-officio role.

<http://www.ahima.org/about/governance>

1. Identify the appropriate professional organizations for the various specializations of HIM.

The Healthcare Information and Management Systems Society (HIMSS). This organization sponsors the Certified Professional in Healthcare Information and Management Systems (CPHIMS).

The Association for Healthcare Documentation Integrity (AHDI) sponsors the Certified Medical Transcription and Registered Medical Transcriptionist Certifications.

The American Academy of Professional Coders (AAPC) sponsors Certified Professional Coders (CPC), Certified professional Coder-Hospital Outpatient (CPC-H), Certified professional Coder-Payor (CPC-P), Certified Interventional Radiology Cardiovascular Coder (CIRCC), Certified Professional Medical Auditor CPMA), Certified Professional Compliance officer (CPCO) and many specialty coding certifications.

The National Cancer Registrars Association (NCRA) sponsors the Certified Tumor Registrar (CTR).

3. Name the AHIMA credentials available to students and membership?

Students in a CAHIIM-accredited program for RHIT or RHIA, enrolled in their final term of study, students who have completed their coursework but have not yet graduated or graduates currently waiting for their official transcripts are eligible to apply for and take their respective certification exam early.

AHIMA permits a graduate of a program in HIM at the baccalaureate degree level to apply to write the appropriate certification examination consistent with the academic level achieved. The graduate must meet the educational competencies for certification as a technician or administrator.

Student membership in AHIMA is for any student who does not have an AHIMA credential, has not previously been a member of AHIMA, and who is formally enrolled in an AHIMA-approved coding program or in a CAHIIM-accredited health information management program. It gives them an opportunity to participated at a national level as well as, allowing them to serve on committees and subcommittees with voice, but no vote.

4. What is AHIMA’s fellowship program?

The fellowship program is for AHIMA members who have demonstrated service, in practice, education and advancement of the profession innovatively and shared their knowledge.

5. What is the AAPC? What are their credentials?

The Academy of Professional Coders educates and certifies medical coders. The American Academy of Professional Coders (AAPC) sponsors Certified Professional Coders (CPC), Certified professional Coder-Hospital Outpatient (CPC-H), Certified professional Coder-Payor (CPC-P), Certified Interventional Radiology Cardiovascular Coder (CIRCC), Certified Professional Medical Auditor CPMA), Certified Professional Compliance officer (CPCO) and many specialty coding certifications.

6.  What is the National Cancer Registrars Association?

The National Cancer Registrars Association (NCRA) represents cancer registrar professionals, with a mission to “serve as the premier education, credentialing and resource” organization. It sponsors the Certified Tumor Registrar (CTR).

7.   Answers to “check your understanding 1.1 and 1.2

**1.1 Answers 1.2 Answers**

1. C 1. C

2. B 2. B

3. C 3. B

4. A 4. D

5. A 5. D

6. D

7. D

8. B

8.  Visit <http://hicareers.com/CareerMap/>  re: Career paths. Write a career plan.

Currently my career plan is to become a coding professional, probably in a special area. It is very difficult for me to determine at this point.

9. Visit <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?

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| Certification | Eligibility requirements | Continuing education Requirements |
| RHIA | Baccalaureate level education or AHIMA reciprocity agreement. Must submit an official transcript | 30 CEU |
| RHIT | AD level of HIM program accredited by CAHIIM **or**  AHIMA reciprocity agreement. Must submit an official transcript. | 20 CEU |
| CCA | High school diploma or equivalent  Six months coding experience **or** completion of an AHIMA-approved coding program **or** completion of other coding training program that includes anatomy and physiology, medical terminology, Basic ICD diagnostic/procedural and basic CPT coding | 20 CEUs, including two mandatory annual coding self-reviews\*\* |
| CCS and CCS-P | Must be credentialed as RHIT, RHIA, or CCS/CCS-P **or** completion of other coding training program that includes anatomy and physiology, medical terminology, Basic ICD diagnostic/procedural and basic CPT coding or 2 years of related coding experience directly applying codes **or** CCA plus one year of experience **or** coding credential from other certifying organization plus one year directly applying codes | 20 CEUs, including two mandatory annual coding self-reviews\*\* |
| CHDA | RHIT and 3 years’ healthcare data experience **or** Baccalaureate degree and 3 yearsin healthcare data experience **or** Master’s degree in HIM or Health Informatics from an accredited school | 30 CEUs |
| CHPS | AD and 6 years’ experience in healthcare privacy or security management **or** RHITT and 4 years in healthcare data experience **or** Baccalaureate degree and 4 years’ experience in healthcare privacy or security management **or** RHIA and 2 years’ experience in healthcare privacy or security management **or** Master’s or related degree and 2 years’ experience in healthcare privacy or security management | 30 CEUs |
| CDIP | RHIA, RHIT, CCS, CCS-P, RN, MD, or DO and 2 years’ experience in clinical document improvement **or** AD or higher and 3 years’ experience in clinical document improvement. AD must include Medical Terminology and Anatomy and Physiology | 30 CEUs |