



# e-Coastlines

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January - April 2008

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## President's Message

Stacie L. Buck, RHIA, CCS-P, LHRM, RCC, CIC  
FHIMA President  
Email: [stacie@southeastrad.com](mailto:stacie@southeastrad.com)

Happy 2008!

Now that we no longer have new episodes of our favorite TV shows to watch due to the writer's strike what are you doing to pass the time? I don't know about you, but I can only take so much of the Britney Spears saga and listening to the bickering politicians. If you find yourself in the same position as me, here are a few things that you can do to escape and pass the time and even succeed at taking the **"Power of One" Challenge**:

1. Browse the new FHIMA website! The address is the same [www.fhima.org](http://www.fhima.org), but we have a whole new look. Let us know what you think!
2. Write an article for e-Coastlines. **Alphonso Sanders, Chairperson for the e-Coastlines Committee solicits articles on an ongoing basis.** The upcoming deadlines are February 15th, April 15th, & June 15th. Alphonso can be contacted at [alphonsosanders@cs.com](mailto:alphonsosanders@cs.com)
3. Nominate someone for an FHIMA award. FHIMA is accepting nominations for the following awards: Distinguished Member Award, Distinguished Service Award, Outstanding Professional Award, Outstanding New Professional Award, Literary Award, Outstanding

Student, Mentor Award & Educator Award. Nomination criteria and forms can be downloaded from the FHIMA website.

4. Apply for a FHIMA scholarship. **This year FHIMA is proud to announce the addition of the Charlotte Stockton Memorial Scholarship.** This new scholarship is to provide financial assistance to those students enrolled in an AHIMA approved Coding Certificate Program. FHIMA will also award the usual scholarships for the associate, bachelors and master's level programs. Criteria and applications can be found on the FHIMA website.
5. Read the latest issue of the Journal of AHIMA. FHIMA member **Susan Denny, RHIA, Director of HIM at Jupiter Medical Center** authored one of the featured articles in the current issue of the Journal. The article is titled "Queuing up for Quality: Boosting Quality with Electronic Work Queues". **Way to go Susan—we are proud of you!!!** The article is also posted in the [AHIMA Body of Knowledge](#)
6. Schedule an appointment to meet with your local Senator or Representative. **Did you know that FHIMA has an Advocacy Liaison to assist you?** At the beginning of my term I appointed **Linda Renn RHIT, CCS, CPC, CPC-H** as the FHIMA Advocacy Liaison to oversee all of the advocacy efforts in the state of Florida. Linda has been doing an outstanding job keeping the Board informed and meeting with legislators around the state. Linda has graciously offered to speak at regional meetings regarding how to make a visit and will even accompany you to a visit with your local legislators. Linda has also developed the "2+2 Advocacy Toolkit" which can be downloaded from the FHIMA website. Linda can be contacted at [linda.renn@gmail.com](mailto:linda.renn@gmail.com)
7. Become a part of AHIMA's Action Community for e-HIM Excellence (ACE). Being a member of the Action Community means having a commitment to volunteering. ACE members match their skills and interests with volunteer and career-building opportunities. The opportunities include mentoring members, speaking at CSA meetings, writing for AHIMA, and/or testifying to legislators. ACE members form a preferred pool of experts and a network of peers transforming HIM. AHIMA is currently accepting nominations at: [www.ahima.org/ace](http://www.ahima.org/ace). You may nominate yourself or someone else.
8. Connect with other FHIMA members by visiting the [Geographic: Florida CoP](#).
9. Teach a course at your local college. Very often I hear that Program Directors are searching for adjunct faculty. Teaching is a very rewarding experience and a great way to leave a lasting impact on the HIM profession by helping to train new professionals.
10. Mentor a student or new professional. This year the Bridging the Gap Taskforce is piloting a mentoring program for HIM students in the state of Florida. The goal is to expand the program in the near future, however, you do not need to be part of the formal program to take a student under your wing and groom them to become a successful HIM professional. I encourage everyone to take advantage of those mentoring opportunities that present themselves to you.

During the month of March your FHIMA Delegates will be voting on an important AHIMA bylaws change. Feedback from the House of Delegates issue forum discussions on moving responsibility of education standards to CAHIIM has prompted AHIMA to propose an amendment to the AHIMA Bylaws. The proposed changes are as follows:

"Article V. House of Delegates" – "Section 6. Powers and Duties. B. Striking the words:

~~the Standards for Health Information Management Baccalaureate Degree the Standards for Health Information Management Associate Degree~~

"Article X, Commission on Accreditation for Health Informatics and Information Management Education." Section 1 Purpose. Adding the words:

The Commission on Accreditation for Health Informatics and Information Management Education shall exist as an independent body and shall maintain autonomy in the conduct of its activities, including, without limitation, all standard-setting and accreditation activities related to health informatics and health information management degree-granting programs.

Article X, Section 2. Commission on Accreditation for Health Informatics and Information Management Education. As noted below:

The Commission on Accreditation for Health Information Management Education has sole and independent authority in all matters pertaining to accreditation of educational programs, including, but not limited to standard setting, establishing standards for the health informatics and health information management degree-granting programs, establishment of fees, oversight of finances and administration.

This bylaws change is being proposed so that AHIMA may pursue Council for Higher Education and Accreditation (CHEA) for HIM programs. CHEA requires that CAHIIM demonstrate independence from the parent entity (AHIMA) for the conduct of accreditation activities and determination of accreditation status. This means that the House will no longer vote on changes to setting standards for and accrediting HIM Programs. The House of Delegates would still have input through discussion forums and through a public comment period, but no vote.

If you are interested in learning more about CHEA accreditation and the proposed bylaws amendment, additional information is posted on the [State Leaders CoP](#). If you have any questions on this change, please feel free to contact your FHIMA delegates—Stacie Buck, Michelle Mock, Dwan-Thomas Flowers, Barbara Flynn or Lori Langley. Contact information for your delegates can be found on the website under "About FHIMA", then under Executive Board.

Lastly, I would like to thank everyone that participated in the FHIMA Communication Survey. We received over 300 responses! The FHIMA Board is in the process of reviewing the individual comments that were submitted. We are committed to our top strategic objective which is to "Facilitate effective communication between FHIMA, regional leadership and our members". The survey results

will help us build on the changes that we have already implemented. These changes include: chat sessions with the FHIMA President, monthly e-Alerts, regular conference calls with the regional Presidents and the FHIMA President & President-Elect and of course the new website.

Questions? Comments? Suggestions? Email Stacie at [stacie@southeastrad.com](mailto:stacie@southeastrad.com)

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## FHIMA News

### FHIMA Hill Day 2008

FHIMA members will travel to Tallahassee and meet face-to-face with state legislators. FHIMA Hill Day is an opportunity for FHIMA members to visit with state lawmakers and educate legislators and their staff about the HIM profession. When legislators have information about whom we are and the importance of the HIM field, they are better able to influence legislation favorable to the HIM profession. It is an effective way to educate our state legislative leaders about the critical role of HIM professionals in delivering quality healthcare to the public. FHIMA Hill Day will take place on Thursday, March 13th. We'll have an article about the experience and our successes in a future issue of e-Coastlines!

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### Attention HIM/Coding Certificate Program Students! FHIMA Scholarships Information

We need applicants! The deadline to apply to all FHIMA scholarships is fast approaching. We encourage all students in a HIM program to read the eligibility information and apply! Scholarships will be provided this year to students enrolled in both undergraduate and graduate studies related to the Health Information Management field and in approved Coding Certificate programs. Starting in 2008, FHIMA announces the Charlotte Stockton Memorial Scholarship. This scholarship honors the memory of Charlotte Stockton (Stat Solutions, Inc. and Professional Outsourcing Solutions, Inc.) who was committed to the HIM Profession. The scholarship will be offered to qualified applicants enrolled in AHIMA approved Coding Certificate programs.

If you know a deserving HIM/Coding Certificate program student, encourage the student to apply for one of the FHIMA scholarships. The deadline for submitting applications is March 28, 2008!

[Click Here for the Scholarship Application and Eligibility Information](#)

[Click Here for Scholarship Reference Form](#)

For more information, contact:

Donna Soto, RHIT, CPC, FHIMA Scholarships Committee Chair  
[dsoto45@bellsouth.net](mailto:dsoto45@bellsouth.net)

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### Plan to attend FHIMA Convention! July 14th-17th 2008



Registration packets will soon be available! Watch your email for notification and keep checking the FHIMA website!

The FHIMA Program Committee has expanded this year's agenda to offer you more variety than ever before. Keynote speakers on both Tuesday and Wednesday morning will kick start your day before heading off to one of the three all-day themed educational tracks on coding management, e-HIM, general HIM practice, career development, compliance, and general knowledge for students.

We've also expanded educational opportunities for all HIM professionals on Thursday! Traditionally Thursday has been designated as the coding day; however, this year we've added an all-day legal seminar with the dynamic attorney Michael Lowe. For the coders, there will be two informative tracks on a variety of coding and clinical topics.

Registration Information: Registration packets will soon be available! Cost of attending will be \$350 for AHIMA members for all three days (Tuesday, Wednesday, Thursday) for registrations postmarked before 6/4/08. We will also be offering single day registrations for either Tuesday, Wednesday or Thursday for \$150 for AHIMA members if postmarked by 6/4/08. Non-members can register for a full day registration for \$400 or single day registration (\$200) if postmarked by 6/4/08. See registration form when available for more

details!

Hotel Information: FHIMA will welcome members at the Omni Orlando Resort at ChampionsGate in Orlando, a 15-acre recreational area which includes two world-class golf courses and a delightful 850-foot lazy river! Room Rates for FHIMA Convention attendees are Single/Double for \$149 plus tax and a Junior Suite for \$338 plus tax. Room reservations must be made by 6/13/08. Call 1-800-843-6664 to make reservations or visit the hotel website.

[Visit the Hotel Website](#)

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## Articles

### Can you hear me now? FHIMA asks membership for thoughts on improving communication with members.

By: FHIMA Board of Directors

In December 2007, FHIMA sent out an online survey to active members in order to determine level of member's satisfaction with communication with FHIMA leadership and to solicit suggestions for improvement. There's nothing more frustrating with someone asking for your opinion and then ignoring what you had to say! The leadership of FHIMA has made a commitment to improve communication with members. Not everything suggested on the survey from members is feasible due to operational and/or budget constraints but there were some great ideas passed along.

The leadership of FHIMA decided to subscribe to this really unique tool, an online survey program. In the past, surveys were mailed or given to the membership at the annual convention. While both methods have been helpful, they do take extra time to complete and compile and can get rather costly. Providing an online survey to our membership was deemed feasible, cost-effective and timely. It will also provide us with a good starting point and will enable us to resurvey members in the future to measure success. Once the online survey was closed, the tool allowed us to see results graphically as well as view text responses. These text responses have been compiled and reviewed by the FHIMA Board. In general, FHIMA members were satisfied with the level of communication. In this article, I want to focus on some of the recurring themes in the text responses, and happily, point out where we've already implemented suggestions made by members!

Suggestions for improving FHIMA communications were:

**Volunteer opportunities** – people wanted to know more about volunteer opportunities and what committees existed within FHIMA. Responders indicated that they knew FHIMA had committees but really weren't sure what these committees did. Many asked about how they could get involved. Some possible ideas to improve in this area are to include a "Volunteer Opportunity" tab on the website. This section would include opportunities to get involved as well as a description of FHIMA committee composition, tasks, etc. Adding a tab labeled "Volunteer Opportunities" is an option that is in the works but this involves a design change (and costs) to the website so we may choose to place this information under an existing tab.

**Educational opportunities** - Some members indicated that they wanted more information on CEU opportunities around the state and in their areas. Specifically, some members mentioned certain locations within the state that they would like to see workshops/convention held. While FHIMA always tries to accommodate this request, many times it is just not feasible. For example, we keep the Annual Convention in the Orlando area, primarily because the size of our space needs for the general session, exhibit hall, etc. is fairly large and many hotels cannot accommodate our needs. It may seem like a hotel is big and has lots of space, but the space configuration of the hotel may not accommodate our group.

Other suggestions included publicizing educational opportunities so members are aware of when and where they are occurring. The website is going to be your best source for finding educational opportunities in the state. Our goal will be to make sure regional educational opportunities are posted timely on the website (and don't forget about the Florida CoP on AHIMA's website!). Go to the website and click on the Calendar of Events tab. Looking for 2008 FHIMA Convention dates and location? It's posted on the calendar so you can mark that date in your planner!

**Articles in e-Coastlines** - Members expressed a desire to have relevant HIM articles and information available both on the website, CoP and e-Coastlines. E-Coastlines is FHIMA's online newsletter. Many years ago, FHIMA decided to follow other state examples by offering a newsletter in online format. This was a significant cost savings for the association and made e-Coastlines available to more than just FHIMA members. In fact, anyone interested in the HIM profession that visits our website can access the information! You may have also noticed on the new website that issues of e-Coastlines are posted in a .pdf format as well so you may save, print and read at your leisure.

FHIMA has a committee of volunteers designated to gather relevant articles for each edition. However, since we do not have a paid newsletter staff, we rely on the committee members to solicit articles. We have many FHIMA members in the state with such a variety of HIM areas of expertise. We always need articles relevant to all aspects of HIM, so PLEASE consider writing and submitting an article!

**Effective coding roundtable** – This has been an area of struggle for our state association. It seems we get something started and then the momentum doesn't hold. However, in 2007 the Data Quality Committee posted a Coding Roundtable Toolkit on the Florida CoP and the FHIMA website. This Toolkit is a compilation of guidelines as well as topics for holding coding roundtable meetings in your region. This will guide the state, regions and other interested individuals in creating a roundtable. The Data Quality Committee is

committed to posting new topics and materials to the FHIMA website on a quarterly basis, so please check the website for new materials.

**Enhanced FHIMA Website** - If you haven't done so already, check out the new design of the FHIMA website, [www.fhima.org](http://www.fhima.org). There were many responses that indicated we needed a new look to our website. We are happy to report that we have met this need and expectation from our membership! The website is a work in progress and will continually be enhanced. Here are a few of the goals we set and met regarding the website:

- Announcement of events on homepage
- Additional tabs for easier navigation through the site
- Enhanced job posting page with replies to employer postings going directly to employer, not showing on the site.
- Easier navigation of e-Coastlines. Previously each page of e-Coastlines was a separate web page. Now you can navigate through the issue easier and also print out a .pdf file of the issue.

**Regular hour for chat** – We have implemented chat sessions with the FHIMA President to keep members up to date with FHIMA happenings and for members to share thoughts, questions and suggestion to the FHIMA leadership. The chats are scheduled at various days and times to allow as many members as possible to participate. Not everyone will be available to participate on the same day or time due to demands of personal schedules. The information regarding these sessions is posted on the website, CoP and an email reminder is sent.

**Mailings from FHIMA** – Some members indicated they wanted more mailings and some said don't send too many! FHIMA will try to find the middle ground here which isn't always easy! If you feel as though you'd like more "mailings" which may be translated into "more information", our website is always available 24/7. If you have specific questions or need specific information, you can always send an email to FHIMA (again you can do this any time of the day!) at [info@fhima.org](mailto:info@fhima.org). Which, by the way, we want to point out that we've even simplified our email address!

**Identify strategic goals and give updates** – FHIMA's strategic plan is posted both on the FHIMA website and the Florida CoP. If you don't know what the Florida CoP is, this is the online community of Florida AHIMA members. So, you must be a member of AHIMA but you don't need to be a member of the Florida association to join the Florida CoP. The CoP is a place where you can chat with members, post messages, see events in Florida, find FHIMA related materials such as the strategic plan, etc. Anyways, back to the strategic goals suggestion. FHIMA has recently invested in an online tracking tool that will help keep the leaders and committees on target with accomplishing goals set forth in the strategic plan. This tool requires those responsible for certain goals to ensure they are completing their goals in a timely fashion. This increased accountability of the leadership of the association will ensure our organization continues to move forward. It is a great suggestion to keep the membership posted on how we are doing meeting the goals in the strategic plan and we will begin to explore options on how to accomplish this! Don't forget that each region has an assigned FHIMA Board Liaison. This person is available to present an FHIMA update at your region. If you are unsure who the assigned liaison is for your region simply send an email to [info@fhima.org](mailto:info@fhima.org) and ask.

**Local HIM associations** - It was evident that some members were confusing FHIMA with their local associations. Florida has 9 regional (local) HIM associations that have their own leaders and officers. Each region handles its own business and not all regions function the same. FHIMA offers guidance and support to the regions but does not govern them. If you'd like to learn more about the HIM regions in Florida and see what region you are in, go to the website, [www.fhima.org](http://www.fhima.org) and click on the Regional Associations tab. There you will find the counties that are in each region and the contact information for that region. To improve, FHIMA will strive to make sure that regional events are posted on the FHIMA website and Florida CoP as we get information from the regions. Keep in mind that each region has its own methods of communicating with its own members. Some send emails, some have websites, some use US Mail. It's a good idea to contact your region and find out how THEY communicate with their own members so you can stay in the loop on the regional level!

**How does FHIMA communicate with its' members?** Good Question! Our two main methods will be email and the website. First, let's talk about email. Many, many facilities block emails from a distribution list so it is BEST to use a personal email address instead of a work email address. Usually when a message is sent out, there are many returns from blocked emails. So, make the change to your personal email and you'll hear from FHIMA more often! Also, don't forget to make sure that your AHIMA Member profile is up to date with your current email address. FHIMA downloads its members lists from AHIMA so, if you aren't getting emails from FHIMA or AHIMA, the email address on file may be out of date.

Second, use the website! This is always available so you can get information any time you need it! If you don't find what you are looking for, send an email to [info@fhima.org](mailto:info@fhima.org). At certain times for certain events we do use the US mail service to send information. In the fall, we send a postcard letting members know that FHIMA officer nominations are available online as well as Service Awards and Scholarship applications. In the past, we have sent a packet containing all applications and this cost lots of money. Several years ago, FHIMA decided the money could be put to better use and we switched to the postcard. In addition, FHIMA members that are eligible to vote in the FHIMA elections are sent a postcard reminding them that polls are open. Again, in the past we used to send paper ballots out for, again, lots of money and we switched to online voting. Late spring, we do another US postal service mailing and we send the FHIMA Annual Convention registration packet out to all FHIMA members. This packet contains the agenda and a registration form for the convention. The information is also posted online and information about the convention (date and location) is posted on the website well before the packets are sent out so members can mark the date.

In conclusion, the FHIMA leadership would like to thank EVERYONE who responded to the survey! Please know that the leadership is continually working to address these and other issues. Some suggestions can be implemented relatively easily while some remain more challenging due to the nature of our organization, particularly because we rely on member volunteers to meet the needs of members.

If you can't find information you are looking for, GO TO THE WEBSITE or ASK any of the FHIMA Board members. Anytime you have a question, ASK. The leadership of FHIMA exists to serve you. If you are interested in becoming more involved just ASK we will help GET YOU INVOLVED. If you want to see articles in e-Coastlines that are relevant, please submit suggestions for topics and authors and considering writing an article yourself and submitting it for publication. If you want more regional programs in your area, contact your regional leaders and assist them in meeting those needs. Offer to host a meeting, speak at a meeting and consider serving in a leadership role in your region. If you identify a need, get involved. Remember sometimes to SEE change you must BE the change. If you responded to the survey, you took the first step in facilitating change within your organization and working to improve your association. If you have yet to get involved, now is the time!

One last observation, we want to give a big KUDOS to those (and there were many) that responded in the comment section with statements like, 'I myself will promise to do a better job at being a better FHIMA member.' Likewise the FHIMA Board will continue to strive to better serve the members in our state of Florida. We are excited to meet you in the near future as you get involved with FHIMA!

[Visit FHIMA.org Today!](http://FHIMA.org)

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## Overview of the Central and North Florida HIMSS Information Technology and Advocacy Program

By: Carla Gaines, MPH, RHIA, CCS  
FHIMA Director

The Central and North Florida Healthcare Information Management Systems Society (HIMSS) held its 2008 Information Technology and Advocacy Program in Tallahassee, Florida on January 22-23rd. I had the privilege of representing FHIMA and networking with other healthcare professionals who shared a common interest in health information technology and management.

HIMSS is a healthcare organization exclusively focused on "providing global leadership for the optimal use of healthcare information technology and management systems for the betterment of healthcare." The society has 20,000 individual members, 330 corporate members, 90 committees, task forces and workgroups, as well as 47 chapters. Their mission is to lead change in the healthcare information through knowledge, sharing, advocacy, collaboration, innovation, and community affiliations.

On the first day of the program, I attended the Committee of Health Quality, chaired by Representative Gayle Harrell. In this meeting Carol Selby, the spokesperson for HIMSS, gave an excellent presentation to the Committee by introducing HIMSS, describing their vision, mission, and strategic direction. Similar to our Hill Day, members of HIMSS then met with state legislators throughout the day. During the evening, I had the honor of attending a reception and meeting Representative Harrell and other healthcare leaders from the South Florida HIMSS Chapter, Florida Association of RHIOs and AHCA. Carol was gracious enough to introduce me to other members of HIMSS who seemed interested in FHIMA and its focus.

On day two, there was a State House Demonstration and a health IT set up in the Capitol Rotunda. There was a wealth of information distributed ranging from privacy and security, personal health records, clinical informatics, patient safety management, and financial systems. In the afternoon, members of HIMSS again met with state legislators as part of their advocacy campaign.

This experience was enlightening and reiterated the need for FHIMA to become more visible as well as network and align with other organizations with similar interests. Imagine how more powerful our advocacy efforts would be and how this would strengthen our professional growth. It would behoove us collectively and individually.

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## Bridging the Gap: Education to Employment

By: Marjorie H. McNeill, PhD, RHIA, CCS

In May of 2006, the American Health Information Management Association House of Delegates passed a resolution sponsored by the Florida Health Information Management Association (FHIMA) designed to bridge the gap between education and employment. One aspect of the resolution focused on creating preceptor programs to help in the transition from education to employment.

In order to facilitate the employment of new graduates from health information management (HIM) academic programs at the baccalaureate and associate degree levels, and coding programs at the pre-degree level, the FHIMA Bridging the Gap Task Force was formed. The Task Force membership was divided into subgroups that have been diligently working to bring an education to employment transition model in the State of Florida. Activities that the subgroups have undertaken include:

- Internship Opportunities – In October, a letter was sent to HIM directors to increase partnerships with health care facilities in the State of Florida. To date, 23 Florida hospitals have responded. These hospitals have been matched to a HIM academic program. A match report, including contact information, has been generated and forwarded to hospitals and academic programs. Lisa Libby will be making a best practice presentation on obtaining administrative approval for internships and the steps for implementing an internship program at the 2008 FHIMA Annual Convention.
- Mentorship Program – After mentorship program guidelines were formulated, six HIM programs agreed to participate in the initial

phase. In October, an e-mail blast sent requesting FHIMA members to participate. In January, mentors and their students participating in the pilot mentorship program made initial contact. An introductory letter and list of helpful hints for mentors/mentees were developed and distributed.

- Coding Roundtable – Coding roundtables are being planned in conjunction with HIM programs. In January, a toolkit link was posted on the FHIMA website. Identified community colleges will host a coding roundtable. Student assignments are being developed to integrate coding roundtable information into the curriculum.

This multi-faceted strategy for closing the gap between education and employment will enhance efforts to provide professional practice experience to students and prepare them for the work force and to further advance efforts to employ recent graduates from educational programs by creating entry-level opportunities.

The next time you are asked - Have you agreed to serve as a mentor in the mentorship program? Do you affiliate with a HIM program in the State and serve as a clinical site supervisor and /or guest lecturer in that program? – we hope you can say “YES!”

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## **FHIMA Legislative Committee Update**

By: Kelly McLendon, RHIA  
Co-Chair, FHIMA Legislative Committee

The FHIMA Legislative Committee continues to work on the new FHIMA Legal Manual. Its projected publication will be by the FHIMA meeting this summer so stay tuned for developments. The new Manual will contain expanded sections on eDiscovery for electronic records and will be more professionally packaged. All sections are being updated and many expanded.

Legal Health Records continue to spur great interest around the nation. The new (as of December 2006) Federal Rules of eDiscovery for Electronic Records is beginning to appear on attorney’s radar screens, an increasing number of plaintiff’s attorneys are now questioning how the ‘true’ medical record is comprised in hospital environments with mixed paper and electronic (otherwise known as ‘hybrid’) record management scenarios. These new rules apply only to Federal court, but thanks to the Uniform Commissioners stance that they be expanded to state courts there is some expectation, but not confirmation yet, that these rules will find their way eventually into Florida’s State (and possibly other) courts therefore it is considered prudent to become familiar with and to have a well organized and documented plan for defining your Legal Health Records for your facility. If you need more information on this subject don’t hesitate to contact me at 321-268-0320 or [kmclendon@hixperts.com](mailto:kmclendon@hixperts.com).

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## **As Time Passes Us By**

By: Elizabeth Whitmer, RHIT, FAAMT  
President, SWHIMA

The Southwest Region has had so many successful meetings and all day seminars for the last six years. I wanted to take this opportunity to express thanks to all of my board members and all of the volunteers we had that made it that way. I know that each region is facing their own various crises’ trying to hold on and stay alive.

Health Information Management (HIM) professionals our AHIMA Organization, which consists of (most current count) 51,000 members are dedicated to the effective management of personal health information needed to deliver quality healthcare to the public. Founded in 1928 to improve the quality of medical records, AHIMA works with our state association helping to advance the HIM profession in an increasingly electronic and global environment through leadership in advocacy, education, certification, and lifelong learning.

We, our profession, are not going anywhere. Our looks may change in many ways. Our work environments are changing all the time. Health care can be traced back more than 7000 years when primitive tribes would seek out medicine men, who had a reputation for their supernatural powers to rid tribal members of whatever ailed them. About 2500 years ago, ancient Greek medicine became the forerunner of modern medicine. Much of the medical terminology in use today is derived from the Greek language.

The American Hospital Association was founded in 1848 for the purpose of promoting public welfare by providing better health care in the hospitals.

It is our duty, in each region, to carry on with this education and learning to all of our members. We as board members do realize the difficulty in pulling it all together. Agreeing on speakers, locations for our seminars, refreshments to be made available and all the paperwork involved in the preparation of an agenda, continuing education certificates and a calendar of the months ahead, but we need to do this. I want to encourage all members of each region to step forward and get to know your board members. Please attend a meeting and see what is going on. Ask questions and bring comments and ideas of your own to the table. We are all in this together. It is very important to not only our National Association (AHIMA), our State Association (FHIMA) but to you in YOUR region. It is a challenge that can be met! Southwest has been a good role model for our members. Your region can be too!

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## Privacy Impacts Hospital Construction

By: Linda Noel M.Ed., RHIA, Corporate Privacy Officer  
Corporate Compliance and Internal Audit, Orlando Regional Healthcare

HIPAA requires that we implement reasonable safeguards to limit incidental disclosures of protected health information (PHI) and avoid prohibited uses and disclosures of PHI. Today, patient privacy has become an important consideration in hospitals. The slightest change in a work area may enhance patient privacy and result in greater patient satisfaction. Many healthcare organizations are renovating or constructing new facilities that resemble hi-tech hotels. These new state-of-the-art buildings are complete with private patient rooms, private consult rooms and private registration areas. The 2006 edition of the Guidelines for Design and Construction of Health Care Facilities, recommended single bed rooms as a minimum standard for some types of nursing units. This shift away from semi-private rooms is a response to regulatory issues, safety concerns and patient preference. Traffic areas are being re-routed in some facilities to provide separate corridors and elevators for patients. While many of us may not be directly involved in the construction of a new facility, we may be able to influence changes in our departments and work areas that promote patient privacy. Examples of modifications that could be provided for reasonable safeguards to protect PHI are:

- Using cubicles, acoustical panels, dividers and curtains
- Soundproofing rooms
- Locking cabinets and drawers that store documents that containing PHI
- Providing adequate shred bins
- Providing private conversation areas
- Turning computer monitors away from public view
- Installing screensavers
- Providing secure workstation locations
- Providing secure areas for fax machines and printers
- Limiting access to work areas
- Re-designing traffic flow
- Installing keypad access
- Protecting patient charts from public view
- Using single sign-in sheets for patients
- Limiting PHI posted at entrances to patient rooms
- Require patient's written authorization to post letters, cards and pictures
- Installing tracking boards away from public view

While not all safeguards may be appropriate for every work area, healthcare professionals may influence changes that promote patient privacy by staying vigilant and guarding the PHI they are entrusted with in their daily work activities.

Linda Noel is the Corporate Privacy Officer in the Corporate Compliance and Internal Audit office at Orlando Regional Healthcare. She can be contacted at [Linda.Noel@orhs.org](mailto:Linda.Noel@orhs.org).

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## Streamlining the Release of Information Process Between Health Information Management Services (HIMS) and Patient Financial Services (PFS)

By: Teresa Michael, RHIT  
Sr. Clinical Systems Analyst at Sarasota Memorial Hospital

Sarasota Memorial Hospital (SMH), an 806 bed acute care public hospital located on the Gulf Coast of Florida, implemented an automated release of information (ROI) workflow application. Prior to implementation, HIMS and PFS release of information processes were separate departmental procedures. HIMS utilized an outsource vendor while PFS performed most release of information functions in-house. The outsource vendor worked with PFS staff for those requests that required both medical records and billing

records. The HIMs Director and PFS Director wanted to realize economies of scale in combining the two departmental processes to decrease the number of steps to process a request and to decrease request turnaround times.

As many hospitals in today's challenging healthcare environment, SMH maintains a hybrid record to include a clinical information system, a document management system for paper generated documents as well as the traditional paper and microfilm for historical records. The outsource vendor maintains a separate office within the hospital and is responsible for all billable and non-billable requests. The HIMs staff and the outsource vendor staff access information from all aspects of the hybrid record in order to fulfill requests for release of information.

When the document imaging project began, a Release of Information sub-team was created as part of the overall project team. This team included representation from Information Systems, Health Information Management, Patient Financial Services, the outsource release of information vendor, an operational consultant from the document management vendor as well as the SMH Project Manager. We held ROI team meetings in addition to the regularly scheduled project meetings. We reviewed all ROI procedures between HIM, PFS, and the outsource vendor. We identified opportunities for increased efficiencies and identified new processes. We, then, developed courseware and trained staff on the new processes.

SMH went live with the document management system and new release of information workflow on May 1, 2006. Prior to implementation, there were 16 steps involved in the release of information process and the turnaround time was five to six days. Currently, the process involves seven steps and the turnaround time is two to three days. The outsource vendor has incorporated all PFS release of information requests into their daily routine without increasing FTE's. Previously all communication between PFS and the outsource vendor was carried out utilizing interoffice communications and could add days to the turnaround time for those requests requiring both medical records and billing records. Today, the PFS mail room staff scans a request for information directly into the workflow generating a work item in the appropriate work queue for the outsource vendor. They can also forward requests back and forth to each other as necessary. The workflow allows the ability to divide the work into user defined work queues based on the type of request. Additionally the workflow includes productivity and management reports providing easy tools for reporting statistics.

As a result of the implementation of an automated release of information workflow, Sarasota Memorial Hospital has realized improved productivity and decreased request turnaround times. Additionally, the management teams have the ability to easily track requests through all stages of the release process, generate accurate page counts for all types of records released, and the staff can easily communicate electronically regarding the progress of each request.

Sarasota Memorial Hospital utilizes Eclipsys Sunrise Clinical Manager and Account Manager/Patient Financial Manager, Streamline Health's accessANYware Suite of Products including releaseANYware, and Professional Outsourcing, Inc. is the outsource vendor.

Teresa Michael, RHIT is a Sr. Clinical Systems Analyst at Sarasota Memorial Hospital and can be contacted at [teresa-michael@smh.com](mailto:teresa-michael@smh.com).

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## AHIMA Update

### Gear up for AHIMA's 2008 Capitol Hill Day

The reservation date for AHIMA's Capitol Hill Day is fast approaching. This year Capitol Hill Day will be held on April 8, and reservations must be made by March 14. Hotel reservations must be made on or before March 10—remember this will be during Washington's Cherry Blossom Festival.

If you still have questions visit <http://www.ahima.org/dc/hilldayinfo.asp> for all the details, or see the item "AHIMA Capital Hill Day FAQs" in this e-alert. Don't let your questions keep you from meeting with Congress.

[Learn More](#)

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### President Calls for Increase in Funding for ONC, ICD-10 Conversion

The President's fiscal year 2009 budget proposes a \$6 million increase for the Office of the National Coordinator for Health Information Technology (ONC) to \$66 million. In addition, the President has proposed \$40.3 million to begin converting to ICD-10 and President has proposed additional health information technology funding for the Agency for Healthcare Research and Quality (\$45 million) and the Office of the Assistant Secretary for Planning and Evaluation (\$3 million). The President's budget proposal outlines several key roles for ONC:

- supporting efforts to assure appropriate federal privacy and security protections for electronic health information and to support state consensus efforts to address patient protections
- transitioning the American Health Information Community (AHIC) to a public-private partnership to serve as the successor to AHIC
- standards development and implementation for the federal government and the private sector

- developing a technical architecture to advance adoption of health information technology

For a copy of the President's budget in brief, visit [www.hhs.gov](http://www.hhs.gov).

[Visit www.hhs.gov](http://www.hhs.gov)

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## Budget Calls for More Funding for Office of Civil Rights

The Department of Health and Human Services Office of Civil Rights (OCR) is responsible for enforcing the Health Insurance Portability and Accountability Act privacy rule and also ensuring the public's rights to nondiscriminatory access to and receipt of federally funded healthcare programs. The President has proposed a \$6 million increase for OCR, bringing its funding to \$40 million. According to the President's proposals, since the HIPAA privacy rule compliance date of April 14, 2003, OCR has responded to more than 24,000 privacy complaints and had the authority to investigate approximately 7,700 of them. In 2,500 of those cases they have found no violations and in nearly 5,000 cases, the covered entities have completed corrective actions. The President's HHS budget and the budget in brief can be found at [www.hhs.gov](http://www.hhs.gov).

[Visit www.hhs.gov](http://www.hhs.gov)

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## CMS Announces Final Rule for Implementation of Revisit Use Fee Program

The Centers for Medicare and Medicaid Services (CMS) announced in the Federal Register [73FR3405] its final rule with comment period implementing the continuation of the revisit user fee program for Medicare survey and certification activities. The regulations became effective on January 18. The Secretary of the Department of Health and Human Services has designated CMS to enforce the conditions of participation/coverage and other requirements of the Medicare program. The revisit user fee will be assessed for revisits conducted in order to determine whether deficiencies cited as a result of failing to satisfy federal quality of care requirements have been corrected. The FY 2007 fee schedule published in the final rule will be retained. The published fee schedule will be used by CMS for the assessment of fees until a new fee schedule is proposed and published in final form.

[For an overview of the final rule with comments, click here.](#)

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## AHRQ Launches PHR Video

The Agency for Healthcare Research and Quality (AHRQ) has launched a new consumer-oriented video on keeping a personal health record. "The Importance of Keeping a Personal Medical Record" discusses what information you need; how to gather the information; what works best; and how patients can become more engaged in their healthcare by maintaining a personal health record.

[To access the video, click here.](#)

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## Consumer Awareness Campaign Drives High Traffic to myPHR.com

With national radio and TV coverage and stories picked up by online and print publications, AHIMA hits the spotlight for personal health records (PHRs) and consumer awareness. The press coverage has driven traffic to [myPHR.com](http://myPHR.com) in numbers tripling the forecasted visits since the campaign, "It's HI Time, America," launched on January 28.

The streamlined, consumer-friendly Web site, [myPHR.com](http://myPHR.com) features:

- editable health forms
- forms available in Spanish
- online newsroom
- glossary of terms
- new media player (contains videos of personal health stories, a PHR National Medical Report, and a nationally televised public service announcement)

[Click here today to start your personal health record.](#)

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## **HCCA Roundtable Report Now Available**

In a recent report, "Driving for Quality in Long-Term Care: A Board of Directors Dashboard," the Office of the Inspector General and the Health Care Compliance Association present the challenges and opportunities for the board of directors of long term care organizations.

[Click here to access the roundtable report](#)

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## **Report: PHRs May Make You Healthier**

A recent report from the Associated Press indicates personal health records (PHRs) may improve the health of patients by giving them more control over information such as immunizations and medication records. Studies are currently underway in several states to determine if there is a health difference between patients using a PHR versus those receiving standard care. The report also noted that PHR software is expected to evolve and become more prevalent similar to the way tax-preparation software has become more widely adopted.

[Click here to access the complete article.](#)

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## **Plan to Attend the 2008 Winter Team Talks Meetings**

Plan to join your colleagues at the 2008 Winter Team Talks meetings. Learn about ongoing plans within the Association, receive comprehensive meeting materials, and share your thoughts on upcoming strategic decisions? All free of charge. All members are welcome to attend these informative meetings and receive continuing education credits for attending.

- March 6—Winter Team Talks in Las Vegas, NV (Planet Hollywood Casino & Resort)
- April 7—Winter Team Talks in Washington, DC (Renaissance M Street Hotel)
- April 8—Hill Day in Washington, DC (Renaissance M Street Hotel)
- March 27—Virtual Winter Team Talks. 12 p.m.-1:30 p.m. CT. Registration details will be available in the "Community Links" section of the State Leaders and HOD CoP

Hotel registration and transportation details are posted to the State Leaders and HOD CoP Resource section.

[Click here to access the meeting registration link .](#)

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