Welcome to October 2010 Uplink

Welcome to the October 2010 issue of our MHIMA member and corporate partner e-newsletter, Uplink.

Remember, we are always looking for authors of articles of interest to our broad MHIMA membership: about 500 words, worth two (2) CE credits for your original work. Contact MHIMA Executive Director.

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

If you would like to unsubscribe to our newsletter, please contact Executive Director.

MHIMA Vision & Mission
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.

President's Message
Sue Jensen, RHIT MHIMA President

Another month has flown by and boy was it a wild ride! Not as wild as the Aerosmith roller coaster ride in Orlando at the President's Hollywood Premiere, but that's another story.

First and foremost I would like to say, “Congratulations, Danika and Diane!!”

Danika received the AHIMA’s Rising Star Award. This award is given to individuals who have shown tremendous growth and potential since graduation. Danika was nominated for this award for her outstanding work she has performed and continues to perform as a Co-chair of the Annual Meeting Committee, as an HIM Supervisor for Allina and as an educator for Rasmussen College. This is the second year that an MHIMA member has won this award. We are very proud of Danika and know that she will continue to be an inspiration to all of us.

Then, Diane Larson was elected to the 2011 AHIMA Nominating Committee. Diane's nomination was approved by the MHIMA Board and this summer during HOD action, she was elected to the 2011 AHIMA Nominating Committee. As a Past President of MHIMA and an active, involved MHIMA member, Diane, with her friendly attitude and quick wit, has many friends and acquaintances in the HIM field. Be on the look out as you never know when she will call, wondering if you or someone you know would be interested in running for a position on the 2012 AHIMA Board.
During the month of September, Myrna and I visited the Holiday Inn in St. Cloud in response to a Request for Proposal regarding the possibility of holding our 2014 Annual Meeting in St. Cloud. Although it was determined they could not accommodate our needs, please note that we continue to look at potential sites in outstate MN as well as the metro area for this possibility. If you have suggestions for locations for future meetings, please contact Myrna.

The MHIMA Board meeting was held on September 17th at the Allina Commons. Our budget was approved, and discussions were held regarding many items, including the upcoming AHIMA House of Delegates and national meeting, upcoming webinars to be offered by MHIMA, legal manual updates, and MHIMA Annual meeting updates.

While in Orlando, FL, prior to attending the AHIMA Annual convention, Steph Luthi-Terry and I attended Advocacy training. The following day, all five delegates spent the day attending meetings with our House of Delegate Teams and discussing the Action Items that would be voted on within the House. If you haven’t reviewed the information, there were two primary items that were voted on within the House. They were:

#1. A Bylaw Amendment to change the AHIMA name to AHIIMA. This action item was brought forward to request changing AHIMA (American Health Information Management Association) to AHIIMA (American Health Informatics and Information Management Association). This motion was defeated. The name will not change.

#2. House of Delegates Apportionment and Composition. This action item was brought forward to request changing the size of the House of Delegates from the current model with the number of delegates based on population of HIM professionals in the state to all states having two representatives (known as the Senate model). This item was amended to the “thirds” model with states broken down into three sections (Small, Medium, and Large). The amendment to change the action item to the thirds model did pass the House, but the final action item was defeated. The current House apportionment formula will stay the same.

If you would like to review additional information, please log onto the HOD State Leaders COP. This is a public COP and all members are welcome to join.

I would like to remind everyone to check out the Calendar on the MHIMA website regarding upcoming regional meetings. Already this month, one has been held and there are four others scheduled within the State and two next month. This is a great achievement with all Regions having meetings this Fall. YEAH!!
Gina, Sue, Janelle, Danika and Cindy at 2010 HOD

In addition, the MHIMA Nominating Committee will soon be meeting as they start building the ballot for next year. We have several positions to fill. If you are interested in running for a position or know someone who may be, please contact Steph Luthi-Terry.

Finally, the rollercoaster. You crawl into the seat with anxious anticipation of what is to come. Your harness comes down, locking you into the seat and you cannot move. With the speed of light you shoot up a hill, your head thrown back against the seat, winding through dark tunnels with sharp, twisting turns, turning upside down, never knowing which way you will be going next, until you immerse into light, the brakes stop you, the harness goes up and you are free to go. You are exhilarated, it was scary, yet exciting, but disappointing as it was way too short. Let’s do it again!

In many ways, that ride resembles many of our careers in HIM, especially at this transformational time in health care. Let’s not be afraid of what lies ahead.

Have a safe and Happy Halloween!

MHIMA members, along with Chrisann Lemery, AHIMA Board member from WI, captured for one of the convention "AHIMA Today" issues!

MHIMA Offering ICD-10 Certified Trainer Opportunity
The MHIMA Board has approved funding for an active member of MHIMA to be reimbursed the $1995 registration fee for the "AHIMA Academy for ICD-10 Building Expert Trainers in Diagnosis and Procedure." This funding does not include expenses for travel, hotel or meals to attend the training.

This training is designed to help coding professionals become proficient in coding with ICD-10-CM/PCS coding systems while preparing them to train other coding professionals in these systems. The training involves completion of two on-line courses, which must be completed prior to attending three days of face-to-face training. Applicants must have three years of direct experience in assigning ICD-9-CM codes and at least one year of training experience or two semesters of teaching experience in an academic setting.

This training must be completed no later than March 31, 2011. Completion of the Academy program allows the applicant to complete the assessment to receive AHIMA's Trainer Certificate, which will be required before reimbursement of the registration fee by MHIMA.

The person selected for this funding will be expected to provide 15 hours of training opportunities for MHIMA members during 2011-2012. These include ICD-10 webinars, ICD-10 education at Regional meetings and ICD-10 education at the 2011 and 2012 MHIMA Annual Meetings.

To be considered for this training opportunity for MHIMA, please contact Gina Sanvik, or phone Gina at 651-336-7117.

Regional Fall Meetings Continue

All of the MHIMA regions have held or have scheduled Fall meetings. These meetings are open to any MHIMA members living anywhere in Minnesota. For more information, visit the MHIMA website Calendar.

- October 14: Region C (West Central/Alexandria)
- October 21: Region A (Northwest)
- October 22: Region E (Southwest)
- October 27: Region F (Southeast/Rochester)
- November 18: Region B (Northeast/Duluth)
- November 19: Region G (Metro)

Region D (East Central/St Cloud) held its Fall meeting on October 2nd.

MHIMA's Lunch & Learn Webinars

MHIMA's Lunch & Learn Webinar series is underway for 2010-2011. All webinars will be recorded and available for purchase if you cannot attend the live event. Visit the MHIMA website and click on the HIM Education button/Online Learning for complete details.
The first two webinars available for purchase today are:

- **Overview of new HIPAA, CMS and MN Transactions** on Thursday, October 28, 2010. Presented by Patrice Kuppe, CPHIT.  
  Registration closes October 22, 2010.
  Registration closes November 12, 2010.

Additional webinars currently being planned:
- I-10: a series of webinars in the coming months
- December: Medical Necessity
- January: RACs
- February: Clinical Documentation Improvement
- February: REACH
March: HITECH

All webinars are $59 per connection for MHIMA/AHIMA members, and worth one (1) CE for everyone participating at one site connection.

Attracting Students! Need Volunteers!
Chris Bushaw and Joy Schmitt

One of our strategic goals for 2010-2011 is to attract more students into the health information management field. According to the Bureau of Labor Statistics, employment of health information management professionals is expected to grow much faster than the average (increase of 27% or higher) for all occupations through 2014.

MHIMA needs to reach out to potential students, as health information careers still remain unfamiliar to many. One way to do this is to educate high school students about the different careers that can be pursued by becoming health information management professionals.

We are looking for volunteers who would be willing to contact and speak at local high schools in your Region. We hope to have MHIMA members from each Region commit to reaching out to two high schools regarding health information careers. MHIMA will assist you by providing a tool kit, including a sample contact letter for high school guidance counselors, brochures and, in the event of the opportunity to speak at a high school in your area, a table skirt, a PowerPoint presentation and a list of Minnesota’s accredited schools.

If you are interested in participating and representing our profession to students, please contact Chris Bushaw (phone 507-285-7237) or Joy Schmitt (phone 703-709-2357) and provide your name, the Region you are in, and a method to contact you.

Meaningful Use of EHRs
Catherine French, CCS-P

The EHR has several advantages over paper health records. One definite advantage is the fact that the EHR is accessible from remote sites to many people at the same time and retrieval of the information is almost immediate. The record is continuously updated and information is immediately accessible.

Today, EHRs are common in most healthcare settings; however, many still cannot seamlessly share data with other healthcare providers. And there are many physicians, mostly in mid and small sized practices, that are not yet using an electronic record. There are numerous reasons for the lack of implementation or data sharing, with the most commonly cited barriers being inadequate capital for purchase.
or upgrades, concerns about maintenance costs, resistance on the part of physicians, and lack of staff with adequate expertise in information technology.

While there has been bipartisan support of the adoption of EHRs for over half a decade, recent healthcare reform efforts have placed additional emphasis on the need for EHRs as a way to provide a more efficient exchange of health information. Last year, Congress and the Obama administration provided the health care community with a transformational opportunity to break through the barriers to progress. The Health Information Technology for Economic and Clinical Health Act (HITECH) authorized incentive payments through Medicare and Medicaid to clinicians and hospitals when they use EHRs privately and securely to achieve specified improvements in care delivery.

HITECH’s goal is not adoption alone but “meaningful use” of EHRs — that is, their use by providers to achieve significant improvements in care. The legislation ties payments specifically to the achievement of advances in health care processes and outcomes. The HITECH legislation further requires that meaningful use include electronic reporting of data on the quality of care.

Incentive funds will be available through two programs—Medicare and Medicaid. Each has its own set of eligibility criteria, requirements, and incentive amounts. These voluntary incentive programs are designed to support providers during a Health IT transition period and instill the use of EHRs in meaningful ways to help our nation to improve the quality, safety and efficiency of patient health care.

Eligible professionals must choose to accept payments under either the Medicare or Medicaid programs and cannot receive payments from both. For the Medicare incentives, eligible physicians in ambulatory practices that use a qualified electronic health records are eligible for up to $44K or more per physician over a five year period.

As it is currently designed, the Federal incentive program will be introduced to the healthcare community in two phases, with a timeline that extends over the next five years. In Phase One, physicians have to meet 15 functionality core objectives and choose an additional five objectives from a menu of 10 options. Some of the requirements are fairly simple and some may requires significant investments in time and training to implement, including evaluation of EHR system components, system encryption and authorized access management. The New England Journal of Medicine has a great explanation of the phase one functionality objectives: http://healthpolicyandreform.nejm.org/?attachment_id=3742

To improve the quality and efficiency of care for the Medicare and Medicaid populations, providers will be also required to capture and report clinical quality measures. Physicians must report on three core clinical quality measures as well as three additional quality measures that they may choose from a list of 38.

To demonstrate “meaningful use” in calendar year 2011, the Medicare incentive program will accept provider attestations for demonstration of all the meaningful use measures, including clinical quality measures. Starting in 2012, the Medicare incentive program will continue attestation for most of the meaningful use objectives but plans to initiate the electronic submission of clinical quality measures.

For the Medicaid program, attestation will initially be used and then subsequent electronic submission of clinical quality measures will become mandatory to demonstrate meaningful use.
Implementation of meaningful use criteria will be challenging for everyone, but the time has come to ensure the technology advances that other sectors of our economy undertook years ago become commonplace in healthcare. By linking higher payment to use of EHRs to meet quality measures, it's expected that the adoption of health information technology at the community level will become widespread in the next five years.

A CMS/ONC fact sheet on the rules is available at http://www.cms.gov/EHRIncentivePrograms/

Technical fact sheets on CMS’s final rule are available at http://www.cms.gov/EHRIncentivePrograms/

A technical fact sheet on ONC’s standards and certification criteria final rule is available at http://healthit.hhs.gov/standardsandcertification.

editor's note: MHIMA will host a webinar on November 18th titled: "Meaningful Use: What's in it for HIM". Register Securely Online by Friday, November 12, 2010.

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**ONC’s Certified Health IT Product List**

The Office of the National Coordinator for Health Information Technology (ONC) has published the Certified Health IT Product List (CHPL), a comprehensive listing of Complete EHRs and EHR Modules that have been tested and certified under the Temporary Certification Program.

Each Complete EHR and EHR Module included in the CHPL has been tested and certified by an ONC-Authorized Testing and Certification Body (ATCB), and reported to ONC by an ONC-ATCB, with reports validated by ONC.

Only those EHR technologies appearing on the ONC-CHPL may be granted the reporting number that will be accepted by CMS for purposes of attestation under the EHR Incentive Programs. The listing will be updated as additional products are certified by ONC-ATCBs and reported to ONC for validation. For more information, please visit http://healthit.hhs.gov/CHPL.

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**RSS - What is it? Do I want it?**

Laura Blabac, RHIT

RSS: Bringing Information to You

As the pace of life grows more hectic for the HIM professional, getting out and getting the latest information on HIM topics and news seems like an overwhelming, if not impossible task. Stopping to surf the AHIMA or MHIMA website for the latest and greatest events, news and pertinent information is not a luxury that can be afforded often, and yet information is needed more than ever. How is a busy HIM professional to keep up?
Enter RSS Feed technology. RSS, short for Real Simple Syndication is a type of server "push technology" which provides the ability for users who subscribe to a particular information "feed" to receive notification or updates when a site is updated or new information added. You may recognize the above "feed icon" from many sites that show the availability of the technology on their sites. Information usually comes in textual formats, but many sites are using audio and video (e.g. podcast-style) as well.

Getting started is simple. First you will need to select a feed reader; there are thousands of feed readers available. Many (such as Google Reader or Feed Reader) are free, others (such as iTunes or Awasu) are proprietary and must be purchased. There are also readers that work exclusively on mobile devices, such as iPhone, Blackberry and many others, usually downloadable through the device homepage. Even email can also be selected as a feed reader for many sites.

Once your reader of choice is downloaded to your location of choice, the world of information is at your fingertips, all without having to surf. To subscribe to an RSS feed, click on the universal feed icon (or other icon that indicates RSS or XML) at your favorite site and indicate the reader you wish the news or alerts to be pushed to, refresh your reader, and push technology goes to work for you, listing the latest updates from the sites you visit or want information from. Typically, most feeds provide a title and brief summary sentence: the option to proceed to the site to read more rests with you.

Bottom line: RSS feeds make it possible for you to be aware of information as it is updated and pushed out by your favorite sites, and to review a large amount of online content in a very short time. In a profession where information is valued and sometimes critical, having it delivered to you makes keeping up a less daunting task.

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Call for Nominations for MHIMA 2011 Election

The MHIMA Nominating Committee, chaired by Steph Luthi-Terry, Past President, is seeking nominations for the MHIMA election ballot for the following positions.

- **President-Elect:** This is a three year-commitment, and the nominee must 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.
- **Delegate Director:** This is a two-year commitment, and the nominee must have been a MHIMA committee chair, held another elected office, or have been a Regional officer within the last three years.
- **Treasurer:** This is a two-year commitment.
- **Secretary:** This is a one-year commitment.

All nominees must be active MHIMA members with an AHIMA-approved credential. The election occurs in March of 2011, and the elected positions begin on July 1, 2011.

If you are interested, or if you want to recommend someone for consideration, please contact [Steph Luthi-Terry](mailto:Steph.Luthi-Terry@mhima.org).

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MHIMA Scholarship Fund Moves to AHIMA Foundation
Want to support our HIM students in their professional education? Want to obtain a tax-deductible contribution for your financial support? You can now do both! The MHIMA Board of Directors has approved an agreement with the AHIMA Foundation to move our Scholarship Fund dollars to a designated fund within the AHIMA Foundation. This fund will be known as the MN Student Merit Scholarships, and beginning immediately, all contributions to the AHIMA Foundation that are specifically designated to the MN Student Merit Scholarships will be added to our scholarship fund. Unlike MHIMA, the AHIMA Foundation is a 501(c)(3) charitable organization; thus, all contributions made to the AHIMA Foundation are considered tax-deductible.

Through this new agreement, the AHIMA Foundation will administer our designated fund dollars on behalf of MHIMA. MHIMA will continue to determine the MHIMA scholarship selection criteria, solicit and review the applications, and determine the scholarship winners. The AHIMA Foundation will issue the scholarship award checks from our MN Student Merit Scholarships fund held at the Foundation.

MHIMA is very excited to offer this opportunity to everyone who is supportive of our MHIMA Scholarship program. For more information on how to make a contribution, contact Myrna Wells-Ulland.

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**Keep your AHIMA Profile Current**

When is the last time you reviewed the information in your AHIMA profile? Have you changed positions? Have a new email address? Have you recently moved? These are just a few of the data elements in your AHIMA profile, and MHIMA uses this information on a regular basis.

Take a minute or two right now, visit the AHIMA Website, log in with your 7-digit AHIMA member number and your last name (capitalize the first letter!), and click on "My Profile/Dues Renewal." Review all of the four sections and update the information as appropriate.

In the section for My Communication Preferences, may we ask that you check "YES" under the CSA Selection box for emails and postal mail? CSA stands for "component state association" and it means the state that you want to be associated with as an AHIMA member. MHIMA uses email and occasionally land mail as our primary means of communication, and if you check "NO" in the email or postal mail boxes, you won't receive either type of communication from us. Thank you!

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**MHIMA Legal Resource Manual**

The 2009 Legal Resource Manual remains available for purchase! This Manual is a complete update of the 2007 version and includes the laws and rules that address the majority of issues that may arise with respect to health information practice. There are many new updates in every chapter. As one member states, "This is truly a valuable resource for anyone that works with health care." It's a compilation of best practices and experience of HIM professionals and the facilities they represent in Minnesota, and it's had extensive legal
review.

**There will not be another update to the Legal Manual until 2011.**

All HIM Departments should have this Manual in their office for ready reference. It’s available on CD only and can be purchased from the [MHIMA Store button](#) on the MHIMA website.

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**MHIMA Job Bank**

Are you seeking a job? Are you an employer looking for a potential employee? Is your facility looking for someone with a skill set of MHIMA members? Be sure to check out the MHIMA Job Bank Network on our website, which continues to be very popular and new positions are being posted on a regular basis. Here, you’ll find information about registering as a "Job Seeker" or as an "Employer". New positions are posted frequently, so check us out often!

**Job Seekers:** There is no fee to register.

**Employers:** Job posting fees are very reasonable and reach all of our MHIMA membership. E-blasts of job announcements are also available for purchase.

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

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**MHIMA Coding & Data Quality Roundtable Tool Kits**

The MHIMA Coding & Data Quality Committee’s newest PowerPoint presentation, including case study questions, is **"Neoplasms - Carcinoid Tumor"**. There is an accompanying case study answer presentation. This is one of several "tool kits" developed for use by MHIMA members to support coding education and discussion in your facilities and at your regional meetings.

Is there a tool kit topic that needs to be developed? Let your needs be known. Contact [Angela Jackson](mailto:) or [Jessica Peterson](mailto:).

The general "Do It Yourself" PowerPoint tool kit gives you the guidelines to set up a coding roundtable.

Additional tool kits on specific topics that have been developed and are available include Interventional Radiology, E&M, Heart Failure, updated Present on Admission (POA) and Aftercare vs Follow Up.

All are available on the [Coding and Data Quality button](#) on the MHIMA website. Watch for additional toolkits as they are developed!

And a reminder about your general coding questions: You are encouraged to use AHIMA’s Coding CoPs for coding related questions. There is a general coding CoP community for coders as well as several for specific coding areas. These CoPs are a great resource for submitting coding questions and participating in the discussion threads surrounding the questions of others. To participate in these CoPs, [Click Here](#).

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**Health Information & Technology Week**
AHIMA and CHIMA have designated November 7-13, 2010 as Health Information & Technology Week. This year’s theme is “Ensuring Health Information Integrity.” It’s not too early to begin planning for how you will recognize your department and your staff in November. A Planning Kit was available in the August 2010 issue of AHIMA Advantage, and resources can also be found on the AHIMA web site.

**Save-the-Date for the 2011 MHIMA Annual Meeting**

Put the dates of April 27-29, 2011 on your calendar now and plan to join hundreds of your fellow MHIMA members at our 2011 Annual Meeting at the Treasure Island hotel and conference center in Red Wing, Minnesota. Your 2011 Annual Meeting planning team is already at work, developing a program that you won’t want to miss. We are in a time of incredible and perhaps even unprecedented change in health care. Save the date!

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