HEALTH INFORMATION MANAGEMENT AND SYSTEMS

SCHOOL OF HEALTH AND REHABILITATION SCIENCES

COLLEGE OF MEDICINE

THE OHIO STATE UNIVERSITY

STUDENT HANDBOOK
2017-2018

Table of Contents

For complete information, the HIMS Handbook is to be read in conjunction with the current School of Health and Rehabilitation Sciences (SHRS) handbook. Please see references to SHRS policy numbers throughout this handbook.

I. Overview of the Profession

The field of health information management (HIM) focuses on the business aspects of healthcare and health-related services with an emphasis on healthcare information. The field of practice assures the availability of healthcare information to facilitate healthcare delivery and decision-making for multiple purposes across diverse healthcare organizations, settings and disciplines. It is concerned with the management of resources, people and systems that support the administration, financing and evaluation of healthcare services. It also supports services related to healthcare research, education, legal issues and public health needs.

The Health Information Management & Systems (HIMS) curriculum blends coursework in health services management, medicine, clinical documentation, healthcare law and information systems. Laboratory and professional practical experiences are integrated throughout the curriculum. The content of the curriculum is dynamic and continually changes as technical, social and political forces impact the healthcare environment.

Opportunities for practice in HIM are found in numerous settings including hospitals, consulting firms, managed care organizations, long term care, physician practices, home health agencies, insurance companies, government agencies, colleges and universities, vendors of health related products and services, and the information technology industry. The job titles assumed by health information administrators vary depending on the individual's place of employment.

As a student, and later as a practicing HIM professional, you will need to be flexible and open to growth and change as it occurs in the program and the profession. Upon successful completion of the curriculum, you should be able to perform the roles and functions for an entry-level health information management professional as described in ***Appendix 1*** of this document.

II. Mission and Goals of Health Information Management and Systems

The mission of Health Information Management and Systems is to create the future of health information management practice through education, innovation, research and service.

The mission is governed by the following strategic goals:

- Provide a curriculum that prepares competent entry-level health information management practitioners for a national marketplace.
- Recruit and retain a high caliber, diverse student body and challenge them toward success.
- Maintain a strong relationship with alumni and other health information management professionals in order to achieve excellence in practical experience opportunities and support the growth and development of the program.
- Provide leadership and service in health information management education, research and service to enhance the growth and development of students as future contributing practitioners.

III. Professional Curriculum

A. HIMS Curriculum

The HIMS curriculum is structured according to a competency-based education approach. Competencies are defined as the underlying knowledge, skills, values and attitudes needed to perform specific professional responsibilities according to predetermined standards. Competencies are further defined in course syllabi by objectives, which are action statements that provide more detail regarding the specific knowledge or skill required of the learner.

Competency statements and objectives along with assignments, performance criteria and standards have been developed for each course offered, where appropriate. A variety of instructional methods are used to facilitate your achievement at an acceptable level of performance for a given competency. If the set level of performance is not met, then you may be asked to repeat the activity. Thus, you will know what is expected of you and what you must master in order to become a competent entry-level practitioner.

The professional curriculum builds on general education and prerequisite coursework and is designed to provide you with knowledge and skills in the following content domains as defined by the ***AHIMA 2014 HIM Baccalaureate Degree Curriculum Competencies*** (See **Appendix 1**):

Domain I: Data Content Structure and Standards
- I.A: Classification Systems
- I.B: Health Record Content and Documentation
- I.C: Data Governance
- I.D: Data Management
- I.E: Secondary Data Sources

Domain II: Information Protection: Access Disclosure Archival Privacy and Security
- II.A: Health Law
- II.B: Data Privacy Confidentiality and Security
- II.C: Release of Information

Domain III: Informatics, Analytics and Data Use
- III.A: Health Information Technologies
- III.B: Information Management Strategic Planning
- III.C: Analytics and Decision Support
- III.D: Health Care Statistics
- III.E: Research Methods
- III.F: Consumer Informatics
- III.G: Health Information Exchange
- III.H: Information Integrity and Data Quality

Domain IV: Revenue Management
- IV.A: Revenue Cycle and Reimbursement

Domain V: Compliance
- V.A: Regulatory
- V.B: Coding
- V.C: Fraud Surveillance
- V.D: Clinical Documentation Improvement

Domain VI: Leadership

- VI.A: Leadership Roles
- VI.B: Change Management
- VI.C: Work Design and Process Improvement
- VI.D: Human Resources Management
- VI.E: Training and Development
- VI.F: Strategic and Organizational Management
- VI.G: Financial Management
- VI.H: Ethics
- VI.I: Project Management
- VI.J: Vendor/Contract Management
- VI.K: Enterprise Information Management

The professional program is accredited by the Commission on Accreditation of Health Informatics and Information Management Education (CAHIIM) based on the ***2012 Standards and Interpretations for Accreditation of Baccalaureate Degree Programs in Health Information Management.*** The ***Standards*** represent the minimum standards for an accredited program. The program's curriculum is designed to meet these minimum standards and goes beyond the standards to ensure that students acquire the knowledge and skills necessary to think critically, solve problems, manage and retrieve information, communicate effectively, and learn continuously. The HIMS program holds full accreditation status, which it has maintained since it graduated its first class in 1972.

The curriculum has been designed to foster not only your ability to assume the roles and functions of an entry-level practitioner as described by the curriculum competencies for baccalaureate degree programs and the certification examination content for Registered Health Record Administrators offered by the Commission on Certification for Health Informatics and Information Management (CCHIIM), (see ***Appendix 1)***, but to fulfill the educational outcomes described in ***Appendix 2***.

The instructional strategies used to support your learning and the attainment of the HIMS educational outcomes include lectures, discussions, case studies, web-based instruction, simulations, writing exercises, oral presentations, and structured laboratory and professional practice experiences in a variety of settings.

B. Course Schedule for 2017-2018

Course schedules, by semester, will be made available by the program director.

C. Annual Statewide Professional Conference (Ohio Health Information Management Association)

You are at the beginning of what will hopefully be a long and successful career in HIMS. A significant component of professional success is continuing education and networking among colleagues. Each spring, the Ohio Health Information Management Association (OHIMA) sponsors a statewide professional conference. Junior students in the HIMS program at The Ohio State University are required to attend this conference. Faculty will inform you which days you are to attend. Students are responsible to pay their own conference registration fees. Please be advised that you should set aside money each week in order to save the amount needed by the first of March.

D. Professional Practice Experiences (PPE)

Professional practice experiences (PPE) are offered throughout the professional curriculum beginning the first year. These experiences may be related to course lab requirements, simulations, observations, and clinical onsite experiences. PPE assignments are the exclusive responsibility of the faculty member for the course in which the PPE is offered. You are responsible for supplying your own travel and other expenses such as parking and food that may be incurred as part of these experiences.

During the spring semester of the senior year, the PPE consists of -- at a minimum -- a six-week, full-time (40-hour week) management PPE. This PPE may be scheduled in a hospital or other health-related organization/company located either in Ohio or out of state. Assignment to the affiliation site is the exclusive right of the faculty member. You are responsible for your own travel, room, board, parking and other expenses incurred as part of the assignment. **Do not assume you will be assigned to an organization in the Franklin County area as such sites are limited. You must be prepared to travel to whatever site you are assigned.** Consideration is given to placing students in geographic regions where they may have family or friends that can provide housing.

Attendance and punctuality at PPE sites are mandatory. Good attendance and punctuality are attributes sought by future employers (and employers often ask about a student's performance in this regard when checking references for employment opportunities). Time missed through absence or tardiness while you are completing a PPE will need to be made up. The make-up time must be scheduled with the site preceptor and/or course instructor. Make-up time may include evenings, nights or weekend activities.

Completion of a PPE is required for graduation from the HIMS program. Students who are unable to complete the PPE requirement during the normal timeframe allotted for the PPE (spring semester of the final year in the program) due to pregnancy, athletic competitions, illness, etc., must complete their PPE during the summer session immediately following spring semester or, if necessary, later in the summer or following autumn depending on the student's schedule and availability of a PPE site. When this situation occurs, the student's graduation will be postponed until the PPE is completed. Completion of the PPE at the end of the curriculum aligns with the intent of the program accreditation standards, which is to provide an experience that reinforces didactic instruction and thus follows all coursework that could potentially be incorporated into the PPE.

E. Suggested Minors and/or Electives

Students interested in enhancing their professional course work should consider completing one of the following minors: General Business, Information Systems, or Public Health. There are many more university-approved minors to choose from if these minors are not of interest. The Office of Undergraduate Student Services provides a complete list of minors.

IV. Advising, Certificate Option, Registration and Scheduling, Expenses and Financial Assistance, Pre-Commencement/ Graduation Recognition

A. Advising

Each student in the program is assigned a faculty advisor. The advisor will assist the student in matters related to the HIMS curriculum, scheduling, etc. Advisors will be available by appointment or by drop-in depending on the advisor's schedule. You are encouraged to communicate with your advisor and keep your advisor informed of any problems that might interfere with your studies. If you have a problem that requires immediate attention and your advisor is unavailable, you may request assistance from another HIMS faculty member. It is important to develop a relationship with your

advisor so no problems arise in your efforts toward graduation. Questions regarding General Education (GE) courses should be directed to a counselor in the school Student Services Office.

B. Post-Baccalaureate Certificate Option

If you have previously earned a baccalaureate degree, you must consult with your advisor at the beginning of the Autumn Semester in which you enroll in the HIMS program to confirm whether you are pursuing a second baccalaureate degree (the default status) or a post-baccalaureate certificate of study in health information management. To earn a certificate, you must complete the prerequisites and the professional curriculum. To earn a second baccalaureate degree, you must complete the program prerequisites, all professional requirements and all **GE requirements**. The decision to pursue either the certificate or second baccalaureate degree should be made prior to your enrollment in the HIMS program. However, if you wish to switch from one status to the other you must inform your advisor immediately so the proper steps can be followed to make the change.

C. Registration

The Registrar's Office will e-mail you to notify you when your registration period begins. The SHRS Office of Student Services handles questions concerning registration and add/drop transactions. Because of the changing nature of the profession and the University's efforts toward streamlining University services, course times and days (in addition to the semester of offering) may change with little notice. The program will provide you with a schedule of courses to enroll in each semester to help with course changes.

D. Scheduling

The majority of the program's required courses are offered during daytime hours. However, some late afternoon and evening courses will be offered, so be prepared to plan accordingly for these. For required courses taken outside the program's control, you may be asked to schedule these courses at a specific time and day as designated by the program. Prior notice will be given if this situation arises.

E. Expenses

You are responsible for certain expenditures that are beyond the stated required university fees for instruction, tuition and housing arrangements. The expenditures include:

- Textbooks, manuals, and course fees.
- Immunization expenses.
- Supplies required to complete course assignments and other course requirements.
- Transportation, food and lodging related to meetings, continuing education programs, field trips and clinical/management PPE assignments.
- Ohio Health Information Management Association conference registration fees.
- Professional association student memberships.
- Background check fees if background checks are not completed by OSUMC security department.

If you do not already own or have access to a personal computer that is capable of supporting Microsoft Windows applications such as word processing, spreadsheets, graphics and database applications, you should purchase one. The majority of class assignments will require use of these software applications. You may be requested to purchase additional supplies, depending on course activities

F. Financial Assistance

Any OSU student may be eligible for aid offered through the University's Student Financial Aid Office. In addition to financial aid offered by the University, students may be eligible for scholarships from the American Health Information Management Association (AHIMA) Foundation and the Ohio Health Information Management Association (OHIMA). For more information regarding these scholarships, as well as other scholarship and award opportunities, see **Appendix 5**.

G. Pre-Commencement

Graduating seniors are highly encouraged to attend the SHRS pre-commencement ceremony the Saturday prior to spring commencement. This event allows each student to be recognized individually as well as providing a final opportunity for the graduating cohort to come together. Details are provided by the SHRS Student Services Office during spring semester prior to graduation.

H. Graduation with Honors and with Distinction

HIMS students may graduate with Latinate honors based on grade point average; with honors in Health and Rehabilitation Sciences based on accumulation of points accrued by taking honors courses and engaging in other honors-related activities; and/or with distinction in Health and Rehabilitation Sciences based on successfully proposing, completing and defending a research thesis or project. Minimum GPAs apply to each of these categories.

V. Program and Professional Standards

A. Academic Requirements

See SHRS Policy 4. HIMS courses are categorized as follows:

Category 1: Required course in which students must achieve a minimum grade of C- or S or better before progressing in program or other sequential courses.

HIMS 3520	HIMS 5545	HTHRHSC 5370
HIMS 3589	HIMS 5620	HTHRHSC 5500
HIMS 4645	HIMS 5635	HTHRHSC 5510
HIMS 4689	HIMS 5650	HTHRHSC 5900
HIMS 5193	HIMS 5654	
HIMS 5535	HIMS 5655	
HIMS 5536	HIMS 5660	
HIMS 5537	HIMS 5890	
HIMS 5540		

Category 2: Required course in which a student must achieve a C- or S or better.

HTHRHSC 2500	Anatomy 2300.04	Economics 2001.01
HIMS 5648	EEOB 2520	Bio or Chem sequence
Math 1148	Statistics 1450	Third science (Bio or Chem)
English 1110	Psychology 1100	
Acct&MIS 2000	Communications 2131	

B. Grading Scale

The grading scale for divisional courses is as follows, unless otherwise specified in the course syllabus:

A 93-100%	B+ 87-89.99%	C+ 77-79.99%	D+ 67-69.99%
A- 90-92.99%	B 83-86.99%	C 73-76.99%	D 60-66.99%
	B- 80-82.99%	C- 70-72.99%	E Below 60%

A grade lower than C- may require the student to retake the course.

C. Performance Criteria

A minimum level of performance for exams, assignments, etc. is specified by each instructor for each professional course. Performance will be evaluated based on the knowledge, skills and/or attitudes displayed through any or all of the following methods:

Examinations
Assignments/projects (papers, case studies, simulations, presentations, etc.)
Class attendance and participation
Instructor discretion

Any or all of the above items will be used to arrive at a composite score/final grade.

See SHRS Policy 3 for overall academic performance/GPA requirements.

D. Evaluation

1. Examinations

The course instructor will set a minimum level of performance on an examination. Failure to achieve the level of performance set for the exam MAY require that an exam or other equivalent evaluation covering the identical content area and objectives be completed. The method of equivalent evaluation and maximum score to be awarded is at the discretion of the instructor of the course, and shall be administered within two weeks following the initial unsatisfactory evaluation. It is the responsibility of the student to schedule an appointment with the instructor to address this situation. If the exam is not rescheduled in the allowed time frame, the instructor reserves the right to refuse a retest. Because cumulative knowledge of materials presented in courses taken during enrollment in the HIMS program is a key to professional success, failure to achieve a C- or better on a final exam MAY result in failure of a course. Failing a course may prevent a student from progressing in a given course or in the program. Examinations are the property of the HIMS program; thus, it is within the instructor's discretion not to allow students to keep copies of exams.

2. Assignments and Projects

The course instructor will set a minimum level of performance on all assignments and/or projects. The expected minimum level for assignments and projects may vary due to the nature of the course. Failure to achieve a stated performance level may necessitate that the assignment and/or project be redone. The due date for the second submission will be at the instructor's discretion.

It is the responsibility of the student to schedule an appointment with the instructor to address situations of this nature. If the assignment and/or project is not rescheduled in the allowed time frame, the instructor reserves the right to refuse to grade any submission. Scores for assignments and/or projects redone after the initial attempt, and a maximum

score determination, will be at the discretion of the instructor of the course. Failure to achieve the specified performance level for each component may prevent the student from progressing in a given course or in the program. All coursework is to be completed on time. Instructors have discretion to reduce the points awarded based on each day the work is late.

All assignments and projects must be typed, unless otherwise indicated by the instructor. All assignments must be neat, clean, and proofed for typographical errors. Proper grammar, punctuation and style are required. Bibliographies and/or references must be reported using the referencing style of the ***Journal of the American Health Information Management Association,*** the online research journal ***Perspectives in Health Information Management****,* or a style specified by the instructor.

E. Professional and Ethical Behaviors

It is extremely important that, in addition to this section, you read the corresponding section of the SHRS Handbook (see SHRS Policy 6). Professional behavior, conduct, competence or interpersonal skills that are judged unsatisfactory either in the classroom or in professional practice settings may lead to program action including warning, probation or disenrollment.

The Health Information Management & Systems (HIMS) program at The Ohio State University is the training ground for your future as a HIMS professional. ***Professionalism*** and attentiveness to ethical behavior are key components of your enrollment. Upon your entry into this program, it is imperative that you begin to think of yourself as a professional. With that role come ***professional responsibilities.***

The healthcare community and the HIMS community, in particular, are small. Individuals are closely connected despite the number of professionals in the field. Individuals are remembered largely by their behaviors. Positive behaviors that you exhibit while enrolled in this program will follow your entry into the workforce and enhance your career prospects as a HIMS professional. Conversely, negative behavior will also be remembered.

Faculty members know and talk to practitioners in the field, who recall excellent student performances and ethical behaviors as well as poor and unethical behaviors when they give references or speak to colleagues about your qualifications as a potential job candidate. Further, your classmates will someday be your professional colleagues; they may professionally benefit you or be a detriment to you based on your present behaviors. It is in your best interest not to damage relationships with faculty members or classmates through discourteous or unethical behavior. Your actions impact your personal reputation today and in the future, as well as the reputation of the program and profession in general.

We, as faculty, emphasize this information because we want you to have a long and very successful career. With this in mind we have highlighted the following key areas of professional behavior and academic integrity that are important to your being a successful student in the program and a successful future HIM professional.

Class Engagement

1. Participation. The exchange of thoughts and ideas is important to analytical learning in the HIMS program. You are expected to interact with your classmates and instructors, and to participate in classroom dialogue.

2. Attendance. Just as regular attendance at your future job is mandatory for success, attendance is required for classes and PPEs in the HIMS program. The courses offered in

the program contain content that directly builds the knowledge and skills needed as a future HIM professionals. Thus, frequent absences will interfere with your ability to become a knowledgeable professional.

Because attendance is so important, the following process must be followed if you must miss a class. Prior to class, send an e-mail message to the instructor indicating why you will be missing class. It is your responsibility to obtain any information (including handouts) that you missed. Field trips or other planned activities that are missed will be rescheduled at the discretion of the instructor, or another activity will be assigned. If you are absent for a scheduled exam, you must arrange to take the exam prior to the next class meeting. Each absence may automatically result in a reduction in your course grade unless the absence is due to a death in the family or severe illness. Chronic absenteeism will result in your disenrollment from the HIMS program.

3. Timeliness. Timeliness is very important to professional success. Thus, coming to classes and PPEs on time is absolutely essential for making a good impression on your instructor and/or the PPE site preceptor. Tardiness, especially if done on a consistent basis, displays a lack of respect not only for your instructor or site preceptor, but for your classmates as well. Instructors reserve the right to deduct points for tardiness. Chronic tardiness may subject you to disenrollment from the HIMS program.

4. Sleeping. Sleeping in class may be considered an absence and result in a reduction of the final grade. Please be present in both body and mind!

5. Other class policies. You are to observe other classroom policies as indicated in course syllabi.

Professional Behaviors

6. Considerate behavior. Good interpersonal skills are vital for professional success. It is expected that you will demonstrate courteous behavior toward your instructors, classmates and PPE site preceptors. You must be respectful of the thoughts and opinions others even though you might disagree. Behaviors such as carrying on conversations, laughing, or engaging in other activities (including texting, Facebooking, instant messaging, surfing the Internet, etc.) while the instructor or a classmate is speaking are distracting and disrespectful. They are inappropriate in the classroom and PPE settings.

7. Professional Apparel and Appearance. See SHRS Policy 10. Appropriate dress is required for all PPEs, field trips and class presentations. Business casual is generally a safe option, but it is always good to ask beforehand! The Ohio State University Medical Center has requested that students not wear shorts, or other scanty clothing during class sessions in any area of the Medical Center. Inappropriate attire also includes, but is not limited to, spaghetti straps; midriff-baring clothing; flip-flops; low-cut tops, pants, or dresses; and short skirts. As a general rule, you should ask yourself whether your attire may cause raised eyebrows or negative comments by others. If there is any chance that it will, it is inappropriate.

Professional Work Products

8. Submission of materials. Your work is a reflection of you. Therefore, it is extremely important to present your work, both electronic and paper, in an organized and timely manner. Unless specified otherwise, all paper assignments must be typed and stapled or clipped together when submitted. The instructor reserves the right to deduct points for materials submitted inappropriately, not in a timely manner, or not in the format or manner stated.

9. Writing. The ability to communicate effectively is a key component of professionalism. Therefore, it is important to prepare reports with proper sentence structure, correct spelling, proper grammar, logical flow of thought, and which directly address the specific issue to be addressed. Professionally prepared reports are necessary both for submission to a supervisor and for courses taken in the HIMS professional program. To assist in preparing your written assignments, criteria are offered as a guide to what constitutes excellent written work versus average to unacceptable work. Instructors will use these criteria to grade written assignments. (***See Appendix 3***).

Appropriate Use of Electronics

10. Cell phones and other portable electronic devices. The world is wired and we all rely on cellular communication devices. *However, instructors have the discretion to limit or prohibit any of these devices.* Unless they are directly related to the course (ie, taking notes, reviewing class supporting documents, accessing Carmen), it is inappropriate for these devices to be used and/or in sight. This applies both to while you are in class and/or attending conferences/ seminars, and is out of respect for the presenter or instructor and your fellow students or conference attendees. Talking on a cell phone, texting, instant messaging, surfing the Internet, or possessing a ringing cell phone during class time may result in reduction in your grade or other consequences. As a student in a professional program, you need to *be here now,* both physically and mentally.

11. Netiquette. Considerate behavior extends to electronic communications. Be aware of word choice, grammar and punctuation, and the recipient of your message when communicating electronically. For appropriateness related to social networking, see SHRS Policy 7.

Avoidance of Academic and Professional Misconduct

12. Honesty. You are responsible for following the University's ***Code of Student Conduct***, the School of Health and Rehabilitation Sciences' *Code of Ethics* (see SHRS Policy 1), and the policy for academic misconduct (see SHRS Policy 2). In addition, as a health information management student you are responsible for adhering to the ***Code of Ethics*** of the American Health Information Management Association (AHIMA). (**See *Appendix 4.***)

    Academic integrity is essential to maintaining an environment that fosters excellence in teaching, research, and other educational and scholarly activities. At Ohio State we presume that all students have read and understand the university's Code of Student Conduct (http://studentaffairs.osu.edu/resource_csc.asp). Ignorance of this policy is never an excuse for academic misconduct. As a student in the HIMS program, you are expected to complete all assignments with fairness and honesty. Honesty means refraining from the following:

    A. Plagiarism. **Plagiarism** is the failure to give proper credit to either an Internet or non-Internet reference, thus representing another's writing, ideas, or work as your own. Plagiarism can lead to severe consequences including dismissal from the HIMS program and from the university.

        Because Internet resources are readily available and easy to cut and paste, the temptation to plagiarize them is particularly strong. Resist this temptation. Although the Internet is a powerful and useful educational resource, it is not a substitute for doing one's own work. The same citation rules (i.e., footnotes and bibliographies) apply to Internet resources and non-Internet resources. Further, "links" alone are insufficient citations and will not be accepted by your instructors. Citations must be in the proper format (as directed by your instructor) and include the following elements: title, author, journal or magazine publishing the article, and date of publication.

B. Cheating. **Cheating** is allowing another person to do your work for you, or doing another's work for him or her; substituting for a student taking an exam or completing an assignment; possessing and/or using unauthorized study aids or notes; practicing fraud or deceit; providing or receiving information for examinations or assignments with or without the source's knowledge; and/or sharing information about the content of an exam with a student who has not yet taken the exam.

C. Fabrication. **Fabrication** is altering a graded work or falsifying information and resources including laboratory and research results.

D. Aid of academic dishonesty. **Aid of academic dishonesty** is intentionally facilitating or participating in the above dishonorable actions or any other action deemed in violation of the Code of Student Conduct or course rules.

If a faculty member believes a student has committed academic misconduct they must report the student to the Committee on Academic Misconduct (COAM) (http://oaa.osu.edu/coam.html). If COAM finds that the student has violated the Code of Student Conduct, sanctions could include a failing grade and suspension or dismissal from the University.

13. Patient Privacy and Confidentiality. Patient information of any type as well as institutional information is ***STRICTLY CONFIDENTIAL***. No information of a confidential nature will be divulged outside of the classroom. Breach of patient or institutional privacy and confidentiality is grounds for immediate dismissal from the program. Your conduct while on PPEs or any other organized class activity away from school must reflect the above codes of conduct. You will be asked to sign a confidentiality statement that will remain on file during your tenure in this program. See SHRS Policies 6 and 12.

F. Chain of Command

Concerns related to a course must first be discussed with the course instructor before the concern can be brought to the Program Director. See SHRS Policies 5 and 20. Problems related to the division should be directed to the Division Director.

VI. Facilities and Resources

- **Lockers.** Lockers are available in Atwell Hall. The SHRS Administrative Office coordinates locker assignments. A student wishing to be assigned a locker is to bring a combination lock to the SHRS Administrative Office, where the combination can be documented and the locker assigned. Students are not to place a lock on a locker without first being assigned a locker by the SHRS Administrative Office.

- **Mailboxes.** Student mailboxes are located in the front area of the HIMS suite. Please check your mailbox regularly.

- **Laboratory.** Room 438 Atwell Hall is the HIMS program's main classroom. The room is to remain locked at all times unless used for class or study purposes. Do not leave valuables unattended in the room.

- **Computer Lab.** SHRS maintains a 32-station student computer lab in Room 435 and a 10-station student computer lab in Room 227. Room 435 is the HIMS computer laboratory. The labs are open during the day, Monday through Friday. A number of the HIMS courses use the computer lab as part of course laboratory activities. However, it is recommended that students have access to their own computers as well because many assignments require the use of

computer applications and the lab is not always available. The School's Director of Computer Technical Support is Bruce Noskowiak. If you have problems with equipment in the computer lab you can contact him at Bruce.Noskowiak@osumc.edu.

- **Students with Disabilities. I**f you need an accommodation based on the impact of a disability, you should contact your instructors privately to discuss your specific needs. Please also contact the Office of Disability Services at 614-292-3307 in 098 Baker Hall, which coordinates reasonable accommodations for students with documented disabilities. See the SHRS handbook for additional information.

VII. Student Requirements

A. Immunizations

Evidence of immunizations (ie, measles, mumps, diphtheria/pertussis/tetanus, varicella, PPD and hepatitis B), must be submitted to the OSU Student Health Services before the clinical PPE commences during autumn semester of a student's first year of the program. Additionally, The Ohio State University Medical Center requires students to obtain the annual influenza vaccine in mid to late autumn. A student's health evaluation must be updated during the final year in the program, prior to the PPE during spring semester. Immunizations must be completed prior to placement in clinical sites. Enrollment in the SHS "My BuckMD" website is encouraged because it allows students to access their immunization records and other pertinent personal health record information. See SHRS Policy 15.

B. Background Checks

You are required to have a criminal background check performed as part of the admissions process to the School of Health and Rehabilitation Sciences and the HIMS program. You will be required to have the background check performed again as a course requirement for the spring semester PPE your senior year. Background checks can be completed through The Ohio State University Medical Center Security Department, and are arranged by SHRS. You must pass your background check in order to be assigned to many clinical and professional PPE sites as background checks are a standard requirement of healthcare organizations. See SHRS Policy 13.

C. CBL Training

Students who affiliate with The Ohio State University Medical Center are required to complete a series of online self-instruction training Modules. The modules consist of information on HIPAA, sexual harassment, compliance, fire safety, emergency preparedness and others as assigned. Completion of the modules will be coordinated through HIMS 3520.

D. Student Health Insurance

In addition, The Ohio State University requires students to carry University Student Health insurance unless they can prove they are already covered by other health insurance. See SHRS Policy 14.

VIII. Professional Activities

A. HIMS Student Organization

Students automatically become members of the HIMS student organization upon enrollment in the program. The HIMS student organization promotes the welfare of the students in the program, acts as liaison between the students and faculty, and engages in activities to promote the HIMS profession and the general welfare of the school. Leadership positions are available

and provide excellent opportunities. Information about the organization is available through its officers.

B. Professional Organizations

1. **AHIMA**. Student membership in the American Health Information Management Association (AHIMA) is required. It is $49.00 per year. It can also be purchased as a bundle with the *Health Information Management: Concepts, Principles and Practice* text. AHIMA is the professional association for individuals with a degree in health information management. Membership entitles the student to the *Journal of the American Health Information Management Association*. As a student member, registration fees for selected national and/or regional workshops may be waived. Students are encouraged to join AHIMA online Engage communities for networking and professional resources. Engage is located through the AHIMA website at www.ahima.org. Students are also encouraged to take advantage of resources that AHIMA makes available specifically for HIM students.

   As a member of AHIMA, you automatically become a member of the Ohio Health Information Management Association. You are expected to attend the annual statewide meeting that is held each spring. As a student, you may also be entitled to attend selected conferences, seminars and symposia at a reduced cost or at no charge.

2. **CSOHIMSS**. Students may consider optional student membership in the Central and Southern Ohio Health Information and Management Systems Society (CSOHIMSS). CSOHIMSS provides educational and networking opportunities to support healthcare professionals in designing and managing cost-effective, quality healthcare delivery systems. Membership consists of professionals and students in the healthcare industry including consultants, administrators, information and clinical systems professionals, telecommunications professionals, and management engineers.

   Programs are held six or more times throughout the year to keep members informed of changes in the healthcare environment. These programs provide an opportunity to learn new technologies, applications, and methodologies; remain updated about changes in healthcare delivery and policy; and network with professionals in the field.

IX. National Certification Examinations

During your last term in the HIMS program, the American Health Information Management Association deems you eligible to sit for the national certification examination for health information administrators to earn the Registered Health Information Administrator (RHIA) designation. **Taking the RHIA examination during the final semester in the program is a requirement for completion of HIMS program coursework and for subsequent graduation.** The examination is offered online in an approved testing center. Successful completion of the examination entitles you to use the professional RHIA credential. Individuals who do not pass the exam may retake the exam no more than quarterly. The procedure for examination application will be discussed in greater detail during spring semester of the senior year. Students are encouraged to take the exam as early as possible once they become eligible.

You may demonstrate your expertise in health information management specialty areas by successfully completing the following certification exams.

a) Coding: Based on experience and education, you will be eligible to obtain various specialty certifications in coding. The certifications are CCA (Certified Coding Associate), CCS (Certified Coding Specialist), and CCS-P (Certified Coding Specialist-Physician Based). Eligibility varies for each certification. These certifications are sponsored by AHIMA.

b) Privacy and security: With your RHIA certification, you will be eligible to obtain specialty certification in health care privacy and security following two years of job experience in healthcare privacy or security management. The CHPS (Certified in Healthcare Privacy and Security) certification is sponsored by both AHIMA and HIMSS. Although no longer offered as separate certifications, established professionals also hold the following certifications: CHP (Certified in Healthcare Privacy, sponsored by AHIMA); and CHS (Certified in Healthcare Security, sponsored by HIMSS).

c) Health data analytics: With your RHIA certification, you will be eligible to obtain specialty certification in health data analytics as a Certified Health Data Analyst (CHDA), sponsored by AHIMA.

d) Documentation improvement: With your RHIA certification and two years of clinical documentation improvement experience, you will be eligible to obtain specialty certification in this area as a Certified Documentation Improvement Practitioner (CDIP), sponsored by AHIMA.

e) Healthcare technology: With a recommended background of relevant experience or non-degree health IT workforce development training, individuals are eligible to sit for the Certified Healthcare Technology Specialist (CHTS) credential, sponsored by AHIMA.

f) Health informatics: With your RHIA certification and two years of health informatics experience, you will be eligible to obtain specialty certification in this area as a Certified Professional in Health Informatics (CPHI).

Further information regarding these certifications can be found at the AHIMA website www.ahima.org.

X. Importance of Privacy and Confidentiality of Health Information

All students working with patient-identifiable information are required to maintain and respect the privacy and confidentiality of that information regardless of its format (paper, electronic, oral, etc.). All information made known in the course of providing treatment or generated in connection with patient care activities is confidential and is not to be used or disclosed without patient authorization except as provided by law. No student will use or disclose patient-identifiable information without first receiving permission from a superior.

Students with access to patient information and organizational information used for decision-making and operational purposes may only obtain information that is necessary to perform the tasks they have been assigned and as permitted by the organization. Accessing patient and/or other health-related information other than what is required to perform an assigned task or class activity is prohibited.

Patient-identifiable or institutional information may not be displayed where it is visible in any public area. Reports, documents, and other media which are discarded must be disposed of by shredding or other effective means of destruction. Private information relevant to a class or PPE may only be discussed with appropriate persons associated with the class or the PPE. Discussions about private information shall be held in areas where the public will not overhear the discussions.

Inappropriate access, use, or disclosure of confidential information, whether intentional or unintentional, shall result in disciplinary action up to removal from the HIMS program.

Students are required to participate in a HIPAA/confidentiality training module at the beginning of autumn semester of their first year in the program, in conjunction with their clinical rotations. Students may be required to complete additional training pursuant to requirements of specific clinical sites.

See SHRS Policies 6 and 12.

XI. Faculty

Core Faculty:

Laurie A. Rinehart-Thompson, JD, RHIA, CHP, FAHIMA — 543 Atwell Hall
Program Director, HIMS — 292-3694
Interim Division Director, HIMS
Associate Professor-Clinical Health and Rehabilitation Sciences
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Melanie S. Brodnik, PhD, RHIA, FAHIMA — 543 Atwell Hall
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Senior Lecturer — 247-0060
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Adjunct Instructors:

Anne Casto, RHIA, CCS
Elizabeth Curtis, MA, RHIA, CHPS, FAHIMA
Lauree Handlon, MS, RHIA, CCS, FAHIMA
Maribeth Hernan, MA, RHIA, CHP
Kevin Jones, MS
Kristin Nelson, MS, RHIA
Manjusri Nguyen, MBA, RHIA
Susan White, PhD, RHIA, CHDA

In addition to the individuals listed above, there are more than 50 guest lecturers and clinical site preceptors who work with Health Information Management & Systems to enrich the curriculum.

APPENDIX 1

Baccalaureate Level HIM Curriculum Map

A significant change in approach is noted with this release of the curricula. The emphasis and measurement of success is with attainment of the Bloom's taxonomy level associated with the Student Learning Outcomes rather than the curricular considerations (which are examples of topics to be considered). When specific content is required it is part of the student learning outcome. With the pace of change in healthcare and HIM today, the curricular considerations may change with great frequency, but the student learning outcomes would remain consistent over longer periods of time.

Concepts to be interwoven throughout all levels of the curricula include:
- CRITICAL THINKING: For example the ability to work independently, use judgment skills effectively, be innovative by thinking outside of the box

PERSONAL BRANDING: For example personal accountability, reliability, self-sufficiency

Entry Level Competency Student Learning Outcomes	Bloom's Level	Curricular Considerations
Domain I. Data Content Structure and Standards		
Subdomain I.A. Classification Systems		
1. Evaluate, implement and manage electronic applications/systems for clinical classification and coding	5	• Encoders, Computer Assisted Coding, Systems Development Life Cycle
2. Identify the functions and relationships between healthcare classification systems	3	• Healthcare classification systems, taxonomies, and clinical vocabularies o ICD, CPT, SNOMED-CT, DSM
3. Map terminologies, vocabularies and classification systems	4	• Mapping from a standard clinical terminology to a HIPAA code set o LOINC to CPT or SNOMED to ICD • Mapping from one code set to another code set o One revision of ICD to another
4. Evaluate the accuracy of diagnostic and procedural coding	5	• Principles and applications of classification, taxonomies, nomenclatures, terminologies, clinical vocabularies, auditing
Subdomain I.B. Health Record Content and Documentation		
1. Verify that documentation in the health record supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status	4	• Health record components o General requirements for documentation for all record types
2. Compile organization-wide health record documentation guidelines	6	• Standards and regulations for documentation o The Joint Commission, CARF, CMS • Health record documentation policies and procedures
3. Interpret health information standards	5	• Health information standards and regulations
Subdomain I.C. Data Governance		
1. Format data to satisfy integration needs	4	• Capture, structure, and use of health information • Interoperability
2. Construct and maintain the	6	• Data dictionary composition

standardization of data dictionaries to meet the needs of the enterprise		• Data sources
3. Demonstrate compliance with internal and external data dictionary requirements	3	• Accreditation standards o The Joint Commission, NCQA, CARF, CHAP, URAC Data ,HL7, ASTM, HEDIS, ACS data standards
4. Advocate information operability and information exchange	5	• Generally accepted recordkeeping principles
Subdomain I.D. Data Management		
1. Analyze information needs of customers across the healthcare continuum	4	• Capture, structure, and use of health information
2. Evaluate health information systems and data storage design	5	• Storage media, disaster recovery, cloud computing
3. Manage clinical indices/databases/registries	5	• Secondary data sources, registries, and indices • Healthcare data sets o HEDIS, UHDDS, OASIS • Indices and registry policies
4. Apply knowledge of database architecture and design to meet organizational needs	3	• Database architecture and design • Data dictionary, data modeling, data warehousing
5. Evaluate data from varying sources to create meaningful presentations	5	• Presentation software • Healthcare data • Indices and registries
Subdomain I.E. Secondary Data Sources		
1. Validate data from secondary sources to include in the patient's record, including personal health records	3	• Data stewardship • Patient-centered health information technology • Secondary data sources, registries, and indices
Domain II. Information Protection: Access Disclosure Archival Privacy and Security		
Subdomain II.A. Health Law		
1. Identify laws and regulations applicable to health care	3	I.B.2 III.A.2
2. Analyze legal concepts and principles to the practice of HIM	4	• Legal principles • Legal health records
Subdomain II.B. Data Privacy Confidentiality and Security		
1. Analyze privacy, security and confidentiality policies and procedures for internal and external use and exchange of health information	4	• Patient verification and identity management policies • Privacy, confidentiality, security principles, policies and procedures, federal and state laws • E-Discovery
2. Recommend elements included in the design of audit trails and data quality monitoring programs	5	• Data security o Audits, controls, data recovery e-security o Disaster recovery planning o Business continuity planning
3. Collaborate in the design and implementation of risk assessment, contingency	4	• Health information archival and retrieval systems • Data security protection methods

planning, and data recovery procedures		○ Authentication, encryption, decryption, firewalls
4. Analyze the security and privacy implications of mobile health technologies	4	• Security threats of mobile device, healthcare delivery via mobile devices
5. Develop educational programs for employees in privacy, security, and confidentiality	6	• Education and training principles • Privacy and security laws and regulations, adult education strategies, training methods
Subdomain II.C. Release of Information		
1. Create policies and procedures to manage access and disclosure of personal health information	6	• Principles for releasing PHI • Required elements of an authorization
2. Protect electronic health information through confidentiality and security measures, policies and procedures	3	• Audit techniques and principles
Domain III. Informatics, Analytics and Data Use		
Subdomain III.A. Health Information Technologies		
1. Utilize technology for data collection, storage, analysis, and reporting of information	3	• Health information archival and retrieval systems • Computer concepts ○ Hardware components, network systems architecture operating systems and languages, software packages and tools, Cloud computing applications
2. Assess systems capabilities to meet regulatory requirements	5	• Electronic signatures, data correction, audit logs
3. Recommend device selection based on workflow, ergonomic and human factors	5	• Human factors and user interface design ○ PDAs, screen size, mobile carts, bedside terminals/point of care
4. Take part in the development of networks, including intranet and Internet applications	4	• Communication technologies ○ Network-LANS, WANS, WLANS, VPNs • Internet technologies ○ Intranet, web-based systems, standards SGML, XML
5. Evaluate system architecture, database design, data warehousing	5	• System testing • Interface management • Data relationships
6. Create the electronic structure of health data to meet a variety of end user needs	6	• Data, information and file structures ○ Data administration, data definitions, data dictionary, data modeling, data structures, data warehousing, database management systems
Subdomain III.B. Information Management Strategic Planning		
1. Take part in the development of information management plans that support the organization's current and future strategy and	4	• Corporate strategic plan, operation improvement planning, information management plans • Disaster and recovery planning

goals		
2. Take part in the planning, design, selection, implementation, integration, testing, evaluation, and support of health information technologies	4	• Systems development life cycle o Systems analysis, design, implementation, evaluation, maintenance, EHRs, HIEs, RECs
Subdomain III.C. Analytics and Decision Support		
1. Apply analytical results to facilitate decision-making	3	• Data visualization, power point, dashboards
2. Apply data extraction methodologies	3	• Data capture tools and technologies o Forms, computer screens, templates, other health record documentation tools clinical, financial, administrative • Healthcare statistical formulas o LOS, death, birth, infection rates
3. Recommend organizational action based on knowledge obtained from data exploration and mining	5	• Data exploration and mining
4. Analyze clinical data to identify trends that demonstrate quality, safety, and effectiveness of healthcare	4	• Statistical analysis on healthcare data • Descriptive statistics o Mean, standard deviation, ranges, percentiles • Inferential statistics o T-tests, ANOVA, regression analysis, reliability, validity • Epidemiological applications
5. Apply knowledge of database querying and data exploration and mining techniques to facilitate information retrieval	3	• SQL, Data exploration and mining • Data presentation standards and tools
6. Evaluate administrative reports using appropriate software	5	• SQL, Reporting tools
Subdomain III.D. Health Care Statistics		
1. Interpret inferential statistics	5	• Inferential statistics o T-tests, ANOVA, regression analysis, reliability, validity • Computerized statistical packages o SPSS, SAS
2. Analyze statistical data for decision making	4	• Statistical analysis on healthcare data • Descriptive statistics o Mean, standard deviation, ranges, percentiles • Data reporting and presentations techniques
Subdomain III.E. Research Methods		
1. Apply principles of research and clinical literature evaluation to improve outcomes	3	• Research design/methods o Quantitative, qualitative, evaluative, mixed, outcomes • Literature search and evaluation • Knowledge-based research techniques o Medline, CMS libraries, AHRQ, and other websites
2. Plan adherence to Institutional	3	• National guidelines regarding human-subjects

Review Board (IRB) processes and policies		research • IRB process • Research protocol data management
Subdomain III.F. Consumer Informatics		
1. Educate consumers on patient-centered health information technologies	3	• Patient centered medical homes • Patient portals, patient safety, patient education • Personal Health Record
Subdomain III.G. Health Information Exchange		
1. Collaborate in the development of operational policies and procedures for health information exchange	4	• HIE's, local, regional including providers, pharmacies, other health facilities
2. Conduct system testing to ensure data integrity and quality of health information exchange	6	• Integration, interfaces, and data reliability
3. Differentiate between various models for health information exchange	5	• RHIO, HIE
Subdomain III.H. Information Integrity and Data Quality		
1. Discover threats to data integrity and validity	3	• Intrusion detection systems, audit design and principle
2. Implement policies and procedures to ensure data integrity internal and external to the enterprise	3	• Authentication, encryption, password management
3. Apply quality management tools	3	• Control charts, Pareto charts, Fishbone diagrams and other Statistical Process Control techniques
4. Perform quality assessment including quality management, data quality, and identification of best practices for health information systems	4	• Data quality assessment and integrity • Disease management process o Case management, critical paths, care coordination • Outcomes measurement o Patient as patient, customer satisfaction, disease specific • Patient and organization safety initiatives
5. Model policy initiatives that influence data integrity	3	• Data quality Model • Characteristics of data integrity
Domain IV. Revenue Management		
Subdomain IV.A. Revenue Cycle and Reimbursement		
1. Manage the use of clinical data required by various payment and reimbursement systems	5	• Clinical Data Management and reimbursement management • CaseMix Management • Payment systems o PPS, DRGs, RBRVS, RUGs, Value Based Purchasing (VBP), MSDRGs, commercial , managed care, federal insurance plans o Billing and reimbursement at hospital inpatient and outpatient, physician office and other delivery settings
2. Take part in selection and	4	• Chargemaster management

development of applications and processes for chargemaster and claims management		
3. Apply principles of healthcare finance for revenue management	3	• Cost reporting, budget variances, budget speculation
4. Implement processes for revenue cycle management and reporting	3	• CCI-Electronic Billing X12N • Compliance strategies and reporting • Audit process ○ Compliance and reimbursement • Revenue cycle process • Utilization and resource management
Domain V. Compliance		
Subdomain V.A. Regulatory		
1. Appraise current laws and standards related to health information initiatives	5	• Compliance strategies and reporting • Regulatory and licensure requirements • Elements of compliance programs • Patient safety
2. Determine processes for compliance with current laws and standards related to health information initiatives and revenue cycle	5	• Policies and procedures • Non retaliation policies • Auditing and monitoring
Subdomain V.B. Coding		
1. Construct and maintain processes, policies, and procedures to ensure the accuracy of coded data based on established guidelines	6	• UHDDS, Federal compliance guidelines • Official coding guidelines from CMS, AMA, NCHVS, NCCI
2. Manage coding audits	5	• Audit principles and reporting
3. Identify severity of illness and its impact on healthcare payment systems	3	• Casemix • Computer assisted coding systems • Payment Systems ○ PPS, DRG, RBRVS, RUG, VBP, MSDRG, commercial, managed care, federal plans
Subdomain V.C. Fraud Surveillance		
1. Determine policies and procedures to monitor abuse or fraudulent trends	5	• Fraud detection
Subdomain V.D. Clinical Documentation Improvement		
1. Implement provider querying techniques to resolve coding discrepancies	3	• Query process, written, verbal and template queries, timeliness and interpretation, query retention
2. Create methods to manage Present on Admission, hospital acquired conditions, and other CDI components	6	• CDI concurrent, retrospective, post-bill review • CDI metrics and reporting process
Domain VI. Leadership		
Subdomain VI.A Leadership Roles		
1. Take part in effective negotiating and use influencing skills	4	• Negotiation techniques

2. Discover personal leadership style using contemporary leadership theory and principles	3	• Professional development for self • Role of HIM in the C-Suite
3. Take part in effective communication through project reports, business reports and professional communications	4	• Process re-engineering and work redesign
4. Apply personnel management skills	3	• Communication and interpersonal skills • Emotional intelligence • People developer/staffing mentor • Negotiation • Leadership and governance
5. Take part in enterprise-wide committees	4	• Facilitation, networking, consensus building • Meetings with executive boards and other high level organization groups, interdisciplinary committees
6. Build effective teams	6	• Team/consensus building
Subdomain VI.B. Change Management		
1. Interpret concepts of change management theories, techniques and leadership	5	• Change Management • Mergers • Risk exposure • Organizational design • EHR implementation
Subdomain VI.C. Work Design and Process Improvement		
1. Analyze workflow processes and responsibilities to meet organizational needs	4	• Workflow reengineering, workflow design techniques
2. Construct performance management measures	6	• Benchmarking techniques o Productivity standards, report cards, dashboards
3. Demonstrate workflow concepts	3	• Swimlane diagrams • Use cases • Top down diagrams
Subdomain VI.D. Human Resources Management		
1. Manage human resources to facilitate staff recruitment, retention, and supervision	5	• Principles of human resources management o Recruitment, supervision, retention, counseling, disciplinary action
2. Ensure compliance with employment laws	5	• Employment laws, labor laws o Federal and state
3. Create and implement staff orientation and training programs	6	• Workforce education and training
4. Benchmark staff performance data incorporating labor analytics	4	• Labor trends, market analysis
5. Evaluate staffing levels and productivity, and provide feedback to staff regarding performance	5	• Performance standards • Professional development in self and others
Subdomain VI.E. Training and Development		
1. Evaluate initial and on-going training programs	5	• Information systems, clinical documentation improvement, compliance, prospective payment system changes

		• PPS, CDI, EHRs
Subdomain VI.F. Strategic and Organizational Management		
1. Identify departmental and organizational survey readiness for accreditation, licensing and/or certification processes	3	• Accreditation standards o The Joint Commission, NCQA, CARF, CHAP, URAC o Provider credentialing requirements o CMS Conditions of Participation
2. Implement a departmental strategic plan	3	• Strategic planning, critical thinking, benchmarking
3. Apply general principles of management in the administration of health information services	3	• Organizational structures and theory
4. Evaluate how healthcare policy-making both directly and indirectly impacts the national and global healthcare delivery systems	5	• Healthy People 2020 • IOM reports • CDC • State, local and federal policies • PCORI
5. Identify the different types of organizations, services, and personnel and their interrelationships across the health care delivery system	3	• Managed care organizations • ACOs • Payers/providers, all delivery settings • Payers' impact to each delivery setting • Biotech • Medical devices
6. Collaborate in the development and implementation of information governance initiatives	4	• Inter/intra-organizational team-building and leadership • Project management
7. Facilitate the use of enterprise-wide information assets to support organizational strategies and objectives	4	• Information management planning • Enterprise information management • Master data/information management
Subdomain VI.G. Financial Management		
1. Evaluate capital, operating and/or project budgets using basic accounting principles	5	• Budget process o Capital and operating o Staffing budgeting
2. Perform cost-benefit analysis for resource planning and allocation	4	• Accounting • Cost/benefit analysis o Outsourcing, acquisition
3. Evaluate the stages of the procurement process	5	• Content of and answers to a request for proposal, request for information and request for quotation
Subdomain VI.H. Ethics		
1. Comply with ethical standards of practice	5	• Professional ethics issues • Ethical decision making process • AHIMA Code of Ethics • Patient rights • Patient safety
2. Evaluate the culture of a department	5	• Cultural Diversity
3. Assess how cultural issues affect health, healthcare quality, cost, and HIM	5	• Cultural competence • Healthcare professionals self-assessment of cultural diversity • Self-awareness of own culture

		• Assumptions, Biases, stereotypes
4. Create programs and policies that support a culture of diversity	6	• Diversity awareness training programs: age, race, sexual orientation, education, work experience, geographic location, disability • Regulations such as ADA, ACLU
Subdomain VI.I. Project Management		
1. Take part in system selection processes	4	• RFI and RFP
2. Recommend clinical, administrative, and specialty service applications	5	• RFP vendor selection, electronic record, clinical coding
3. Apply project management techniques to ensure efficient workflow and appropriate outcomes	3	• GANTT Charts, benchmarking, risk analysis, team structure
4. Facilitate project management by integrating work efforts	4	• Issue tracking, facilitation techniques, opportunity costs • Project management
Subdomain VI.J. Vendor/Contract Management		
1. Evaluate vendor contracts	5	• System acquisition and evaluation • Contract management
2. Develop negotiation skills in the process of system selection	6	• System acquisition and evaluation
Subdomain VI.K. Enterprise Information Management		
1. Manage information as a key strategic resource and mission tool	5	• Information Management Plan, information as an asset
Supporting Body of Knowledge (Pre-requisite or Evidence of Knowledge)		
Pathophysiology and Pharmacology		
Anatomy and Physiology		
Medical Terminology		
Computer Concepts and Applications		
Statistics		

Commission on Certification for Health Informatics and Information Management (CCHIIM)

Registered Health Information Administrator (RHIA) Examination Content Outline (effective July 1, 2014)
Number of Questions on Exam:
• 180 Multiple Choice (160 scored/20 unscored pretest)
Exam Time: 4 hours – any breaks will count against exam time

DOMAIN I: Data Content, Structure & Standards (18-22%)

TASKS:
A. Classification Systems
A1. Code diagnosis and procedures according to established guidelines
B. Health Record Content & Documentation
B1. Ensure accuracy and integrity of health data and health record documentation (paper or electronic)
B2. Manage the contents of the legal health record (structured and unstructured)
B3. Manage the retention and destruction of the legal health record
C. Data Governance
C1. Maintain data in accordance with regulatory requirements
C2. Develop and maintain organizational policies, procedures, and guidelines for management of health information
D. Data Management & Secondary Data Sources
D1. Manage health data elements and/or data sets
D2. Assist in the maintenance of the data dictionary and data models for database design
D3. Manage and maintain databases (e.g., data migration, updates)

DOMAIN II: Information Protection: Access, Disclosure, Archival, Privacy & Security (23-27%)
TASKS:
A. Health Law
A1. Maintain healthcare privacy and security training programs
A2. Enforce and monitor organizational compliance with healthcare information laws, regulations and standards (e.g., audit, report and/or inform)
B. Data Privacy, Confidentiality, and Security
B1. Design policies and implement privacy practices to safeguard Protected Health Information (PHI)
B2. Design policies and implement security practices to safeguard Protected Health Information (PHI)
B3. Investigate and resolve healthcare privacy and security issues/breaches
C. Release of Information
C1. Manage access, disclosure, and use of Protected Health Information (PHI) to ensure confidentiality
C2. Develop policies and procedures for uses and disclosures/redisclosures of Protected Health Information (PHI)

DOMAIN III: Informatics, Analytics & Data Use (22-26%)
TASKS:
A. Health Information Technologies
A1. Implement and manage use of, and access to, technology applications
A2. Evaluate and recommend clinical, administrative, and specialty service applications (e.g., financial systems, electronic record, clinical coding)
B. Information Management Strategic Planning
B1. Present data for organizational use (e.g., summarize, synthesize, and condense information)

C. Analytics & Decision Support
C1. Filter and/or interpret information for the end customer
C2. Analyze and present information to organizational stakeholders
C3. Use data mining techniques to query and report from databases
D. Healthcare Statistics
D1. Calculate healthcare statistics for organizational stakeholders
D2. Critically analyze and interpret healthcare statistics for organizational stakeholders (e.g., CMI)
E. Research Methods
E1. Identify appropriate data sources for research
F. Consumer Informatics
F1. Identify and/or respond to the information needs of internal and external healthcare customers
F2. Provide support for end-user portals and personal health records
G. Health Information Exchange
G1. Apply data and functional standards to achieve interoperability of healthcare information systems
G2. Manage the health information exchange process entity-wide
H. Information Integrity and Data Quality
H1. Apply data/record storage principles and techniques associated with the medium (e.g., paper-based, hybrid, electronic)
H2. Manage master person index (e.g., patient record integration, customer/client relationship management)
H3. Manage merge process for duplicates and other errors entity-wide (e.g., validate data sources)

DOMAIN IV: Revenue Management (12-16%)
TASKS:
A. Revenue Cycle & Reimbursement
A1. Manage the use of clinical data required in reimbursement systems and prospective payment systems (PPS)
A2. Optimize reimbursement through management of the revenue cycle (e.g., chargemaster maintenance, DNFB, and AR days)
B. Regulatory
B1. Prepare for accreditation and licensing processes [e.g. Joint Commission, Det Norske Veritas (DNV), Medicare, state regulators]
B2. Process audit requests (e.g., RACs or other payors, chart review)
B3. Perform audits (e.g., chart review, POC)
C. Coding
C1. Manage and/or validate coding accuracy
D. Fraud Surveillance
D1. Participate in investigating incidences of medical identity theft
E. Clinical Documentation Improvement
E1. Query physicians for appropriate documentation to support reimbursement
E2. Educate and train clinical staff regarding supporting documentation requirements

DOMAIN V: Leadership (12-16%)
TASKS:
A. Leadership Roles
A1. Develop, motivate, and support work teams and/or individuals (e.g., coaching, mentoring)
A2. Organize and facilitate meetings
A3. Advocate for department, organization and/or profession
B. Change Management

B1. Participate in the implementation of new processes (e.g., systems, EHR, CAC)
B2. Support changes in the organization (e.g., culture changes, HIM consolidations, outsourcing)

C. Work Design & Process Improvement

C1. Establish and monitor productivity standards
C2. Analyze and design workflow processes
C3. Participate in the development and monitoring of process improvement plans

D. Human Resources Management

D1. Perform human resource management activities (e.g., recruiting staff, creating job descriptions, resolving personnel issues)

E. Training & Development

E1. Conduct training and educational activities (e.g. HIM systems, coding, medical and institutional terminology, documentation and regulatory requirements)

F. Strategic & Organizational Management

F1. Monitor industry trends and organizational needs to anticipate changes
F2. Determine resource needs by performing analyses (e.g., costbenefit, business planning)
F3. Assist with preparation of capital budget

G. Financial Management

G1. Assist in preparation and management of operating and personnel budgets
G2. Assist in the analysis and reporting on budget variances

H. Ethics

H1. Adhere to the AHIMA code of ethics

I. Project Management

I1. Utilize appropriate project management methodologies

J. Vendor/Contract Management

J1. Evaluate and manage contracts (e.g., vendor, contract personnel, maintenance)

K. Enterprise Information Management

K1. Develop and support strategic and operational plans for entity-wide health information management

APPENDIX 2

Educational Outcomes for Graduates of Health Information Management and Systems

1. Critical Thinking Skills

   1.1. Conceptualize, analyze, develop, and implement solutions in a fluid, dynamic, heterogeneous health care setting.

2. Personal Initiative in Education and Career Planning

   2.1. Assume new roles through continually learning new concepts, technologies, and techniques.
   2.2. Assume responsibility for personal mastery through continual clarification of what is important to pursue and development of personal visions.
   2.3. Demonstrate commitment and a strong sense of responsibility to work.

3. Communication

   3.1. Communicate effectively through use of skills in speaking, reading, writing, and listening.
   3.2. Analyze situations and formulate and articulate appropriate communication patterns.

4. Customer-Service Orientation

   4.1. Recognize potential customers, assess their needs, and deliver quality and timely services.

5. Health Care Delivery Environment

   5.1. Determine needs of a heterogenous and fluid health care environment and adapt skills to meet these needs.

6. Sensitivity to Cultural and Community Needs

   6.1. Communicate and relate to diverse customer, patient, and professional communities.

7. Leadership and Collaboration

   7.1. Develop and articulate vision and motivate others to build and execute a shared vision.
   7.2. Effectively function in the dynamics of inter-disciplinary group process and team collaboration.

8. Professional Behavior

   8.1. Visibly demonstrate professional behaviors in all interactions with customers, patients, and other professionals.
   8.2. Understand and adhere to ethical and legal practice standards including all state and institutional regulations in client/patient care and fiscal management.
   8.3. Consider and act upon the ethical implications of course of action.

9. Strong Foundation in the Sciences

   9.1. Demonstrate application of the life sciences, research methodologies, mathematics, and statistics appropriate to the needs and functions of the task at hand.

10. Strong Foundation in Management, Legal, and Financial Perspectives

    10.1 Demonstrate application of concepts and techniques associated with
    - Human resources management
    - Organizational behavior and change management
    - Quality, patient safety, and outcomes analysis
    - Resource consumption and supply utilization
    - Budget preparation and implementation
    - Reimbursement and revenue cycle management
    - Analysis of information for clinical and administrative purposes
    - Legal and ethical issues of healthcare law, privacy, confidentiality and security of protected health informtation

11. Strong Foundation in Information and Systems Sciences

    11.1 Demonstrate application of concepts, techniques, and tools associated with:
    - Information systems planning and analysis
    - Information systems evaluation
    - Information collection, archival, retrieval, and analysis
    - Information usage

APPENDIX 3

Grading Criteria for Written Assignments

Grade	Elements
A	**Excellent work** • Student went significantly above and beyond stated minimum requirements • All key points are addressed • Fully developed logic that is evidence of higher level critical thinking • Writing/though processes are exceptionally clear, precise and organized • Appropriate degree of insight or supporting documentation is provided • No spelling, sentence structure or grammatical errors
B	**Above average work** • Student went above stated minimum requirements • Most key points are addressed • Well developed logic that is evidence of higher level critical thinking • Writing/thought processes are clear, precise and organized • Some insight or supporting documentation is provided • Minimal spelling, sentence structure and grammatical errors
C	**Average work** • Tasks completed, but student did not go above and beyond stated minimum requirements • Some key points are addressed • Average expression of logic that is evidence of higher level critical thinking • Writing/thought processes are acceptable in clarity, precision and organization • No insight or supporting documentation is provided • Presence of some spelling, sentence structure and grammatical errors
D E	**Below average work** **Unacceptable work** Instructor reserves the right to determine whether the elements below constitute a grade of D or E: • Student did not meet the stated minimum requirements • Few or no key points are addressed • Insufficient development of logic that is evidence of higher level critical thinking • Writing/thought processes are unclear and/or disorganized • No insight is provided; incorrect conclusions or supporting documentation may be present • Many spelling, sentence structure and grammatical errors

APPENDIX 4

American Health Information Management Association
Mission, Vision, Values and Code of Ethics

AHIMA is committed to advancing the HIM profession in an increasingly electronic and global environment. Needs are evolving from simply translating data, to having instant access to intelligence that can drive clinical and administrative decision-making in real time. AHIMA ensures that HIM professionals are armed with the skills and tools to act as leaders, using quality information.

Mission:

Transforming healthcare by leading HIM, Informatics, and Information Governance

Vision:

Improving health through trusted information

AHIMA Values:

Respect
Excellence
Leadership
Integrity

AHIMA 2018-2022 Strategic Objectives:

Prepare HIM professionals for the future
Lead in informatics
Lead in data analytics
Champion information governance

American Health Information Management Association Code of Ethics

Preamble

The ethical obligations of the health information management (HIM) professional include the safeguarding of privacy and security of health information; disclosure of health information; development, use, and maintenance of health information systems and health information; and ensuring the accessibility and integrity of health information.

Healthcare consumers are increasingly concerned about security and the potential loss of privacy and the inability to control how their personal health information is used and disclosed. Core health information issues include what information should be collected; how the information should be handled, who should have access to the information, under what conditions the information should be disclosed, how the information is retained and when it is no longer needed, and how is it disposed of in a confidential manner. All of the core health information issues are performed in compliance with state and federal regulations, and employer policies and procedures.

Ethical obligations are central to the professional's responsibility, regardless of the employment site or the method of collection, storage, and security of health information. In addition, sensitive information (e.g., genetic, adoption, drug, alcohol, sexual, health, and behavioral information) requires special attention to prevent misuse. In the world of business and interactions with consumers, expertise in the protection of the information is required.

Purpose of the American Health Information Management Association Code of Ethics

The HIM professional has an obligation to demonstrate actions that reflect values, ethical principles, and ethical guidelines. The American Health Information Management Association (AHIMA) Code of Ethics sets forth these values and principles to guide conduct. The code is relevant to all AHIMA members and CCHIIM credentialed HIM professionals [hereafter referred to as certificants], regardless of their professional functions, the settings in which they work, or the populations they serve. These purposes strengthen the HIM professional's efforts to improve overall quality of healthcare.

The AHIMA Code of Ethics serves seven purposes:

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

The code includes principles and guidelines that are both enforceable and aspirational. The extent to which each principle is enforceable is a matter of professional judgment to be exercised by those responsible for reviewing alleged violations of ethical principles.

The Code of Ethics and How to Interpret the Code of Ethics

Principles and Guidelines

The following ethical principles are based on the core values of the American Health Information Management Association and apply to all AHIMA members and certificants. Guidelines included for each ethical principle are a non-inclusive list of behaviors and situations that can help to clarify the principle. They are not meant to be a comprehensive list of all situations that can occur.

I. ***Advocate, uphold, and defend the individual's right to privacy and the doctrine of confidentiality in the use and disclosure of information.***

A health information management professional **shall**:

1.1. Safeguard all confidential patient information to include, but not limited to, personal, health, financial, genetic, and outcome information.

1.2. Engage in social and political action that supports the protection of privacy and confidentiality, and be aware of the impact of the political arena on the health information issues for the healthcare industry.

1.3. Advocate for changes in policy and legislation to ensure protection of privacy and confidentiality, compliance, and other issues that surface as advocacy issues and facilitate informed participation by the public on these issues.

1.4. Protect the confidentiality of all information obtained in the course of professional service. Disclose only information that is directly relevant or necessary to achieve the purpose of disclosure. Release information only with valid authorization from a patient or a person legally authorized to consent on behalf of a patient or as authorized by federal or state regulations. The minimum necessary standard is essential when releasing health information for disclosure activities.

1.5. Promote the obligation to respect privacy by respecting confidential information shared among colleagues, while responding to requests from the legal profession, the media, or other non-healthcare related individuals, during presentations or teaching and in situations that could cause harm to persons.

1.6. Respond promptly and appropriately to patient requests to exercise their privacy rights (e.g., access, amendments, restriction, confidential communication, etc.). Answer truthfully all patients' questions concerning their rights to review and annotate their personal biomedical data and seek to facilitate patients' legitimate right to exercise those rights.

II. ***Put service and the health and welfare of persons before self-interest and conduct oneself in the practice of the profession so as to bring honor to oneself, peers, and to the health information management profession.***

A health information management professional **shall**:

2.1. Act with integrity, behave in a trustworthy manner, elevate service to others above self-interest, and promote high standards of practice in every setting.

2.2. Be aware of the profession's mission, values, and ethical principles, and practice in a manner consistent with them by acting honestly and responsibly.

2.3. Anticipate, clarify, and avoid any conflict of interest, to all parties concerned, when dealing with consumers, consulting with competitors, in providing services requiring potentially conflicting roles (for example, finding out information about one facility that would help a competitor), or serving the Association in a volunteer capacity. The conflicting roles or

responsibilities must be clarified and appropriate action taken to minimize any conflict of interest.

2.4. Ensure that the working environment is consistent and encourages compliance with the AHIMA Code of Ethics, taking reasonable steps to eliminate any conditions in their organizations that violate, interfere with, or discourage compliance with the code.

2.5. Take responsibility and credit, including authorship credit, only for work they actually perform or to which they contribute. Honestly acknowledge the work of and the contributions made by others verbally or written, such as in publication.

A health information management professional **shall not**:

2.6. Permit one's private conduct to interfere with the ability to fulfill one's professional responsibilities.

2.7. Take unfair advantage of any professional relationship or exploit others to further one's own personal, religious, political, or business interests.

III. ***Preserve, protect, and secure personal health information in any form or medium and hold in the highest regards health information and other information of a confidential nature obtained in an official capacity, taking into account the applicable statutes and regulations.***

A health information management professional **shall**:

3.1. Safeguard the privacy and security of written and electronic health information and other sensitive information. Take reasonable steps to ensure that health information is stored securely and that patients' data is not available to others who are not authorized to have access. Prevent inappropriate disclosure of individually identifiable information.

3.2. Take precautions to ensure and maintain the confidentiality of information transmitted, transferred, or disposed of in the event of termination, incapacitation, or death of a healthcare provider to other parties through the use of any media.

3.3. Inform recipients of the limitations and risks associated with providing services via electronic or social media (e.g., computer, telephone, fax, radio, and television).

IV. ***Refuse to participate in or conceal unethical practices or procedures and report such practices.***

A health information management professional **shall:**

4.1. Act in a professional and ethical manner at all times.

4.2. Take adequate measures to discourage, prevent, expose, and correct the unethical conduct of colleagues. If needed, utilize the Professional Ethics Committee Policies and Procedures for potential ethics complaints.

4.3. Be knowledgeable about established policies and procedures for handling concerns about colleagues' unethical behavior. These include policies and procedures created by AHIMA, licensing and regulatory bodies, employers, supervisors, agencies, and other professional organizations.

4.4. Seek resolution if there is a belief that a colleague has acted unethically or if there is a belief of incompetence or impairment by discussing one's concerns with the colleague when feasible and when such discussion is likely to be productive.

4.5. Consult with a colleague when feasible and assist the colleague in taking remedial action when there is direct knowledge of a health information management colleague's incompetence

or impairment.

4.6. Take action through appropriate formal channels, such as contacting an accreditation or regulatory body and/or the AHIMA Professional Ethics Committee if needed.

4.7. Cooperate with lawful authorities as appropriate.

A health information management professional **shall not**:

4.8. Participate in, condone, or be associated with dishonesty, fraud and abuse, or deception. A non-inclusive list of examples includes:

- Allowing patterns of optimizing or minimizing documentation and/or coding to impact payment
- Assigning codes without physician documentation
- Coding when documentation does not justify the diagnoses or procedures that have been billed
- Coding an inappropriate level of service
- Miscoding to avoid conflict with others
- Engaging in negligent coding practices
- Hiding or ignoring review outcomes, such as performance data
- Failing to report licensure status for a physician through the appropriate channels
- Recording inaccurate data for accreditation purposes
- Allowing inappropriate access to genetic, adoption, health, or behavioral health information
- Misusing sensitive information about a competitor
- Violating the privacy of individuals

Refer to the AHIMA Standards for Ethical Coding for additional guidance.

4.9. Engage in any relationships with a patient where there is a risk of exploitation or potential harm to the patient.

V. ***Advance health information management knowledge and practice through continuing education, research, publications, and presentations***.

A health information management professional **shall**:

5.1. Develop and enhance continually professional expertise, knowledge, and skills (including appropriate education, research, training, consultation, and supervision). Contribute to the knowledge base of health information management and share one's knowledge related to practice, research, and ethics.

5.2. Base practice decisions on recognized knowledge, including empirically based knowledge relevant to health information management and health information management ethics.

5.3. Contribute time and professional expertise to activities that promote respect for the value,

integrity, and competence of the health information management profession. These activities may include teaching, research, consultation, service, legislative testimony, advocacy, presentations in the community, and participation in professional organizations.

5.4. Engage in evaluation and research that ensures the confidentiality of participants and of the data obtained from them by following guidelines developed for the participants in consultation with appropriate institutional review boards.

5.5. Report evaluation and research findings accurately and take steps to correct any errors later found in published data using standard publication methods.

5.6. Design or conduct evaluation or research that is in conformance with applicable federal or state laws.

5.7. Take reasonable steps to provide or arrange for continuing education and staff development, addressing current knowledge and emerging developments related to health information management practice and ethics.

VI. ***Recruit and mentor students, staff, peers, and colleagues to develop and strengthen professional workforce.***

A health information management professional **shall**:

6.1. Provide directed practice opportunities for students.

6.2. Be a mentor for students, peers, and new health information management professionals to develop and strengthen skills.

6.3. Be responsible for setting clear, appropriate, and culturally sensitive boundaries for students, staff, peers, colleagues, and members within professional organizations.

6.4. Evaluate students' performance in a manner that is fair and respectful when functioning as educators or clinical internship supervisors.

6.5. Evaluate staff's performance in a manner that is fair and respectful when functioning in a supervisory capacity.

6.6. Serve an active role in developing HIM faculty or actively recruiting HIM professionals.

A health information management professional **shall not**:

6.7. Engage in any relationships with a person (e.g. students, staff, peers, or colleagues) where there is a risk of exploitation or potential harm to that other person.

VII. ***Represent the profession to the public in a positive manner.***

A health information management professional **shall:**

7.1. Be an advocate for the profession in all settings and participate in activities that promote and explain the mission, values, and principles of the profession to the public.

VIII. ***Perform honorably health information management association responsibilities, either appointed or elected, and preserve the confidentiality of any privileged information made known in any official capacity.***

A health information management professional **shall**:

8.1. Perform responsibly all duties as assigned by the professional association operating within the bylaws and policies and procedures of the association and any pertinent laws.

8.2. Uphold the decisions made by the association.

8.3. Speak on behalf of the health information management profession and association, only while serving in the role, accurately representing the official and authorized positions of the association.

8.4. Disclose any real or perceived conflicts of interest.

8.5. Relinquish association information upon ending appointed or elected responsibilities.

8.6. Resign from an association position if unable to perform the assigned responsibilities with competence.

8.7. Avoid lending the prestige of the association to advance or appear to advance the private interests of others by endorsing any product or service in return for remuneration. Avoid endorsing products or services of a third party, for-profit entity that competes with AHIMA products and services. Care should **also** be exercised in endorsing any other products and services.

IX. ***State truthfully and accurately one's credentials, professional education, and experiences.***

A health information management professional **shall**:

9.1. Make clear distinctions between statements made and actions engaged in as a private individual and as a representative of the health information management profession, a professional health information association, or one's employer.

9.2. Claim and ensure that representation to patients, agencies, and the public of professional qualifications, credentials, education, competence, affiliations, services provided, training, certification, consultation received, supervised experience, and other relevant professional experience are accurate.

9.3. Claim only those relevant professional credentials actually possessed and correct any inaccuracies occurring regarding credentials.

9.4. Report only those continuing education units actually earned for the recertification cycle and correct any inaccuracies occurring regarding CEUs.

X. ***Facilitate interdisciplinary collaboration in situations supporting health information practice.***

A health information management professional **shall**:

10.1. Participate in and contribute to decisions that affect the well-being of patients by drawing on the perspectives, values, and experiences of those involved in decisions related to patients.

10.2. Facilitate interdisciplinary collaboration in situations supporting health information practice**.**

10.3. Establish clearly professional and ethical obligations of the interdisciplinary team as a whole and of its individual members.

10.4. Foster trust among group members and adjust behavior in order to establish relationships with teams.

XI. ***Respect the inherent dignity and worth of every person.***

A health information management professional **shall**:

11.1. Treat each person in a respectful fashion, being mindful of individual differences and cultural and ethnic diversity.

11.2. Promote the value of self-determination for each individual.

11.3. Value all kinds and classes of people equitably, deal effectively with all races, cultures, disabilities, ages and genders.

11.4. Ensure all voices are listened to and respected.

The Use of the Code

Violation of principles in this code does not automatically imply legal liability or violation of the law. Such determination can only be made in the context of legal and judicial proceedings. Alleged violations of the code would be subject to a peer review process. Such processes are generally separate from legal or administrative procedures and insulated from legal review or proceedings to allow the profession to counsel and discipline its own members although in some situations, violations of the code would constitute unlawful conduct subject to legal process.

Guidelines for ethical and unethical behavior are provided in this code. The terms "shall and shall not" are used as a basis for setting high standards for behavior. This does not imply that everyone "shall or shall not" do everything that is listed. This concept is true for the entire code. If someone does the stated activities, ethical behavior is the standard. The guidelines are not a comprehensive list. For example, the statement "safeguard all confidential patient information to include, but not limited to, personal, health, financial, genetic and outcome information" can also be interpreted as "shall not fail to safeguard all confidential patient information to include personal, health, financial, genetic, and outcome information."

A code of ethics cannot guarantee ethical behavior. Moreover, a code of ethics cannot resolve all ethical issues or disputes or capture the richness and complexity involved in striving to make responsible choices within a moral community. Rather, a code of ethics sets forth values and ethical principles, and offers ethical guidelines to which a HIM professional can aspire and by which actions can be judged. Ethical behaviors result from a personal commitment to engage in ethical practice.

Professional responsibilities often require an individual to move beyond personal values. For example, an individual might demonstrate behaviors that are based on the values of honesty, providing service to others, or demonstrating loyalty. In addition to these, professional values might require promoting confidentiality, facilitating interdisciplinary collaboration, and refusing to participate or conceal unethical practices. Professional values could require a more comprehensive set of values than what an individual needs to be an ethical agent in one’s own personal life.

The AHIMA Code of Ethics is to be used by AHIMA members and certificants, consumers, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups) that choose to adopt it or use it as a frame of reference. The AHIMA Code of Ethics reflects the commitment of all to uphold the profession's values and to act ethically. Individuals of good character who discern moral questions and, in good faith, seek to make reliable ethical judgments, must apply ethical principles.

The code does not provide a set of rules that prescribe how to act in all situations. Specific applications of the code must take into account the context in which it is being considered and the possibility of conflicts among the code's values, principles, and guidelines. Ethical responsibilities flow from all human relationships, from the personal and familial to the social and professional. Further, the AHIMA Code of Ethics does not specify which values, principles, and guidelines are the most important and ought to outweigh others in instances when they conflict.

Code of Ethics 2011 Ethical Principles

Ethical Principles: The following ethical principles are based on the core values of the American Health Information Management Association and apply to all AHIMA members and certificants.

A health information management professional shall:

1. ***Advocate, uphold, and defend the individual's right to privacy and the doctrine of confidentiality in the use and disclosure of information.***

2. ***Put service and the health and welfare of persons before self-interest and conduct oneself in the practice of the profession so as to bring honor to oneself, their peers, and to the health information management profession.***

3. ***Preserve, protect, and secure personal health information in any form or medium and hold in the highest regards health information and other information of a confidential nature obtained in an official capacity, taking into account the applicable statutes and regulations.***

4. ***Refuse to participate in or conceal unethical practices or procedures and report such practices.***

5. ***Advance health information management knowledge and practice through continuing education, research, publications, and presentations.***

6. ***Recruit and mentor students, peers and colleagues to develop and strengthen professional workforce.***

7. ***Represent the profession to the public in a positive manner.***

8. ***Perform honorably health information management association responsibilities, either appointed or elected, and preserve the confidentiality of any privileged information made known in any official capacity.***

9. ***State truthfully and accurately one's credentials, professional education, and experiences.***

10. ***Facilitate interdisciplinary collaboration in situations supporting health information practice.***

11. ***Respect the inherent dignity and worth of every person.***

Revised & adopted by AHIMA House of Delegates – (October 2, 2011)

APPENDIX 5

Scholarships and Awards

Health Information Management and Systems students are eligible to apply for several scholarship, loan and/or award opportunities. The organizations providing these opportunities are listed below.

American Health Information Management (AHIMA) Foundation Merit Scholarships

For detailed information on the AHIMA Foundation Merit Scholarships go to the following website: http://www.ahimafoundation.org/Scholarships/Scholarships.aspx. The application deadline is typically September 30 of each year.

AHIMA Student Triumph Award

Top students deserve to be rewarded for excellence both inside and outside the classroom. The Student Triumph Award is the most prestigious designation AHIMA can bestow upon a student. The award recognizes and encourages the best of the fresh new talent being trained in CAHIIM-accredited programs.

Nomination criteria for this award include the following:

- Holds Student membership at the time of nomination and Student or New Grad membership at the time of award
- Maintains a grade point equivalent of 3.5 out of 4.0 or higher
- Demonstrates leadership and commitment to the future of the HIM profession

Additional information can be found on the AHIMA website at http://www.ahima.org/about/recognition/triumph/award-categories. The nomination deadline is June 1 of each year.

Ohio Health Information Management Association (OHIMA) – New Graduate Award

Each year the OHIMA recognizes the accomplishment of one student per each Ohio HIM academic program by funding the cost of the national certification examination for that student. A HIMS faculty committee is responsible for selecting the recipient of this award. See the following website for more information.
http://www.ohima.org/scholarships/scholarships2.html

Central and Southern Ohio Health Information and Management Systems Society (CSOHIMSS)

The CSOHIMSS Chapter annually awards at least one $1000.00 scholarship and a one-year student HIMSS membership to an undergraduate or graduate student member studying in the healthcare information or healthcare management systems field. See the following website for more information. http://www.csohimss.org. The application deadline is September 30 of each year.

Health Information and Management Systems Society (HIMSS)

HIMSS offers several scholarship opportunities each year to HIMSS student members. See the following website for more information. http://himss.org/foundation/schlr.asp. The application period is announced on the website.

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Heron Family Scholarship - OSU HIMS

Dr. and Mrs. Tim Heron, parents of HIMS alumnus Christine Harsh, generously donate scholarship money to students each year. The scholarships are awarded to students based on their financial need and academic performance. A HIMS faculty committee is responsible for identifying students eligible for the award. The scholarship is awarded spring semester of the recipients' junior year, with funding allocated to the students' accounts in the autumn semester of their senior year.

Turner Family Scholarship - OSU HIMS

Cymone Turner, a HIMS student, and her family generously donated scholarship money to an incoming junior student each year. The scholarship is awarded based on financial need and a personal statement. The Turner family identifies the recipient of the award, with funding allocated during autumn semester of the recipient's junior year. The funding is used to defray the cost of textbooks.