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Florida Health Information Management Association

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President's Message

Michelle Mock, MSM, RHIA



It is truly a privilege to serve you as your next FHIMA President. I am excited and honored to be among such a distinguished group of professionals. Being President of this Association has always been a dream of mine, not for what it stands for, but for whom it serves.

My theme this year is "Catch the e-Health Wave". I am, as you can tell by my theme, a beach buff; loving the freedom of the ocean, the serenity of the sunset, and the foreverness of the water. We all know that nothing is forever...not even in our profession. Change is inevitable. I have learned this first hand this year...both personally and professionally.

Professionally, at University Community Hospital, we opened our first all digital heart hospital with state of the art cardiovascular equipment and a paperless equipment, or should I say what we thought was to be an all paperless environment! There is so much to learn about the evolution into E-HIM, which we at UCH learned. But thru this, I realized more than ever the importance of our role in understanding the electronic world and taking ownership of something that is already ours to begin with. We as HIM professionals need to grasp on and educate ourselves

on a continual basis, so that we can advocate an industry change from our comfort paper zone to an electronic environment.

I know that there are many of us here whose organization have either begun or have completed this change, but there are even more of us who are watching our world change, and feel like we are on the beach versus riding the wild wave. As E-HIM adoption rates grow, there will continue to be a growing need for better ways to understand, organize, and analyze health data, the industry's ability to manage, and use the information in this electronic environment will be essential to controlling healthcare costs and improving the quality of patient care deliveries.

What are we doing as HIM professionals, I ask? E-HIM belongs to us, there is a role for each of us, and an opportunity to participate and contribute our knowledge. All we have to do is to catch the wave and network, with others, listen, learn, and strengthen our general technology knowledge. In this upcoming year, I want us to focus on being a stakeholder, not just catching the E-Health wave, but riding it out demonstrating that the skills that we bring are knowledge of the medical record process flow; regulatory requirements, privacy and security, and project management. We will focus on more education on E-Health, we will track our memberships involvement in the RHIOS and we will continue to take ownership of an industry that is already ours.

I want us all to engage ourselves in the resources that AHIMA and FHIMA offers, and to continue to share with each other our own experiences.

Personally, I have also learned that nothing is forever. But I have also learned that with change comes a sense of passion to survive, passion to stand strong, and proud of what you believe in, and surround yourself with those who share our same values.

Thank you again for this exciting opportunity. SURF'S UP!



**NEW! FLORIDA SHOTS
DATA EXCHANGE**

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FHIMA Service Awards 2006 -
Congratulations to our deserving winners!!

Distinguished Member Award

RoseAnn Webb, MNM, RHIA, LHRM

RoseAnn Webb, MNM, RHIA, LHRM, has been very active at the local, state and national levels during her HIM career. Her accomplishments are numerous and her spirit of volunteerism is an inspiration to all. RoseAnn has been a member of the teaching staff at Florida International University, Broward Community College and Miami Dade Community College in HIM. She exhibits enthusiasm to reach out to students and connect with them. She has been a mentor to her students and this support has allowed many students to go on to successful careers in the HIM field. One letter of support came from her entire staff at Boca Raton Community Hospital and her

leadership at their facility. They said it best -"RoseAnn Webb best exemplifies the nomination of a Distinguished Member."

Distinguished Service Award

Mark Michelman, MD, MBA

Dr. Michelman has been a member of GCHIMA, FHIMA AND AHIMA for many years and is a regular speaker at our local, state and national meetings. He has served on many committees and is a proponent of data quality, data collection, coding integrity and health information. Dr. Michelman received his MD from Boston University School of Medicine. He is board-certified in Internal Medicine, Hematology, and Quality assurance and Utilization Review. He has been practicing in Clearwater since 1974 and also teaches part-time at USF School of Medicine. He serves as Clinical Director at FMQAI and served on the Board of Directors from 1996-2001. Dr. Michelman also attended HIM Hill Day in 2004 and 2005 representing our profession and supporting our legislative issues. Dr. Michelman always speaks highly of our profession and supports the HIM field in many ways. He is always willing to help out whenever he is asked!

Outstanding Professional

Thomas Falen, MA, RHIA, LHRM

Tom Falen is the Program Director of the HIM, HSA and BSHS programs at University of Central Florida in Orlando. Tom has been an exceptional leader and mentor to his staff as well as his students. He is an outstanding HIM professional who is a cheerleader for HIM in the marketplace of potential students and who has an intellectual and creative side that serves our professions well.

He has had a love of coding for many years and is the author of *Learning to Code with ICD-9-CM for Health Information Management* and *Health Services Administration* which he co-authored with Aaron Liberman.

Professor Falen is described as one of the most active faculty in the department for academic advising. He never turns a student away when they have questions about their program.

As stated by one of his colleagues, "Thomas Falen is one of the foremost thinkers nationally in HIM and he would be a most deserving recipient of the Outstanding Professional Award."

Outstanding New Professional

Barbara Bermudez, RHIT

Barbara is an active member of her regional HIM association

(GCHIMA). She also serves as the Chair of the Fire Committee which demonstrates her commitment to the HIM profession. She is a strong ambassador of education and is a mentor of students from St Petersburg College. She provides support and assistance to students with their courses and encourages their commitment to their new profession. Barbara is the HIM Operations Manager for UCH Medical Center and UCH Carrollwood. This arena has allowed her to offer tours of her department for students and she has been successful in recruiting several students to enter HIM programs. Barbara accepts new challenges with open arms and utilizes her strong leadership skills to lead her team and promote the HIM profession.

Literary Award

Patricia Schnering, RHIA, CCS

Patricia is highly respected in the HIM community for her commitment and dedication to the HIM profession. She has served on the local, state and national levels and was a past president of GCHIMA and an active member of various committees through the years. She has served as a FHIMA Director at the state level and was a Chief Delegate to AHIMA this past year.

Pat has been authoring and editing HIM certification material for professionals, educators and students for the past 10 years. She has written articles for *Advance*, *FHIMA Coastlines* and is known nationwide as the best source for review material for AHIMA certifications.

Her books include: *HIM Journeys, Professional Review Guide for RHIA and RHIT Certification Examinations, Professional Review Guide for CCS Certification Examination, Professional Review Guide for CCS-P Certification examination, Professional Review Guide for the CCA Certification Examination and the Professional Review Guide for the CHP and CHS Certification Examination.*

She is now in the process of developing a new book for HIM educators and students called *HIM Case Studies*.

Outstanding Students

Cymeia Hill

Cymeia is a student at Florida A & M University in HIM. She is an exemplary student with a GPA of 3.843. She is a Dean's list and National Dean's List student and was selected as the 2006 Outstanding Honors Graduate from FAMU's School of Allied Health Sciences. She has contributed to her professional growth as well as the growth of the HIM program. She represented the FAMU's HIM Program at the 2005 FHIMA Annual Convention. Cymeia demonstrates tireless participation in special projects of

the HIM program. She exhibits initiative, organization, diligence and a meticulous attitude towards all she does according to one of her instructors and comes to class prepared and asks intelligent questions. All of her clinical sites have given her a high rating. She will be a true asset to the field of HIM in the future.

Stephanie Lawler

Stephanie just graduated from the HIT program at International College in Fort Myers. She was HIT Program Student of the Year in 2005. She served as student liaison to the local HIM association. She is described as an exemplary student, diligent in her studies who is a delight to teach due to her inquisitive nature and positive attitude. Stephanie is always going over and beyond the call of duty and has made every effort to gain as much knowledge as possible in order for her to grow in her new HIM career. Stephanie was hired by the VA in Ft Myers before graduating. "They knew she was a winner."

Congratulations to the 2006-2007 FHIMA Board of Directors!

On Tuesday, July 25, 2006, the 2006/2007 Board of Directors were installed at the Annual Membership Luncheon. The new officers are:

President

Michelle Mock, MSM, RHIA

President-Elect

Stacie Buck, RHIA, CCS-P, LHRM, RCC

Past President/Director

Holly Woemmel, MA, RHIA

Directors

Jennifer Carter, RHIA
Anita Douppnik, RHIA
Jill Finkelstein, RHIA
Carla Gaines, MPH, RHIA, CCS
Monica Hardy Johnson, EdD, RHIA
Elizabeth Whitmer, RHIT, FAAMT

Chief Delegate

Karla Philippou, RHIA, CCS, CCS-P, CPC

Executive Director

Carolyn Glavan, MS, RHIA

FHIMA Scholarship Recipients

HIM Program - 4 Year

*Gladys Benites
University of Central Florida*

HIM Program - 2 Year

*Terry Bathurst
Daytona Beach Community College*

HIM Program – Graduate

*Coleen Buchinsky, RHIA
St. Leo University*

Thanks to the following who contributed to the scholarship fund this year.

HIM Quality Solutions, Inc.
Professional Outsourcing, Inc
Stat Solutions, Inc.

FHIMA also wants to thank the following regions for their contributions as well: Central, Gulfcoast, Panhandle, Southwest and Suncoast Health Information Management Associations. It is such a worthy cause for the future of our Health Information leaders and FHIMA is proud to be able to provide these scholarships for many years to come!



FHIMA 2007 Convention! Mark your Calendars!

In 2007 our Annual Convention will be held **June 25-28, 2007**.

We will be at the brand-new Rosen Shingle Creek Resort in Orlando! This beautiful facility will officially open September 6, 2006!

Why June for 2007, you ask?! For many years our convention has always been held in June. However, due to availability for our event at hotels, we must sometimes move dates around! In the past 4 years, the Gaylord has only had July open for us. So, our convention may move around, depending on the available dates. We will always stay with either June or July for our dates.

Also, **did you know** that the size of our convention requires us to book our event at larger hotels? Quite often, we get comments such as "Why the expensive hotel?" and "There are plenty of (less expensive) hotels in Orlando!" You may be

surprised to know that very limited number of hotels can host our event!!! We require 20,000 sq. feet of exhibit space plus 7,000 sq. feet for the General Session and 7,000 sq. feet for the lunches. That's 34,000 sq. feet! A smaller hotel may have that amount but it's broken up into separate rooms with permanent walls which we cannot have for our event! For example, there is only ONE hotel in all of Tampa that can fit our event and even with that hotel, we would have to use the Tampa Convention Center for the exhibit hall!!

So please be assured that we try to negotiate the best deal for our convention. When shopping for a location, we always try to make sure that there are more economical hotel choices nearby and restaurants as well.

Watch future editions and emails for FHIMA 2007 Convention details!



GET THE ALL NEW 2006 Medical/Legal Guide to Health Care Records in Florida!

FHIMA Medical Legal Guide 2006 Version is now available!

The new Medical/Legal Guide to Health Care Records in Florida is now available and ready for purchase. The Guide includes a CD and Notebook set for \$295.00 plus \$10.00 Shipping and Handling. Students enrolled full-time in an accredited HIT/HIM program may purchase the guide for \$65.00 plus \$10.00 Shipping and Handling.

The Guide has been reviewed, revised and updated! Order yours today!

[Click here for the 2006 Medical/Legal Guide Order Form!](#)

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Summary of the Issues at the 2006 FHIMA House of Delegates

This article summarizes the 2 main issues discussed during the FHIMA House of Delegates. The issues discussed were "Bridging the Gap" resolution and Environmental Scanning.

ISSUE #1: Bridging the Gap & Corporate Connections

RATIONALE

In 2005, AHIMA passed the Resolution Bridging the Gap. The intent is to enhance dialog and actions to facilitate the employment of graduates from CAHIIM-accredited HIM programs at the baccalaureate and associate degree levels, and the AHIMA-approved coding programs at the pre-degree level. This issue focuses on employing our students as they complete accredited and approved educational programs and begin their professional careers.

This "hot topic" focuses on the challenging situation of our current students. As a result of this resolution, AHIMA has developed the Corporate Connection Program to help bridge the gap between education and professional placement.

One of the items on the FHIMA Strategic Plan is to Bridge the Gap! One of the goals to meet this strategic initiative



was the development of a Student Tool Kit. The Tool Kit is now ready for distribution.

QUESTIONS TO CONSIDER:

Q. What do you think of the AHIMA Corporate Connections Program?

- a. Great concept. Focus on national vendors versus local sites.
- b. Excellent program.
- c. Coding internships needed.
- d. Some concern expressed that this program may have adverse affect on local opportunities as more employers join the program. Our students will be competing with students out of state for opportunities in Florida.
- e. Focus on paid internships. Many individuals cannot afford to work without pay.
- f. Look into economic development funds – government provides money for hiring certain people.
- g. Recommendation was made that employers participating make credentials a requirement for employment post-internship.
- h. Good idea but not realistic. Employers don't have time to train.
- i. Has merit but there are hurdles to overcome. May be difficult to find opportunities in some geographical areas.

Q. What can FHIMA do to help AHIMA in implementing the Corporate Connections Program?

- a. Add the Corporate Connections Program information to the FHIMA Tool Kit.
- b. Promote the program to employers, vendors and Program Directors at the state and local level.
- c. Include flyers in vendor packets for convention and promote program to corporate sponsors.
- e. Once e-alert system is established promote via e-alerts.
- f. Look into economic development funds – government provides money for hiring certain people.
- g. Solicit hospitals to participate.

h. Provide incentives and recognize preceptors and supervisors.

i. Develop talking points for HIM professionals to share with CEO's encouraging participation.

Q. How should the FHIMA Tool Kit be distributed to students?

a. Post the tool kit on the FHIMA website and on FHIMA CoP.

b. Have regional associations promote tool kit.

c. Distribute to Program Directors to share with students.

d. Consider dividing tool kit into modules – pre-program, during program, post-program.

Q. In the past year, what activities have occurred in your region to facilitate Bridging the Gap?

1) Regional association spoke at local colleges on benefits of AHIMA membership, networking, selling yourself as an HIM Professional also had a panel discussion with HIM professionals in both traditional and non-traditional roles. Provided students with a resource CD-ROM at these meetings.

2) FHIMA FIRE Committee completed the Student Tool Kit.

Q. What plans or ideas do you have for the upcoming year to promote Bridging the Gap?

1) Invite students to local meetings.

2) Hold a student track at 2007 FHIMA convention.

3) Encourage students to volunteer in local and state association.

4) Continue to hold student meetings at local colleges.

5) Invite employers to regional meetings.

6) Student page on FHIMA website.

ISSUE #2: Should FHIMA support AHIMA bylaw amendment on inclusive membership?

RATIONALE

The proposed merge of Active and Associate membership categories to foster inclusiveness, flexibility and potential growth in membership.

The current and future workforce demand is increasing due to the evolution in healthcare, primarily the change from HIM to e-HIM. The supply of credentialed workforce vs. the need for HIM workers in the future is unmatched. Influencing the industry is the key to the future of AHIMA and profession, therefore AHIMA must encompass all who engage in HIM by considering a proposal for inclusive membership.

One key benefit of a more inclusive membership for our current members is that it helps ensure our relevance and influence in a changing industry.

Our own research predicts a growing shortage of credentialed HIM professionals, which means that the current industry-wide shift to EHRs and EHIM will create an influx of lateral entrants into HIM-related positions. If current members are to have a strong position of influence in tomorrow's healthcare industry, we need to be setting the professional standards for HIM for the entire industry - not just for credential-holders.

Expanding our influence over the industry as a whole helps to strengthen the relevance of our profession in the future, and elevates respect for our principles, our expertise, and our products and services (including our credentials).

Closing ourselves off from what will be a growing segment of the HIM-related workforce runs the risk of lessening our importance in the industry -- and that poses risks to the perceived relevance of our credentials and expertise.

Q. Do you support the inclusive membership proposal brought forth by AHIMA?

Responses included:

Only one person in attendance at HOD voted for the proposal as currently written. All other members in attendance were opposed.

AHIMA has not done enough to promote our credentials or to gain respect for our profession. Perception is still "Medical Records".

AHIMA/CSAs must work on engaging Active members for leadership positions.

There was concern about how the proposal will affect salaries—we currently have other individuals such as RN's doing HIM jobs and making \$30,000 more per year than an HIM professional doing the same job.

AHIMA should push for credentials as job requirement.

Inclusive membership will have adverse affect on our education programs.

There will be no incentive to become credentialed if allowed membership. Already have too many graduates not sitting for exam.

Associate members have not sought out credential already why would they if allowed full voting rights?

Inclusive membership does not solve the workforce shortage.

Language is too broad—"interested in HIM".



Sharing Immunization Records Easier with Florida SHOTS New Data Upload

Sharing accurate, adequate information is at the core of FHIMA's mission to provide better patient care. Florida SHOTS shares that mission and is working to help health care providers and parents face the difficult challenges of keeping children up to date for immunizations.

Currently, 22 immunizations are recommended for infants by 18 months of age, and this number could triple by 2020. Immunization registries, like the Florida State Health Online Tracking System (SHOTS), help address the challenge of tracking and monitoring immunizations.

The Florida SHOTS program has become well known among health-care providers for offering user friendly, centralized, online immunization data. Enrolled providers have free, 24/7 access to patients' immunization histories, immediate identification of previously reported contraindications, and algorithms that use the most recent recommendations for childhood immunizations. The system also offers automated 680 blue forms for school and day-care attendance, forecasts of the next required immunizations, and reminder and recall (which helps providers notify parents whose children are due or past due for immunizations).

Since summer 2005, the Florida SHOTS' team has been piloting a data upload feature to make it easy for health-care providers to upload their data in large quantities directly into Florida SHOTS. During this test phase of the data upload system, over one million immunization records were added to the registry. Records came from the United States Air Force (Florida Air Force bases), Pediatric Associates of Orlando, and the Pediatric Associates Professional Association in South Florida. Total records in the registry now exceed 45,000,000 shots for more than five million individual patients.

Following the successful completion of the pilot program, several health-care providers around the state are using the data upload process. The Florida SHOTS' team encourages FHIMA members to contact them for additional information and participation in this exciting development. Data upload requirements, including file specifications, are available at www.flshots.com, by calling 877-888-SHOT, or by emailing flshots@doh.state.fl.us.

Present on Admission Information

The following is a letter from Kim Streit, CHE, MBA, MSH FHA's VP of Healthcare Research and Information to Lisa Rawlins, AHCA project manager.

From: Kim Streit
Sent: Tuesday, August 22, 2006 10:34 AM
To: 'Rawlins, Lisa'
Subject: NUBC POA guidelines

Lisa,

Thank you for agreeing to adopt the NUBC guidelines for reporting present on admission. This indicator will significantly enhance the usefulness of the AHCA data for outcomes reporting and use of the administrative data for hospital quality improvement efforts.

[Click Here for link to NUBC Present on Admission Guideline pages](#)

Since we are in the process of creating the UB-04 manual for Florida, I thought it would help if you had copies of the pages that address the Present on Admission indicator reporting guidelines. I thought this might help in drafting the letter to the hospitals noting the change in the AHCA reporting requirement. The differences between this and the rule that was adopted last year are:

1. Present on admission is defined as present at the time

the order for inpatient admission occurs. This would mean any condition that develops during an outpatient encounter (ambulatory surgery, ED) would be considered present on admission).

2. POA would be applied to the principal diagnoses and the e-codes in addition to all the secondary diagnoses.
3. The reporting options would change from 3 to 5.

The guidelines are still on target for release in October. Based on a survey of our hospitals, it seems like slightly more than 1/2 think their vendor will be ready. Only two have been practicing applying the POA indicator. Based on these results, I think we need to get some initial education and awareness to the hospital community in mid-to-late September. The purpose of the call would be to:

1. Remind them that the reporting requirement starts January 1, 2007
2. Notify them that AHCA is adopting the NUBC guidelines (we can get someone from the NUBC to review their guidelines)
3. Give them some background on the initiative and why this indicator is important

FHIMA is ready to start training coders as soon as the guidelines are released in October. Our focus is to get the other components ready.

Please let us know how we can help. Thank you again for agreeing to adopt the NUBC standards. Florida will be the first to adopt and report based on these standards (my understanding is California and NY have agreed but won't change their reporting requirements until sometime next year). Again, Florida leads the way.

Let me know if you have questions or would like to discuss.

Kim

As We Bid "Adieu" to the Gaylord Palms
Elizabeth Whitmer, RHIT, FAAMT



I am not sure just how many of you paused for a moment as you were driving away from this year's convention in Orlando at the Gaylord Palms Resort.

It was a moment to reflect upon just how many times I did drive to and from this immense luxurious meeting and convention hotel that we had frequented for what seemed like years.

Few other places can summon such an immediate response to the Atrium of the Gaylord Palms. We were all awestruck upon our first by the facilities signature glass dome. Did you know that the glass atrium was all under four acres? This is where Florida's experience is showcased in all its glory from the history and old world charm of St. Augustine to the colorful and festive island spirit of Key West, a place which holds a memory to many of us. Beyond that, to the other side is the mysterious waters and cypress of the enchanting Everglades.

The architect, yes, I had to ask, was Hnedak BoBo Group from Memphis, TN. Their determination was to set the style and grandeur of a turn of the century Florida mansion. All of that area alluded to delightful and once again memorable dining experiences. If we were not too busy with FHIMA schedules and events, we were able to experience the adorable shops and periodic live entertainment. The whole Gaylord property is set on 63 acres. They have 1406 rooms and 100 suites.

As far as their meeting and exhibition area, it provided 400,000 sq. feet of area and FHIMA was able to help consume a good part of that for our vendor and convention room needs.

Well, onward and upward for the coming year we shall turn and say "goodbye to the Gaylord" and look forward with excitement to our new convention center. Besides, as I really did turn around, I was holding up traffic trying to exit while I was enjoying my "moment of Gaylord "goodbye reflection".

Taking a quick drive over to our newly planned convention center, Rosen Shingle Creek is Central Florida's newest

and most luxurious meeting places. I was anxious to get a look at the construction and bring back to the newsletter anything I could. It is scheduled to open this September, about the time you read this article. The history of Rosen Shingle Creek reveals the captivating tale of how its majestic cypress trees provided a much needed shelter for early settlers and their homes. Rosen Shingle Creek is situated on 230 acres of gorgeous lush landscape. There will be 1,500 luxury guest rooms awaiting us. It is located off of Universal Boulevard district and as usual there are popular attractions all with reach. As far as the vendor area, they would not let me in. Something about my friend (most intimidating camera).

It was a certainty, I was able to meet my first friends of the Shingle Creek, the over anxious security guards. I was quietly escorted out-they thought I was the press. Explaining that I was a future guest from FHIMA that meant no mind to them. Perhaps it was a good thing I did not tell them that I was also on the board as FIRE Director.....Ha! I don't think that they would have found that very funny. I headed for home. Can't wait to go back.

Editor's Note: In this section of e-Coastlines, click on FHIMA news for dates of the 2007 Convention!



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1. AHIMA Board Member, CEO, Make 2006 "Most Powerful" List



This week *Modern Healthcare* announced the results of its fifth annual ranking of the "100 Most Powerful People in Healthcare." Again this year, board member Gail Graham, RHIA, director of health data and informatics for the Department of Veterans Affairs and AHIMA CEO Linda Kloss, MA, RHIA, made the list. This is the fifth consecutive year Kloss made the list and the second for Graham. Congratulations to Kloss, who was ranked at #53, and Graham, who was ranked #58. Find out who holds the number one spot, as well as the 98 others who made this year's list, by visiting <http://www.modernhealthcare.com/article.cms?articleId=41259>.

2. AHIMA, AMIA Provide PHR Guidance to Consumers

Personal health records (PHRs) provide a powerful way of helping individuals manage their healthcare, but consumers should read the "fine print" to understand the privacy policies of the organization supplying the PHR and the source of the data stored in the PHR, according to a position statement released this week by the AHIMA and the American Medical Informatics Association (AMIA).

The associations recommend that consumers look for the following policies and procedures when selecting a PHR: privacy and security; the ability of the individual, or those they authorize, to access their information; control over accessibility by others; and sources of the data stored in the PHR. It also

includes basic principles for guiding PHR adoption and use. To view the position statement "The Value of Personal Health Records," go to <http://www.ahima.org/dc/positions/>.

3. Recent Executive Order Promotes Quality and Efficient Healthcare Through Standards

As reported in e-alert last week, President George W. Bush issued executive order 13410 "Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs (71FR51089)". This order reflects a direction laid out earlier in the month by HHS secretary Mike Leavitt. The order calls for federal departments and agencies dealing with healthcare to use and require the use of healthcare standards to communicate and exchange data "accurately, effectively, securely, and consistently." The standards would also become a requirement for those who contract with the federal government such as intermediaries, health plans, and possibly providers.

The standards identified in the order will need to be recognized by the HHS secretary who has indicated that many future standards will be reviewed and approved by the American Health Information Community, harmonized by the Health Information Technology Standards Panel (HITSP), and become criteria for HIT products through certification by the Certification Commission for Healthcare Information Technology. Currently, the HITSP and consolidated health information standards are the primary standards recognized by HHS.

The order also identifies the need for transparency of quality standards and standard quality measures. As noted by Leavitt, the federal government has initiated a campaign to standardize quality measures and work has begun in earnest to seek a public/private process for agreement under AHIC. A copy of the President's order can be found in the August 28 *Federal Register* at http://www.access.gpo.gov/su_docs/fedreg/a060828c.html.

4. CMS Issues OP-PPS Regulations

The Centers for Medicare & Medicaid Services (CMS) published a formal copy of the Medicare outpatient prospective payment system rules for CY 2007 in the August 23 issue of *Federal Register* (71FR49506). Comments on these regulations are due no later than October 10. The final regulation will be effective January 1, 2007. Included in the proposed rule is a revision of the current list of procedures that are approved when furnished in a Medicare-approved ambulatory surgical center. A copy of the proposed rule is available at http://www.access.gpo.gov/su_docs/fedreg/a060823c.html.

5. CMS Publishes 2007 Physician Fee Proposed Regulations

CMS recently published its proposed physician fee schedule for CY 2007 (71FR48982). Comments on these regulations are due on October 10. In addition to the usual changes, the 2007 proposal covers additions to the list of telehealth services, payment for covered outpatient drugs and biologicals, policies related to private contracts and opt-out; policies related to bone mass measurement services, independent diagnostic testing facilities, the physician self-referral prohibition, the clinical laboratory fee schedule, the laboratory billing for the technical component of physician pathology services, and the healthcare information transparency initiative. An electronic copy of the rule can be found in the August 22 *Federal Register* at http://www.access.gpo.gov/su_docs/fedreg/a060822c.html.

6. CMS to Hold Town Hall Meetings

CMS announced that it will be holding two town hall meetings (71FR50432). The first meeting will be held on September 20 to solicit the opinions of individual Medicare physicians, providers, and suppliers on selected policies and operational issues. Providers include physicians, hospitals, home health agencies and other third-party billers.

The second meeting will be held on September 26 to solicit public input on the proposed use of and revisions to the skilled nursing facility advance beneficiary notice (71FR50429). Both meetings will be held at CMS headquarters in Baltimore, MD, and can be attended by phone. For more information, see the individual notices in the August 25 *Federal Register* at http://www.access.gpo.gov/su_docs/fedreg/a060825c.html.

7. HR 4157 just passed the House by a vote of 270-148

The House of Representatives is prepared to consider the Health Information Technology Promotion Act (HR 4157) on Thursday, July 27. The House Ways and Means and Energy and Commerce Committees have come to an agreement on what will come to the floor of the US House of Representatives this week. The new version of the legislation would require the implementation and use of ICD-10-CM and ICD-10-PCS by October 1, 2010. AHIMA supports this compromise and requests your continued efforts to generate support for HR 4157. The *new* version of our advocacy letter posted on the Advocacy Action Center of the Advocacy Assistant specifically calls for each member of the House of Representatives to vote yes on this important issue. Even if you sent the previous letter (archived July 5), we are asking you to again visit the Advocacy Action Center of the AHIMA Advocacy Assistant at <https://secure.ahima.org/DC/Login.asp> and send the new letter to your member of the House of Representatives. Our work is not yet done, and your efforts are greatly appreciated.

8. AHIMA President Appointed to AHIC Work Group

AHIMA president Jill Callahan Dennis, JD, RHIA, has been appointed to the confidentiality, privacy, and security work group of the American Health Information Community (known as the Community or AHIC). This work group was recommended by the AHIC in its August 1 meeting to "frame the privacy and security policy issues relevant to all the community charges and solicit broad public input and testimony to identify viable options or processes to address these issues that are agreeable to all key stakeholders." The issues identified initially include, methods of patient identification and authentication, mechanisms to ensure data integrity, methods for controlling access to PHI, policies for breaches of PHI confidentiality, guidelines and processes to determine appropriate secondary uses of data, and the scope for work to a long-term independent advisory body on privacy and security policies. The group, which first met on August 21, is expected to hold its first hearing on September 29. All work group meetings are open to the public and available online via the AHIC Web site at <http://www.hhs.gov/healthit/ahic.html>.

9. Federal Government to Require Business Partners to Use Standards

On August 22, President Bush signed an executive order that would require federal agencies involved in healthcare to adopt and use health information technology standards, including in quality measurement. The executive order appears to correspond with an announcement by HHS secretary Mike Leavitt earlier this month, that he would be seeking a public-private agreement on standards and uniformity in the area of quality measurement as well as other standards that would support an EHR and nationwide health information network for clinical data. While an executive order sets the tone for such a movement, the secretary and AHIC will take the steps to identify the standards the order is expected to identify. According to the secretary's comments, such standards will be harmonized by the Health Information Technology Standards Panel and then established as criteria for systems by the Certification Commission for Health Information Technology. The order can be viewed at <http://www.whitehouse.gov/news/releases/2006/08/20060822-2.html>.

10. Congress to Return September 6 with Health IT on Schedule

Congress is set to return to Washington the week of September 6, and members will be trying to finish this year's legislative business by early October so they can adjourn for elections. One of the outstanding items left to complete is sending a final version of health information technology legislation to the president. As you know, a few short weeks ago, the House passed HR 4157, the "Health Information Technology Promotion Act," which contained legislation calling for the implementation of use of ICD-10-CM and PCS by October 1, 2010. S. 1418, the

“Wired for Healthcare Quality Act,” passed the Senate in November 2005 and these two bills must be melded together in conference before being sent to the President. Please watch future e-alerts for information on how to write letters to Congress to ensure that the ICD-10 language remains in the compromise legislation that emerges from the House/Senate conference committee. For more specific information on the legislation, visit the AHIMA Advocacy Assistant at <https://secure.ahima.org/DC/Login.asp>.

11. CMS Issues IP-PPS Regulations

The Centers for Medicare & Medicaid Services (CMS) published the formal copy of the Medicare inpatient prospective payment system rules for FY 2007 in the August 18 *Federal Register* (71FR47870). See the August 10 issue of e-alert (available in the AHIMA CoP) for more information. CMS revised its approach to the APR-DRGs in the final rule which does provide for some comments. Comments will be accepted through October 2; however, the effective date for most of the rule remains October 1. The exceptions are associated with terminating reclassifications as identified in the preamble. A copy of the rule is available at http://www.access.gpo.gov/su_docs/fedreg/a060818c.html.

12. CMS Publishes IRF PPS Regulations

CMS also published its final rule for the Medicare inpatient rehabilitation facility prospective payment system for FY 2007 on August 18 (71FR48354). This final rule will be effective October 1 with limited exception. The rule also has certain provisions concerning competitive acquisition for durable medical equipment, orthotics, and supplies. A copy of the rule can be found at http://www.access.gpo.gov/su_docs/fedreg/a060818c.html.

13. Practice Brief Update on Facsimile Transmission of Health Information Now Available

The quality of healthcare is enhanced when patient health information is readily available to healthcare providers. Even in an increasing electronic environment, use of facsimile machines and fax software remains commonplace. The Privacy and Security Practice Council has updated the practice brief “Facsimile Transmission of Health Information” originally published in 2001. The council recommends periodic review of organizational fax policies and practices to ensure the best privacy protections are in place for exchange of protected health information. This Web-only resource is available online in the FORE Library: HIM Body of Knowledge at <http://www.ahima.org>.

14. Upcoming Privacy and Confidentiality Workshop

The eHealth Initiative and the Vanderbilt Center for Better

Health are co-sponsoring a privacy and confidentiality workshop, "Principles, Practices, Implementation," September 13-14 in Nashville, TN.

This workshop is designed for organizations and communities who must adopt security and confidentiality principles required for more comprehensive exchange and use of patient-centered clinical information. Drawing on national experts who have implemented policies and procedures in the course of their clinical data exchange, this workshop will be an intense, hands-on experience. To view the agenda and registration information, visit

http://www.mc.vanderbilt.edu/vcbh/ds/0606_privacy/index.htm.

15. Healthcare Quality Makes Progress at the State Level

Last week the eHealth Initiative released a report entitled, "States Getting Connected: State Policy Makers Drive Improvements in Healthcare Quality and Safety through Information Technology," indicating HIT state legislative activity is on the rise. The report tracked state HIT legislation between 2005 and 2006 and found that 38 state legislators introduced 121 bills during this time. In addition, 10 governors issued executive orders calling for the development of HIT strategies. According to eHI CEO Janet Marchibroda, "there is a notable increase in activity at the state level, reflecting a parallel increase in recognition at the federal level of the importance of IT in moving towards a more patient-centered, higher quality healthcare system." The complete report can be found at <http://www.ehealthinitiative.org/assets/documents/eHI2006ReportonStateActivities.pdf>.

16. New PHIM Article Published

The latest article published in *Perspectives in Health Information Management*, "Assessment of Student Outcomes in Undergraduate Health Information Administration Programs" by Jody Smith, PhD, RHIA, FAHIMA, sets out to determine to what extent undergraduate HIA programs have incorporated good student learning assessment practices. The author used a five-part survey to conclude that despite the wide variety of assessment tools available, test results are considered the most valuable. According to the author, "knowledge on how to link assessment results to program goals, curriculum, staffing, physical resources, and budget is instrumental in maintaining a quality program." To view the complete article, visit <http://www.ahima.org/perspectives>.

17. Deadline for Practice Council Call for Volunteers is September 15

AHIMA is about to begin its third year of hosting practice councils. HIM professionals with expertise in the following topic areas are welcomed and encouraged to apply for the 2007

calendar year:

- clinical terminology and classification
- long term care
- personal health record
- privacy and security

For a full description of each practice council, visit <http://www.ahima.org>, select the Communities of Practice icon on the top right, and go to the Resources section of the **AHIMA CoP**. The category name is **Volunteers**, and the resource name is **2007 Practice Councils**.

Potential volunteers must submit a brief paragraph outlining the knowledge and skills they would bring to the effort, as well as a CV, resume, or summary of practice experience. Send your information via e-mail to AHIMA staff member Pam Garcia at Pamela.Garcia@ahima.org. **All submissions must be received by the close of business on Friday, September 15.**

18. Upcoming Audio Seminars, Workshop

ICD-9-CM Updates for FY 2007 September 14

Are you prepared for the new, revised, and deleted ICD-9 codes that go into effect October 1? This audio seminar is presented by two HIM experts and will help ensure that you and your colleagues understand the changes and how to apply them. For registration and information, visit <http://imis.ahima.org/orders/productByType.cfm?t=1> or call 1-800-335-5535.

PPS for Skilled Nursing Facilities September 19

Discover how the Centers for Medicare & Medicaid Services fiscal year 2007 skilled nursing facilities prospective payment system changes will impact your healthcare organization. Learn how to lead change in areas like operations, coding, and billing practices. For registration and information, visit <http://imis.ahima.org/orders/productByType.cfm?t=1> or call 1-800-335-5535.

Computer-Assisted Coding Software Standards Workshop September 6-8 Arlington, VA

AHIMA and FORE are sponsoring a workshop to develop recommendations for standards for computer-assisted coding software. The goals of the workshop are to develop a framework of specific standards for evaluating computer-assisted coding software, align computer-assisted coding software standards so

they are applicable for multiple and varied use, and understand the next steps for continued computer-assisted coding software standards development and implementation. The workshop will include plenary sessions, a research forum, and topic-specific workgroups. Attendees will earn 13 CEUs. For registration and information, visit

<http://www.ahima.org/meetings/computerassistcodeindex.asp>