President's Message

Danika Brinda, MA, RHIA, CHPS, MHIMA President

Hello! It is the time of year where the hats, mittens, and scarves make their appearance and we begin the few months of cold and snow in Minnesota! While it is always a change of seasons and time to bundle up, I do appreciate the distinct changes in our seasons!

We continue to move forward with our strategies for MHIMA. Our last board meeting was on November 15, 2013. We discussed a few of the areas that we are working on, specifically on how to recruit members and make our association the best it can be! Thank you to everyone who has sent me an e-mail with suggestions and ideas. It is great to hear from all of you!

The five MHIMA Delegates attended the one-day House of Delegates meeting this past October at the AHIMA Annual Meeting. Please see the delegate update
Welcome!

Welcome to the November-December 2013 Holiday Issue of our MHIMA member and corporate partner e-newsletter, Uplink. We hope you enjoy our newsletter!

Feeling creative? Looking for some CEUs? We are always looking for authors of articles of broad interest to our MHIMA membership: about 500 words, worth two (2) CE credits for your original work. There are lots of "hot topics" in today’s world of healthcare, Privacy & Security, e-HIM, ICD-10, etc. If you're interested in authoring an article, please contact MHIMA's Executive Director.

Current and past issues of our e-newsletter are available under the UPLINK E-NEWSLETTERS button on our MHIMA website.

for more information!

If you haven’t seen it, check out our Annual Meeting page – we are working with a new vendor to help us organize and prepare for our annual meeting! The beginning of the agenda for our annual meeting is posted – make sure to check it out! http://knowledgeconnex.com/mhima/annualmeeting/overview.html

May everyone have a great holiday season. Take time to enjoy your friends and families and be thankful for everything! 2014 will be an adventurous year with ICD-10, the Affordable Care Act, Meaningful Use Stage 2, and so many more big changes in healthcare.

Danika

MHIMA Vision & Mission

"Dream Big & Believe"
2014 Annual Meeting
DoubleTree by Hilton Bloomington
Vision: The Minnesota Health Information Management Association, together with AHIMA, will set the standard and be the recognized leader in health information management practices, technology, education, research, and advocacy.

Mission: MHIMA is committed to the professional development of its members through education, networking, and life-long learning. These commitments promote high quality health information and benefit the public, health care providers, and other clinical data users.

MHIMA Takes the Blue Button® Pledge

By Sue Powell, RHIA, MHIMA Delegate Director

On November 15, MHIMA took the Blue Button pledge in support of the AHIMA Blue Button Initiative. The Blue Button signifies to patients that they can view online and download their personal health records. Several federal agencies, including the Department of Defense, Health and Human Services, and Veterans Affairs, have implemented this capability for their beneficiaries.

Since launching the Blue Button Initiative six months ago, the Office of the National...
member information in your AHIMA profile on a regular basis, including how we communicate with you.

Take a couple of minutes today and visit the AHIMA website, log in with your seven-digit AHIMA member number and your last name, and click on "My Profile/Dues Renewal." Review all of the sections and update any old information.

In the section for Component State Association (CSA) Selections, may we ask that you check "YES" to select e-mails about products and services and "yes" to Postal Mailings. "CSA" stands for the state that you want to be associated with as an AHIMA member. MHIMA uses email as our primary method of communication, and occasionally land mail. If you check "no" in either of these options, you don't receive either type of communication from MHIMA.

Remind your colleagues to update their profile as

Coordinator has been working toward ensuring every American has access to their digital health information and helping application developers use the data to build products and services that help individuals with their health.

Blue Button symbolizes patients’ right to access their personal health information in a usable and safe digital format. It has spread from the federal government to the private sector.

MHIMA encourages all members to take the pledge and to spread the word about the Blue Button to employers, family, providers, friends and fellow HIM professionals.

Resources:

1. Learn more about Blue Button: http://www.healthit.gov/patients-families/pledge-resources

2. More information on the AHIMA Blue Button Initiative can be found here: http://journal.ahima.org/2013/11/06/ahima-launches-blue-button-campaign/

Read more about the Blue Button strategy: http://www.hhs.gov/digitalstrategy/open-data/introducing-blue-button-plus.html

AHIMA Announces $10 Dues Increase Effective January 1, 2014

Beginning in January of 2014 there will be a $10 dues increase for the Active and Student membership categories. This increase aligns itself with the strategy to do more frequent incremental dues increases rather than infrequent larger jumps.

Active membership dues were last increased in 2009 and before then in 2006. Student membership dues were not part of either of those increases and have not been increased in more than ten years.
MHIMA respects its members' and nonmembers' Internet privacy and right to choose which communications they want to receive. If you prefer not to receive MHIMA e-mails, please go here to unsubscribe. You will need your AHIMA ID and password. If you don't know your password you can use your e-mail address of record and it will be sent to you.

MHIMA tried to be mindful of the hard financial times over the last few years and held off on increasing dues during the recession.

This increase allows AHIMA to keep up with the increased cost of providing high levels of service to members and maintain the solid financial footing essential for strategic growth. The increase will help to cover the increasing costs of member benefits and services including some of our newly launched or redesigned member benefits. Those include the HIM Body of Knowledge (BoK), Engage Online Communities, AHIMA.org, AHIMA Mentor Program, Career Prep Webinars, to name a few.

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Scott MacKenzie
Sr. Director, Member Engagement & Strategy  AHIMA

Health Information Management Emerging Issues: Health Information Exchange (HIE)

By Laura Blabac, MA, RHIA

Note: The eHIM Committee, originally established to conduct research, communication and projects related to electronic health information management and the electronic health record has developed into a broader key focus area that will now be inclusive of multiple challenges and opportunities in health information management and health information technology. Look for articles, future communication and/or webinars about the key issues faced by health information management professionals today. If you are interested in volunteering for this key focus area, please visit http://mnhima.org/volunteer/volunteer1.html, and let us know you are interested, or email Laura Blabac.

Exchanging conversation while at a home closing recently, the topic of discussion turned to jobs and I was asked what I do. Explaining my role and profession as simply as I could (thank goodness for the MHIMA elevator statement), the topic of health information technology sparked a sense of frustration on the part of our snowbird buyers. "They ask us questions we can't always remember the answers to," and "when we're away and need help, it shouldn't be so hard to get the information." No, it shouldn't.

Health information exchanges (HIEs) have been discussed for several years, going as far back as the early 1990's with the concept of "Community Health Information
as a job seeker. E-blasts of job announcements are available for purchase and reach a targeted audience of MHIMA members who receive emails.

Click [here](#) to visit the MHIMA Job Bank.

**Stay Up-to-Date with MN e-Health**

If you aren’t receiving the weekly electronic MN e-Health Update newsletter, consider signing up for it. This publication, from the MN Department of Health, keeps you current with issues related to e-health, including HIT/TECH, Meaningful Use, Privacy & Security and others. You’ll also find links to e-Health resources available for your use. To subscribe, click [here](#).

**MHIMA Promotional Items**

MHIMA has a limited supply of drink cups and travel mugs for sale. The cost is $11.00 each, including sales tax.

Networks”(CHIN’s). A health information exchange is “exactly what it sounds like” - the ability to exchange health information, specifically electronically. HIE's are envisioned as a key element in the improvement of both personal and population patient care. Their benefits, such as immediate clinical information access, enhanced care coordination and faster identification of health threats are anticipated to result in better-informed care decisions, fewer medical errors, improved patient safety and all with greater privacy and security than paper records. It's a truly exciting prospect, if a tall order.

A recent HIMSS report Early CHINs and HIE Organizations: Lessons for the Next Evolution (2013) shows that the earliest HIE's experienced failures largely due to long-term sustainable funding issues, essentially primitive technological capabilities, stakeholder buy-in challenges and legal issues (p. 8-10). Today, HIE remains an "emerging" issue due to many of the same problems. Additionally, another key issue, as *Healthcare Informatics* Editor-in-Chief Mark Hagland shares, "the lack of highly granular data-exchange standards" and "a large gap between policy-level and EHR-level adoption of standards across the U.S. healthcare industry"(2013, August 30). In other words, the standardization that is happening at national policy level (which we see in initiatives such as Meaningful Use, accountable care organizations and the patient-centered medical home) has not trickled down to the everyday EHR-use level - a reality that health information management professionals have been familiar with for some time and experience acutely as the requirement for interoperability rises and healthcare organizations steamroll toward Meaningful Use Stage 2 attestation.

Tasked with the maintenance and care of health information, HIM professionals are in a unique position to apply long-standing principles of records management within the framework of both data governance and information governance within individual healthcare organizations. HIE-related initiatives (and HIE's themselves) are growing at a rapid pace, and the complement to the standardization at the national level is developing the structures at the ground-level to facilitate that exchange.

**References**

Hagland, M. (2013, August 30). Health information exchange: are we at an
While Your Board of Directors is at Work, We Need You!

*Time Famine and Micro-volunteering*

*By Madonna LeBlanc, MA, RHIA, MHIMA Delegate*

I’ll start with the plea: we need you. It’s that simple.

I learned two new words/phrases at the Leadership and Advocacy Symposium this summer and instantly identified with both: time famine and micro-volunteering. Time famine is a recognized association trend and micro-volunteering is a potential viable answer. There are never enough hours in the day and many times the desire to be involved professionally is present but the time seems absent.

What if you could contribute your expertise in more manageable segments? For example, let’s take the MHIMA Legal Reference Manual; what if, instead of saying no to the idea of enlisting for the committee, you could jump on board for the chapter of your choice and still contribute on a meaningful and impactful level? If there’s any of the key focus areas that are of interest, stop by [http://www.mnhima.org/volunteer/volunteer1.html](http://www.mnhima.org/volunteer/volunteer1.html) and let us know how you can help us help you help us in a way that doesn’t leave you time famished.

*Environmental Scanning – Trends*

The MHIMA board of directors (BOD) attended the Leadership and Advocacy Symposium in Chicago July 2013 and met as part of the House of Delegates (HOD) at the 2013 AHIMA Convention and Exhibit in Atlanta the end of October. One of the charges of the HOD in regards to collaborative strategic envisioning is to be responsible for trend reporting, prioritization, validation, advocacy and communications. In other words, take the pulse of the profession, triage the issues
and share that word with the constituency, all the while looking for solutions.

AHIMA bi-annually uses a variety of data collection resources to capture information from the active membership to take a pulse of the climate of the profession. The process is called environmental scanning and the intent is to stay current with what areas and issue-specific trends are impacting the industry. The overall categories that surfaced are as follows:

- **Business/Economic Climate**: no change; organizations faced with reimbursement changes, budget constraints and having to do more with less are still cited as top concerns for members.
- **Demographic**: while aging of the population and member involvement are still top trends, diversity of members did not make the top five trends for this report.
- **Legislation regulation**: IDC-10 implementation, Meaningful Use requirements and need for standardization fell of the top three and were replaced with ACO changes, big data, and longitudinal coordination of care, e-discovery and healthcare reform.
- **Political Social Value**: the importance to actively involve/engage members, attract new professionals, CSA member participation and concerns with HIM competition ruled over consistency to organizational values this time around.
- **Technology Science**: not much change in this category; EHR, CAC, and Privacy and Security are still top issues and concerns for the profession.
- **Other Key Trends**: no change; issues relating to education, training of staff and elevating requirements within the profession are still top issues and concerns for the profession. ("Environmental scan," 2013)

The environmental scans are routinely shared with the elected members of the HOD to keep us apprised of the direction of the hot topics as they surface and give the MHIMA BOD chance to consider how it compares to what our own Component State Association is experiencing. While this is simply a “short list” of the issues at hand, the goal of the MHIMA BOD is to prudently and tenaciously observe and adjust our collective course and energies accordingly. We’ll keep you posted!

Reference:

*Environmental scan.* (2013). Ahima leadership and advocacy symposium, Chicago, IL.
2014 MHIMA Distinguished Member

The MHIMA Nominating Committee, chaired by Ranelle Bauer, Past President, is seeking your recommendation for an individual deserving of being recognized as MHIMA's 2014 Distinguished Member. This is a way to recognize excellence within our professional association.

The 2014 Distinguished Member will be celebrated on May 1, 2014, at our annual meeting at the DoubleTree by Hilton-Bloomington, Minneapolis South.

Eligibility for Nomination: Candidates must have been an active member of MHIMA for five (5) years or longer and whose record of contributions to our field is truly exceptional. Qualified nominees must be MHIMA members at the time of nomination, and have made an outstanding contribution to our profession in one or more of the following leadership areas:

- Volunteer service to our association, as an officer, director, committee chair or member, project or task force chair or member, CoP facilitator, or representative of the HIM field at governmental or state healthcare associations
- Outstanding achievement in professional practice through leadership in a specialty area or innovative approaches to methods improvement
- Leadership in education through regular presentations at HIM conferences or other educational events, respected instructor in academic HIM programs, or development of teaching strategies
- Contributions in research or published materials such as authorship, editing, or service on editorial boards for journals, books and other publications that advance the HIM profession

Submit names of nominees no later than February 15, 2014 to Ranelle Bauer.
Call for Nominations for Board of Directors

The MHIMA Nominating Committee is seeking names of individuals interested in having their names placed on the ballot for our MHIMA 2014 election. Positions open are:

- President-Elect (3 year term)
- Secretary (1 year term)
- (1) Delegate Director (2 year term)
- (2) Audit Committee Members

Nominees for President-Elect must be active MHIMA members with an AHIMA-approved credential, have been a MHIMA board member within the last five years, a MHIMA committee chair within the last three years, or active in an AHIMA volunteer role within the last three years. This is a significant leadership position, expected to provide 80+ volunteer hours per year. Serves as a MHIMA delegate to the AHIMA House of Delegates (HOD). Attends AHIMAi’s leadership and team talks events. As President, has responsibilities on a weekly basis, including chairing the bi-monthly MHIMA Board meetings, leading the annual MHIMA strategy planning meeting, presiding at the MHIMA annual business meeting, as is the chief delegate to the AHIMA HOD. Some travel is required, both in-state and to AHIMA events. As Past-President, chairs the MHIMA Nominating Committee and serves as the KFA for Advocacy and Collaboration.

Delegate Director nominees must be active MHIMA members with an AHIMA-approved credential, have been a MHIMA committee chair, held another elected office, or have been a regional officer within the last three years. These positions are expected to provide 80+ volunteer hours per year. Delegate Directors chair the MHIMA Bylaws Committee, Scholarship Committee, and provide liaison to the
regional associations. They serve as MHIMA delegates to the AHIMA HOD and attend AHIMA's leadership and team talks events. Some travel is required, both in-state and to AHIMA events.

Secretary nominees must be active MHIMA members with an AHIMA-approved credential. This position is expected to provide 15-40 volunteer hours per year. The Secretary attends all Board, planning and annual business meetings, takes minutes, and participates in all Board decision making. Some travel may be required in-state to Board and planning meetings.

Audit Committee nominees must be active MHIMA members with an AHIMA-approved credential. These positions are expected to provide 3-15 volunteer hours per year. The Audit Committee works with the MHIMA Board to determine the frequency of external vs. internal auditing of MHIMA's financial records. For external audits, acts as liaison with MHIMA's accounting firm, facilitating the external audit process. For internal audits, perform the independent audit process following the MHIMA Policy & Procedure guidelines (reviewing the financial records, bank statements, and supporting documentation for the reporting period.) Minimal travel may be required.

The election occurs in March and the elected positions take office on July 1, 2014. If you are interested, or want to recommend someone for consideration, please contact Ranelle Bauer no later than January 26, 2014.

Regional ICD-10 and RAC Symposium to be held February 27-28, 2014 in Omaha, Nebraska

The associations of Healthcare Financial Management (HFMA), American Health Information Management (AHIMA), and American Association of Healthcare Administrative Management (AAHAM) are partnering with 4 states (Minnesota, South Dakota, Iowa, and Nebraska) to host a conference February 27th-28th in Omaha, Nebraska. The conference topics will represent areas of focus in RAC and other audits, along with ICD-10. MHIMA members are invited to attend this event.
Watch for more details to be e-blasted to members and included in the January Uplink.

Click here for the Save the Date Notice.

Order Your Subscription to the 2013 Electronic Legal Reference Manual!

The 2013 electronic MHIMA Legal Reference Manual is now available for purchase. There are many changes with the 2013 revision, most notable the format. The manual will no longer be purchasable on CD. Instead we are going-live with an electronic subscription. There are also a variety of content changes including the consolidation of information as well as the addition of new information including:

- Chapters 1: Health Care Records and 2: Retention have been consolidated and are together Chapter 1: Legal Health Record.
- The section titled ARRA is now Chapter 2 with added information about the HITECH Act.
- Chapter 4: Legal Proceedings has new information regarding criminal proceedings.
- Chapter 5: Disclosure/Release of Information and Patient Access has new information on Third Party Record Reviewers, Government Audits, DMEPOS, and Genetic Information.
- Chapter 9: Home Care and Hospice Records has updated information throughout the chapter.
- Chapter 12: HIPAA rearranged and added information to better reflect 45 CFR 164.
- Updated Disclosure and Tracking Matrix, Websites/Links and Mergers and Acquisitions addendums.
There is a new webpage for the Legal Reference Manual on MHIMA's website. From the main page click the Legal Manual button in the left column. There is a list of pricing options and frequently asked questions for your convenience, as well as the link for ordering the manual. Here is the link:


2014 MHIMA Scholarship Forms Available Now!

MHIMA is pleased to once again remind our eligible students of our 2014 MHIMA Scholarship. This scholarship is based on merit and not on financial need.

Who is eligible to apply for a scholarship? A Minnesota resident, or an AHIMA member with Minnesota designated as their state, who is enrolled in an in-state or out-of-state HIM program. Applicants must have completed 50% of one of the following:

· Accredited health information technology or health information management program
· Graduate program related to HIM in a college or university accredited by a nationally recognized accrediting agency
· Coding certificate program
· AHIMA coding basics interactive campus program

All applicants must have a cumulative GPA of 3.0 (out of 4.0), and must be a member of AHIMA.

The application process includes:
· Completing the MHIMA Scholarship application document
· Providing a letter of recommendation from a faculty advisor, faculty member or mentor
· Providing verification from your Program Director that you are in your last year and are expected to graduate
· Providing a written essay of between 300-700 words under the title: “How I Will Use This Degree to Advance the HIM Profession”
· Providing an official school grade transcript that indicates your cumulative GPA

You can find links to all of the scholarship application documents from our website Scholarship page:  http://www.mnhima.org/aboutus/aboutus8.html. Program Directors from all of our Minnesota HIT/HIM programs have received information about our Scholarship program as well.

The exact amounts of the scholarship awards depend on yearly contributions to our MHIMA Scholarship Fund; however, past awards have been between $500 and $1500.

Scholarship winners will be announced in April 2013, and the scholarships will be recognized at our MHIMA Annual Meeting on May 1, 2014, at the DoubleTree by Hilton Bloomington Hotel, Minneapolis, Minnesota. The person being awarded the scholarship will be eligible to attend our Annual Meeting on Thursday, May 1, 2014, at no cost. (MHIMA will not reimburse for any associated expenses to attend the meeting, such as hotel, meals, or travel.) The actual scholarship checks will be forwarded to the winners from the AHIMA Foundation, which holds our MHIMA Student Merit Scholarship Fund dollars. Winning essays will be published in the June issue of MHIMA’s electronic newsletter, Uplink.

All application materials must be received on or before February 28, 2014. No applications will be considered after this date.

If you are eligible to apply for a scholarship, we encourage you to consider this opportunity.
Best regards,

Sue Powell, RHIA
2014 MHIMA Scholarship Program Chairperson

Back to Top

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MHIMA Is on Facebook!

Please check out the new MHIMA page on Facebook! To find the MHIMA page, search for MN Health Information Management. Click “Like” to start receiving our MHIMA page updates!

We are looking to use this tool as another way to communicate to our members. So far, the following items have been added to the page:

- Calendar of Events
- Notes/Member Spotlights
- Pictures
- Uplink Article Reminders

The Marketing & Communications Committee is continuously adding new information to the page and we are always looking for ideas. If you have any suggestions regarding the Facebook page, please email marketing-communications@mnhima.org or send us a message using Facebook!

Sincerely,

Amanda Maas, RHIA, CHPS
Marketing & Communications Committee Co-Chair

Back to Top

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AHIMA Releases ROI Toolkit
AHIMA recently released the 2013 ROI Toolkit: A Practical Guide for the Access, Use, and Disclosure of Protected Health Information.

This invaluable guide will assist HIM professionals in all health care settings. To access the guide, click the link below. You will need your AHIMA User ID and Password to access the guide.

http://library.ahima.org/xpedio/groups/secure/documents/ahima/bok1_050184.pdf

Updated Maximum Charges for Patient Records - 2013

The Minnesota Department of Health has published the Maximum Charges for Patient Records February 2013, confirming the annual determination of maximum charges for patient records. When section 144.292 of the Minnesota Statutes applies, the maximum charges for 2013 are $1.30 per page for copy charges and $17.21 for retrieval fees. Pursuant to statute, these limits do not apply to x-rays. The provider may charge a patient no more than the actual cost of reproducing x-rays, plus no more than $10 for the time spent retrieving and copying the x-rays.

You can obtain a copy of the February 2013 document by clicking here.

Advertisement