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Focus

NEWSLETTER OF THE MICHIGAN HEALTH INFORMATION MANAGEMENT ASSOCIATION

Winter Team Talks

The Annual AHIMA Winter Team Talks were held in various locations throughout the country during the month of March 2002. The Michigan delegation, consisting of seven representatives, attended the meeting held on March 23, 2002, in St. Louis, MO. Peggy Chapo, Marsha Allen, Amy Savage, Chris McCann, Rochelle Cooper, Carol Jennings, and Carol Jaeger attended the one-day session and brought back information on AHIMA's goals and strategies for the year.

There are four main strategic priorities that have been established by AHIMA for 2002:

- Workforce
- Membership
- Coding
- Formal Education

The Lack of Credentialed HIM Professionals to meet market demands has led AHIMA to enhance its recruitment campaign, perform a workforce research study, establish the entry level coding credential, propose a Privacy credential, maintain the image marketing program and build stronger alliances with various industries and businesses.

AHIMA projects that despite a consistent 3% growth, membership in the organization will most likely decline in the future. To try and combat this potential membership reduction, AHIMA is establishing targeted campaigns for recruitment and retention,

forming a new corporate membership program, assessing member satisfaction and needs, and trying to retain new members by enhancing their first-year experience through a more "personal touch" to membership.

A new "Member-Get-A-Member" and "Student-Get-A-Student Program" was kicked off on March 7, 2002 and prizes will be offered for those who are successful in recruitment efforts. More information about this program can be found on the AHIMA web site (www.ahima.org).

The third strategic priority addresses the increased competition to AHIMA's coding leadership position. Attendees at Team Talks discussed ways to revitalize the Coding Roundtables and shared their ideas with AHIMA's Leadership. AHIMA is establishing a "Coding Basics" on-line training course, offering many coding audio seminars, the new entry-level coding certification, and serving in many national advocacy roles on coding, data quality, and classification systems.

The declining enrollment in HIM programs nation-wide is also a critical priority for AHIMA. Some of the initiatives that AHIMA has undertaken are to offer recruitment materials free of charge for members, developing other forms of recruitment support, redesigning the web look for the careers web site, and expanding the dollars available for scholarships and loans.

At Team Talks, the AHIMA leadership

seeks input from the Component State Associations in attendance and relies on our support for their strategic efforts. They feel that a grass roots outreach can provide some successful ideas for enhancing their efforts. It is always interesting to hear the various states speak about their own solutions to some of these issues and that is why the Team Talks sessions are so productive!

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**Deadline for July/August Focus,
May 31, 2002.**

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19110 Allen Road

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Team Talks

(Continued from page 1)

One of the goals of the AHIMA Vision 2006 program was that "AHIMA-granted credentials are of benefit in securing jobs and job advancement". In keeping with that goal, the House of Delegates voted last October in Miami, to establish the entry-level coding credential, called the CCA (Certified Coding Associate). This credential is intended to increase the pool of qualified new coders, provide a "stepping stone" to advancing to the CCS or CCS-P specialty certifications, and reinforce the advanced standing of the CCS and CCS-P. The first CCA exam will be held in September 2002.

Recently, AHIMA has proposed to its delegates a new credential showing a specialty in Healthcare Privacy. This credential is to be voted upon via the new electronic House of Delegates in April 2002. It will be called the CHP (Certified in Healthcare Privacy). AHIMA felt that it needed to take the lead in the area of Privacy, since it has long been our specialty and with the advent of the HIPAA legislation, we need to show that Privacy roles are built on HIM educational foundations. AHIMA feels that this credential offers a career path for HIM professionals wishing to specialize. The requirements for this credential would be an RHIT or RHIA credential, a Bachelor's Degree, and successful completion of the credentialing exam. The first exam would be held in October 2002.

In collaboration with HIMSS (Healthcare Information Management Systems Society), another credential will be offered in Healthcare Security. Collaboration with HIMSS is viewed as a positive so that an industry standard can be established in privacy and security. The first CHS (Certified in Healthcare Security) exam would be offered in February 2003.

Another agenda topic at the Team Talks session was the Communities of Practice (COPs) technology. Each state was asked to talk about the way they

are using the COPs and any success stories, advice, etc. The Delegate's role has been enhanced by the COP, because information can be posted by AHIMA and all the delegates have instant access to it. The COP allows delegates to dialogue about these important issues and make informed decisions throughout the year.

As always, the Team Talks were well-attended and beneficial for the representatives of Michigan. AHIMA allows anyone to attend the meetings free of charge, which is a benefit I would encourage everyone to think about taking advantage of one day. Interacting with the HIM Leaders from across the country is invigorating and it is great that we have this opportunity provided us by our national organization!

If you have any further questions about any of the information discussed at Team Talks, do not hesitate to contact me or any other Board Member who attended.

— Peggy Chapo, RHIA
President, MHIMA

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and
informative!*

If you would like
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to an upcoming issue
of *FOCUS*
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President's Message



Peggy Chapo, RHIA

It is time for my term as President to end and as I reflect over the past year, it seems like an incredibly short time since I was writing my first President's Message for FOCUS! Having possession of the President's gavel has been a wonderful experience and I would like to sum up the year in the following way:

P Professionalism and Patriotism: Our second MHIMA Board Meeting was held on September 14, 2001 and we all wondered what we could do to help our colleagues in New York and Washington, DC. Gathering with the MHIMA Board that day in September, we knew that our personal and professional lives were forever changed. The American patriotic spirit was particularly evident at the AHIMA convention in October, where we heard the stories of our HIM friends in New York and how AHIMA came to their aid. I was extremely proud to be a part of this professional organization!

R Responsiveness: Using our email contact list, we were able to respond to members' needs and questions in a more efficient way. Board Members could be polled simultaneously and utilize their varying skills to quickly arrive at an appropriate answer or provide advice.

E Education: We were able to provide 5 seminars of high quality to our members. In 3 cases, the skill and expertise of our own members was tapped to serve as presenters and panel members. In addition, the Coded Data Integrity Panel (CDIP) coordinated two Coding Roundtables. To keep our membership abreast of the latest HIM changes was one of the highest priorities of MHIMA this year. This priority culminates in the Annual Convention

in May 2002, which has an excellent, diverse, and interesting program.

- S** Strategy: The MHIMA Board continues to work within the structure of a strategic plan that provides direction for the board that you elect. Our three strategies and ten goals this year were focused on communication, interaction, and legislation.
- I** Influence: As an organization, we have been able to influence proposed state privacy legislation by submitting comments and opinions regarding House Bill 4936. If this bill is finalized into law, it will give us our long-desired retention legislation, as well as standardize copy costs for obtaining medical records. Another milestone occurred when we were part of a successful lobbying effort, through a statewide mass email campaign, to influence CMS to allow the use of Physician Query Forms.
- D** Drafting Legislative Guidelines for Michigan: A resource manual is being drafted for the membership which will serve as a guide for Michigan Health Information-related laws. Once it passes legal review, it will be available for sale.
- E** Entry-Level Coding Credential: The Certified Coding Associate (CCA) credential was approved by the House of Delegates in October at the AHIMA convention in Miami. With the creation of this credential, AHIMA hopes to be able increase the number of qualified new coders who will demonstrate to employers their commitment to clinical coding.
- N** Networking: As the President of MHIMA, I have had numerous opportunities to network with many of our own MHIMA members, HIM professionals throughout the United States, and other allied health professionals. The networking highlights for me were: 1) Attending the MHA Corporate Annual Meeting on Mackinac Island and hopefully raising the visibility of our organization amongst the many health care executives in attendance 2) The MHIMA Leadership Conference, which gave me an opportunity to interact with the members leading our regional HIM associations 3) The AHIMA Team Talks and Leadership Conference in July 2001-dynamic

speakers and enthusiastic participants made this weekend in Chicago one to remember! 4) AHIMA Conference/ House of Delegates-another wonderful opportunity to acquaint myself with representatives of other state HIM organizations, learning from their accomplishments and sharing some of my own! 5) SEMHIMA Annual Meeting: being asked to speak at my home region's Fall meeting and "warming up" the podium with Florine Mark was a great experience!

T Technology: This past year has brought about the AHIMA Communities of Practice, which has enhanced the way we interact electronically with each other by providing discussion forums, the ability to poll other members regarding pertinent work dilemmas, a resource library, and many other benefits. The MHIMA Delegates took part in the inaugural electronic voting process which means that important business can be conducted year-round. At the state level, MHIMA has upgraded its website by hiring a company called Telusys to design and maintain it for us. Members have access to a job bank, on-line registration for educational sessions and the annual convention, and the FOCUS newsletter, beginning with this issue. I am so excited when we can use technology to provide greater benefits and opportunities to our members-this has been an incredible year!

Being the President of an organization such as MHIMA means leading a talented group of professional colleagues for twelve months. I have been especially privileged to work with a team who has made this year the successful one it has been for this organization. I appreciate every single volunteer that we have, whether your role has been very visible or low-key-YOU are the reason that we have thrived!

Thanks to all of you for this memorable opportunity to serve. I turn the organization over to the capable hands of Amy Savage and wish her well in her upcoming term as President.

Wishing all of you continued professional success!

— Peggy Chapo, MS, RHIA
President

Alternative Settings in HIM: Credentials Coordinator

One of the benefits of a career in Health Information Management is the ability to function in several different arenas. Hospitals, physician offices, and insurance companies employ our colleagues, as well as long term care facilities and vendors. This article will look at one unique job setting for HIM professionals, the Credentials Coordinator.

A Credentials Coordinator wears many hats. They are a watchdog, investigator, and analyst all in one. This person may work in an insurance company or a hospital, but the main goal is the same - to make sure physicians meet the necessary requirements to see patients. Some of these requirements include:

- Current State license to practice medicine

- Current DEA Certificate, State Controlled Substance License, and current
- Board of Pharmacy Dispensing License.
- Malpractice insurance
- Admitting privileges in good standing
- Appropriate education and training in the specified area of practice
- Acceptable medical malpractice claims history
- Acceptable National Practitioner Data Bank report
- Acceptable Healthcare Integrity and Protection Data Bank report

The Coordinator must also review the physician's application, which contains questions regarding the provider's health status and work his-

tory. When all information has been gathered and reviewed, a category is assigned. The physician's information is then presented to a group of physicians at the Credentialing Committee meeting, usually held monthly. The committee members then approve or deny the applicant.

A physician must be re-credentialed every 3 years, which means the Coordinator must be organized and keep an efficient tracking system. Computers also play a big part in everyday functions. This career is perfect for detail orientated HIM professionals who are not interested in coding, and prefer a business setting over acute-care.

– Amy LeClaire, RHIA

MHIMA Election Results

President Elect:Leslie Mack, RHIA
Vice President:Deborah Sherman, RHIA
Secretary/Treasurer:.....Alison Miller, RHIA
Director:.....Karen Ruehl, RHIA
Delegate:Lauren Mendes, RHIA
Alternate Delegate:.....Nancy Klinkhamer, RHIA

MHIMA Nominating Committee

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Member:Jodi Herman, RHIA
Member:Kathy Rae, RHIT
Alternate:Paul Rice, RHIT

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.....Ten Tips for Tackling a Tight Labor Market.....

It's Monday morning and you're dreading the seemingly endless "To Do" list waiting on your desk. You have two open coding positions and piles of backlogged work sitting at the workstations of your best people, who are beginning to show the strain. If anyone calls in sick today, you'll only fall further behind. If only your had enough staff to get all the work done!

While layoffs are today's headline news in many industries, some HIM departments are experiencing an opposite crisis: not enough qualified HIM professionals to fill available positions. This creates daily challenges for managers responsible for meeting outcome objectives.

Are there any solutions? Here are a few tips offered by Rose T. Dunn, MBA, RHIA, CPA, Vice President of First Class Solutions in St. Louis, MO, and Leslie Ann Fox, MA RHIA, President and CEO of Care Communications, Inc. in Chicago, IL.

1. **Embrace your leadership role.** When you're in the middle of a work crunch, it's tempting to jump right in and start coding, transcribing, or filing yourself. Remember that your role as a manager requires you to lead. Your staff needs you to listen, brainstorm, develop solutions, and communicate them to stressed employees.
2. **Diagnose the problem accurately.** Different problems have different solutions. If you are short-staffed, chances are that situation is caused by one of three common factors: (a) there aren't enough qualified people in your geographical area; (b) your facility has imposed a hiring freeze; or (c) you have open positions and authority to fill them, but no time to recruit and interview. As you develop solutions, make

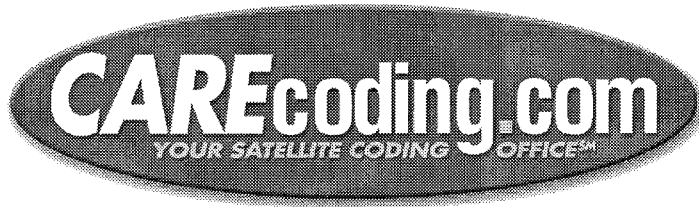
sure your strategies match with the reason you are short of help.

3. **Review your operations.** Rethink the way you've structured the workload in your department. If budget allows, an outside consultant can bring a fresh perspective on ways you can reorganize, streamline, or eliminate tasks. Even without a consultant, imagine looking at your department from the proverbial 30,000 feet up. Can you shift some of the workload to clerical staff or volunteers? Can you strip out some tasks? Look at every function and ask yourself why it's done that way.
4. **Make Human Resources your ally.** You rely on your colleagues in Human Resources to recruit competitively and to build attractive compensation strategies. Make it a point to develop cooperative, collaborative relationships with them. You can also turn to HR for other kinds of help. Is there anyone on light duty who may be available for assignment in your department? Might there be some part-time employees who are ready to accept more hours? Are there employees looking for transfers who want to get a foot in the HIM door?
5. **Visit the volunteer office.** Can volunteers handle some of your workload-e.g. sorting, filing, answering phones? If your facility has an active cadre of volunteers, now may be the time to tap into that source of labor.
6. **Create relationships with a good temp agency.** The time to develop a strong working relationship with a HIM Services Company that offers temporary services is before your labor crunch reaches crisis proportions.

7. **Involve your staff in brainstorming solutions.** If you're looking for ways to streamline operations, chances are some of the best ideas are in the heads of people sitting outside your office door. Involving them will not only generate ideas, it will also keep them informed and improve morale.
8. **Create simple incentives for extra effort.** Your staff may be working very hard to help out during a labor shortage. Who doesn't want to feel recognized and appreciated for going the extra mile? Incentives and recognition can be individual or team-wide and need not be costly. Small gifts, potluck parties, and certificates of accomplishment can go a long way in keeping morale up.
9. **Implement flexible staffing options.** You may find that the size of your local labor pool will increase if you are flexible. Explore part-time arrangements, telecommuting, flexible hours, volunteer overtime, and job sharing possibilities to make your department more appealing to current and potential employees.
10. **Prioritize wisely.** No matter how creative you are, sometimes it may not be possible to get all the work done with the staff available. These situations require you to use one of the most important managerial skills-the ability to prioritize wisely. Identify the most important work to get done and allow your staff to let go of the rest for now.

-Advantage, Feb 2002, Vol. 6, No. 1, P.5.

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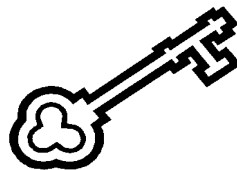
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OIG Audit Report Clears Up Billing For Observation Services

Under the Outpatient Prospective Payment System (OPPS) final rule for 2002, CMS will separately pay for observation services involving three medical conditions: chest pain, asthma, and congestive heart failure. Review of a recent Office of Inspector General (OIG) audit report can help make sure you are billing these services in compliance with Medicare requirements.

The audit report provides you with the results of an audit related to outpatient observation services billed by St. Francis Hospital in Tulsa, OK. The objective of the audit was to determine whether outpatient observation services billed by that facility met Medicare reimbursement requirements. Though the audit covers a time period prior to implementation of OPPS, much can be gleaned regarding the OIG's interpretation of Medicare requirements for observation services as defined in the Hospital Manual. For example, two key points that rendered observation services unallowable include lack of documented physician's orders and standing orders for observation.

The report, titled "Audit of Observation Service Billings by Prospective Payment System Hospitals" is dated February 2002 and can be found on the OIG's Web site at: <http://oig.hhs.gov/oas/reports/region6/60100028.pdf>.

CMS Issues PPS Rule for Long-Term Care Hospitals

On March 22, 2002, The Center for Medicare and Medicaid services (CMS) published a proposed rule to launch the new prospective payment system (PPS) for long-term care (LTC) hospitals. The new PPS, which would replace the current reasonable cost methodology, applies to more than 270 hospitals, generally facilities with an average inpatient length of stay greater than 25 days.

The PPS will tie payment to patient acuity. The proposed payment groups will be based on those developed for inpatient acute hospital services but modified to reflect the greater costs involved in caring for patients requiring longer lengths of stay in LTC hospitals. The proposed rule also provides for a five-year phase in, with the exception that certain facilities with low costs will be able to bypass the transition and go immediately to the full federal rate.

CMS plans to publish a final LTC hospital PPS rule by August, so that the new system can become effective by October 1, 2002, as mandated by law.

Memorial/Gifts in Honor Fund The Future of HIM

In 2002 gifts made in memory or in honor of colleagues, friends, or family members will directly support the FORE merit scholarship program. With this designation, such gifts will be more than a special way of remembering and honoring AHIMA members and their loved ones—they will make a tangible impact on the development of outstanding HIM professionals. This new source of support will help the merit scholarship program keep pace with AHIMA's recruitment efforts and meet a growing need within the HIM student body.

To make a donation in memory or in honor of colleagues, friends, or family members mail the contribution to FORE along with a note designating it in memory or in honor, or download and complete the giving form available on FORE's new Web site at: <http://www.ahima.org/fore> to mail in your contribution.

Congratulations!

Parker Matthew Bowlds

*was born to Sheila Bowlds, RHIA
and husband, Mel*

on April 2, 2002.



Website Update

The Members Only section of the new website is now accessible only with your AHIMA ID number. We are including in the Member Directory, name, address and work telephone number. It will only be available to AHIMA members. You may wish to opt out of the directory by contacting the Central Office by email at marsha@mhima.org, or calling 231-767-9717. Thank you for your help and patience during the development of this new website.

— Marsha Allen, RHIA
MHIMA Central Office Coordinator.



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Q&A: AHIMA's Proposed Certified in Healthcare Privacy (CHP) Credential

What is the Certified in healthcare Privacy (CHP) credential?

The "Certified in Healthcare Privacy" (CHP) credential is a proposed specialty credential to be offered by AHIMA. CHP is a working title for this credential and is subject to change depending on the results of a trademark search and copyright process. It will denote advanced competency in designing, implementing, and administering comprehensive privacy protection programs in all types of healthcare organizations. By offering this credential, AHIMA will help to ensure that privacy roles are viewed as related to Health Information Management. To become a CHP, candidates will need to meet eligibility requirements and to pass the CHP certification examination. They must maintain the credential over time by meeting continuing education requirements.

What is the value of having CHP designation?

Becoming Certified in Healthcare Privacy demonstrates to prospective employers that you have the expertise needed to lead an organization-wide privacy protection program. The CHP shows that you have chosen to focus and advance your career by specializing in the privacy dimensions of the health information management profession. By being recognized for your special expertise, you signify a commitment to advancing privacy management practices and to lifelong learning and professional development.

What competencies are measured by the Certified in Healthcare Privacy (CHP) credential?

The CHP covers eight major content areas or domains as shown below. Each of these areas is further detailed in competency and task statements that reflect the skills and knowledge of successful practitioners. In all, dozens of competencies and tasks are to be tested on the CHP examination as well as tasks that demonstrate integration of these domains in practice.

- Legal, Ethical, and Accreditation Issues
- Business Relationships and Contracts
- Policies and Procedures
- Compliance, Program Management, and Public Relations

- Individual Rights
- Health Information Management
- Security Technology
- Tasks that are common to the privacy and security roles

As the certifying body, AHIMA is responsible for maintaining the examination so that it evolves as practice changes and validly measures the most important and relevant competencies. Thus, domains and competencies are regularly reassessed to reflect changing practice.

Who is eligible to apply to write the CHP examination?

To be eligible to sit for the CHP examination, candidates must meet one of the following.

- A Baccalaureate degree and at least four (4) years experience in healthcare management
- A Baccalaureate degree and a minimum of two (2) years experience with one of the following credentials:
 - Registered Health Information Administrator (RHIA) from AHIMA
 - Registered Health Information Technician (RHIT) from AHIMA
 - Credentialed Professional in Health Information and Management Systems (CPHIMS) from HIMSS
- A Master's or other advanced degree (ID, MD, PhD, etc.) and two (2) years experience in healthcare management.

The highly relevant education and experience of RHIAs and RHITs is reflected in the lower minimum years of job experience required to be eligible to write the CHP examination. The requirement for a Baccalaureate degree reflects the institution-wide role and leadership level of healthcare privacy officers.

What will this new AHIMA-sponsored credential mean for RHIAs and RHITs?

Just as CCS and CCS-P denote specialty certification for coding mastery beyond entry level, so too will CHP come to denote the highest level of competency in healthcare privacy management. RHIAs and RHITs who gain CHP certification will:

- Build on their strong health information management foundation with expanded knowledge and insight into every aspect of health information privacy management.

- Be recognized for your professional expertise. CHP holders will be in demand for better jobs at higher salaries.
- Achieve additional recognition from employers, peers, and co-workers for the value your special competencies.
- Have access to extensive peer-to-peer communication opportunities with CHP colleagues facing similar professional challenges.
- Have access to highly relevant continuing professional education.

Vision 2006, AHIMA's strategic plan for advancing the profession, studied emerging roles for health information managers. Information privacy and security management were described as important new roles for health information management professionals. They build on competencies relating to release of information and safeguarding records and information and on professional values regarding patients' rights to privacy. Public interest in matters relating to privacy and HIPAA regulation has escalated the need foreseen by Vision 2006 for dedicated professionals. As the certification body for healthcare privacy, AHIMA will be supporting RHIAs and RHITs who seek to move into these roles. At the same time, others with an interest in being certified in healthcare privacy will be drawn to the AHIMA community and privacy will be properly viewed as one domain within the broader field of HIM.

When will the CHP exam be available and what will it cost?

Assuming that the House of Delegates approves the Standards for Initial Certification and Maintenance of Certification for the CHP exam, the first examination will be administered in the fall of 2002. The member fee is set at \$250 to write the examination. Recertification will be on a two-year cycle as is the case for RHIA, RHIT, and coding certifications, and will require self-reporting of evidence of appropriate continuing education. There will be a fee of \$75 every two years for recertification.

Congratulations!

The following members were successful in their respective examinations!

CCS

Barbara Anderson, CCS.....Menominee
 Kimberly Cannon, CCS.....Grand Rapids
 Lynette Cooper, RHIT, CCS.....Stevensville
 Kimberly Corsi, CCS.....Dearborn Hts.
 Karen Crider, RHIA, CCS.....Waterford
 Mark Czyzewski, CCS.....LaSalle
 Kimberly Davis, CCS.....Detroit
 Carole Gdula, CCS.....Dearborn
 Amy Gendron, RHIT, CCS.....Woodhaven
 Amy Gingras, CCS.....Jackson
 Linda Johnson, CCS.....Marquette
 Shawn Large, RHIT, CCS.....Gwinn
 Christine Lloyd, RHIT, DDS.....Mt. Clemens
 Rhonda Luoma, CCS.....Ironwood
 Susan McConnell, CCS.....Alpena
 Ginger Morgan, CCS.....Sault St. Marie
 Vickie Newby, CCS.....Detroit
 Jayna Passmore, CCS.....Elsie
 Curtisene Ross, RHIT, CCS.....Detroit
 Sherrie Sarters, CCS.....Bloomingtondale
 Michelle Schalow, CCS.....Sheridan
 Lisa Unger, RHIT, CCS.....Clinton Township
 Joy Waros, CCS.....Marquette
 Cynthia White, CCS.....Grand Rapids
 Ann Wiles, CCS.....Canton

CCS-P

Susan Chamberlain, RHIA, CCS-P.....Rockford
 Denice Harwood, CCS-P.....Mesick
 Christina Olson, CCS-P.....Ferndale
 Amy Wichtman, CCS-P.....Kalamazoo

RHIA

Renee DeBlois, RHIA.....Canton
 Brenda Hunter, RHIA.....Detroit
 Susan Kwiatkowski, RHIA, CCS.....Blissfield
 Frederick Mabrey, RHIA.....Detroit
 Shannon Pizzino, RHIA.....Dearborn Hts.
 Susan Slajus, RHIA.....Spring Lake
 Jalanna Taplin, RHIA.....Pontiac
 Dorothy To Fun Tse, RHIA.....Big Rapids
 Crystal Vinci, RHIA.....Clinton Township
 Lisa Wahl, RHIA.....Wyoming

RHIT

Tracy Avery, RHIT.....Oak Park
 Sheila Beschke, RHIT.....Macomb
 Katherine Bowron, RHIT.....Eastpointe
 Gloria Copeland, RHIT.....Belleville
 Diane Drabik, RHIT.....Clinton Township
 Mary Floros, RHIT.....Jackson
 Maraelena Fun, RHIT.....Taylor
 Carrie Glover, RHIT.....Taylor
 Jennifer Grantner, RHIT.....Swartz Creek
 Lori Hamilton, RHIT, CCS-P.....Tecumseh
 Joan Hanlon, RHIT.....St. Clair Shores
 Kathleen Hess, RHIT.....Big Rapids
 Shannon Horne, RHIT.....Westland
 Leigh Imel, RHIT.....Plymouth
 Janet Kowalski, RHIT.....Roseville
 Toni Anna Linderberger, RHIT.....Blissfield
 Joy Mathews, RHIT.....Mecosta
 Emilie Matteson, RHIT.....Ida
 Trudy Miller, RHIT.....Warren
 Lisa Paquette, RHIT.....Jackson
 Kathalynn Prins, RHIT.....Howell
 Cheryl Richardson, RHIT.....Brownstown Township
 Stephanie Schaffarzek, RHIT.....Warren
 Denise Sigler, RHIT.....White Lake
 Marrtina Smith-Hill, RHIT.....Lynn
 Lynn Strait, RHIT.....Traverse City
 Patricia Voit-Foss, RHIT.....Roseville
 Karen Wagner, RHIT.....Harper Woods
 Kathryn Wood, RHIT.....Dafter



TREASURER'S REPORT

MARCH 31, 2002

Total MHIMA Assets

03/31/02 – \$87,040.25

MHIMA MEMBERSHIP - APRIL 2002

MICHIGAN HEALTH INFORMATION MANAGEMENT ASSOCIATION

CODE	CLASSIFICATION	MEMBERSHIP 3-31-01	MEMBERSHIP 3-31-02	CHANGE
10	Active RHIT & RHIA	1424	1446	+22
11	Active Senior	19	27	+8
20	Associate	49	58	+9
21	Student	128	135	+7
50	Corporate	11	10	-1
	Honorary	1	1	-
TOTAL		1632	1678	+46
Maint. of Cert.		383	556	+173

PLEASE NOTE: When choosing your category of membership, be aware your choice of selecting a student classification may prevent you from voting in National and State Association elections.

*Inactive category deleted via AHIMA House of Delegates, 1996

**MICHIGAN HEALTH INFORMATION MANAGEMENT ASSOCIATION
CODED DATA INTEGRITY PANEL INQUIRY FORM**

The Coded Data Integrity Panel is comprised of HIM professionals who are striving for consistent coded data in our state. We will provide a professional, objective opinion regarding your coding/ reimbursement issue.

- CODING QUESTION** (include any references you may have used or correspondence regarding the issue in question).
- CASE STUDY** (Please submit pertinent information from the medical record to enable the Panel to answer your concern. Delete all patient/hospital identification to ensure confidentiality. The copies will be returned with our response after consensus is reached. In the event we may need to refer your case to an outside source (ie. HCFA, AHA, AHIMA. etc) you will be contacted prior to us doing so for your approval.
- CODING ISSUE RESOLUTION** (Please submit resolutions to coding issues that your facility has received from AHA MPRO, etc. The information may be utilized and disseminated in FOCUS by CDIP to help reach the goal of consistent data.)

DESCRIBE THE CODING ISSUE/PROBLEM

Requester's Name _____

Title _____

Facility _____

Address _____

Phone # (_____) _____

SEND TO: Sheila Bowlds, RHIA
Assistant Director
Medical Information Services
William Beaumont Hospital
3601 W. Thirteen Mile Rd.
Royal Oak, Michigan 48073

Email: sbowlds@smtpgw.beaumont.edu
Phone: (248) 551-5002



PANEL USE ONLY:

Date Received _____

Date Resolved by Panel _____

Date / Whom Referred if Necessary _____

Brief Description of Decision: _____

Date Response Sent to Requester _____

Memorial Day 2002



Attention! Attention! Attention!

Do you have any new programs or other school information you would like to share with the membership?

Is your Regional Association doing something new and innovative to recruit members or present exceptional continuing education programs?

As a member do you have something exciting happening in your hospital or information that is important to all of your colleagues that you would like to share?

FOCUS is always looking for information to publish. You can contact the Central Office, the President, or the Editor of FOCUS with your ideas or contributions.

It is your Newsletter. Help us give you what you want. Contribute!

Marsha Allen, RHIA
MHIMA Central Office



MHIMA New Members

Lisa Ashbrook.....	Bruce Crossing
Patricia Bolanos	Peck
Kamelia Bowie.....	Grand Blanc
Fred Bustin	Milan
Janice Chahil	Dearborn Heights
Cheryl Cook	Roseville
Patricia Fiscelli	Warren
Mildred Gibboney.....	Royal Oak
Nancy Greener.....	Rochester Hills
Betty Hagedorn	Montague
Sandra Hanna	Algonac
Thomas Hart	Tecumseh
Amy Hodges.....	Cement City
Rachel Holek	Durand
Cindy Hornfeck	Farmington Hills
Nora Judis	Grand Rapids
Julie Lambitz	Swartz Creek
Carole LaPointe.....	Baraga
Becky Lewis.....	Flint
Laurie Lindahl.....	Rapid River
Ellen Ness	Luna Pier
Angela Piasecki.....	Wyandotte
Jessica Prins	Jackson
Lauri Reinhardt	Blissfield
Linda Slank	Clinton Township
Bonnie Talaski	Alpena
Melanie VanKampen	Grand Rapids
Janet Vizkelety	North Olmstead, OH
Joanne Vollmar	Curtice, OH
Kimberly Walker.....	Flint
Peter Walsworth	Grand Rapids
Margaret Warren.....	Woodhaven
Mia York	Auburn Hills

Corporate Members 2002-2003

DATE	CORPORATE NAME/ADDRESS/PHONE	CONTACT PERSON	WEBSITE
7/93	VAN BELKUM VOICE & DATA SYSTEMS 535 Cascade West Parkway SE Grand Rapids, MI 49546	Brian Elling Vice President (800) 968-2740	www.vanbelkum.com
3/94	THE RYBAR GROUP, INC. 1495 Dauner Road Fenton, MI 48430-1561	Carol A. Jennings, MPA, RHIA (810) 750-6822	
10/96	DICTAPHONE CORPORATION 45833 Lathum Drive Novi, MI 48374	David W. Quinley Healthcare Specialist (888) 843-6266	www.Dictaphone.com
8/98	DOLBEY AND COMPANY 4222 Pontiac Lake Rd. Waterford, MI 48328	Mark Kuenzel Regional Vice President (888) 384-7828 Ext. 155	www.dolbeyco.com
6/99	TRANSOLUTIONS, INC. 18 North Waukegon Road Suite 100, Lake Bluff, IL 60044	Att: Sales (888) 286-8340 Fax (847) 234-3471	www.transolutions.net
3/01	CRESCENDO SYSTEMS, INC. 5305 Notre-Dame West, Suite 200 Laval, Quebec H7W4T8	Costa Mandilaras President (450) 873-8029	www.crescendo.ca
5/01	BUSINESS INFORMATION SYSTEMS, INC. 18481 W. 10 Mile Rd. Southfield, MI 48075	Roland Leonard Regional Sales Mgr. (248) 557-8200 Ext. 127	www.misbis.com
5/01	GT PROFILE 3820 Cass Rd. Traverse City, MI 49684	Dennis Brown (231) 947-4717	www.GTProFile.com
5/01	GT PROFILE 3820 Cass Rd. Traverse City, MI 49684	Dennis Brown (231) 947-4717	www.GTProFile.com
3/01	REX CORPORATION 1840 N. Michigan Ave. Saginaw, MI 48602	Terianne Carey President (989) 753-4450	www.rexdms.com
4/00	3M HEALTH INFORMATION SYSTEMS PO Box 206 Metamora, MI 48455	Karen Ruehl Account Representative (810) 678-3574	www.mmm.com
4/02	IRON MOUNTAIN HEALTH INFORMATION SERVICES 2097 Bart Warren, MI 48091	Cindi Boettcher Branch Manager (586) 758-4400, Ext. 128	www.ironmountain.com

MICHIGAN HEALTH INFORMATION MANAGEMENT ASSOCIATION

BOARD OF DIRECTORS 2001-2002

PRESIDENT
Peggy Chapo, RHIA
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 Fax: 248-471-8508
 E-mail: pchapo@botsford.org

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 Home: 810-653-3765
 Fax: 810-766-4049
 E-mail: amy.savage@baker.edu

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 E-mail: mcannc@trinity-health.org

SECRETARY/TREASURER
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 E-mail: lesliemack@mackconsulting.com

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 Email: marsha@mhima.org

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 Fax: 989-497-7555
 Email: mrant@saintmarys-saginaw.org

MHIMA REGIONAL ASSOCIATIONS

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Chris McCann, RHIA - 2nd Year
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 E-mail: mcannc@trinity-health.org

Carol Jaeger, RHIA - 2nd Year
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 Fax: 810-750-6733
 E-mail: theybargroup.com

Rochelle Cooper, RHIA - 1st Year
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 E-mail: rcooper@smtpgw.beaumont.edu

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 Home: 248-879-7993
 Fax: 248-551-0298

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 Fax: 248-471-8508

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 Fax: 810-750-6733

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 Work: 248-471-8180
 Home: 734-397-7056
 Fax: 248-471-8508

MID MICHIGAN -----

MICHIANA -----

NORTH CENTRAL -----

NORTHWEST -----

SOUTHEAST -----

SOUTHWEST -----

UPPER PENINSULA -----

PRESIDENT

Joyce Simons, RHIT
 Work: 989-497-2500
 Home: 989-865-6679
 Fax: 989-791-2855

Paul Rice, RHIT
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 Home: 219-283-1209

Bonnie J. Owens, RHIT
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 Home: 517-345-3445

Mari Dunlin, RHIT
 Work: 231-739-9492

Karen Cole, RHIT
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 Home: 734-202-9566

Christine Kocsis, RHIT
 Work: 616-226-5706
 Home: 616-427-7092

Beverly Achatz, RHIT
 Work: 906-485-2150



MICHIGAN HEALTH INFORMATION
MANAGEMENT ASSOCIATION

Calendar of Events

DATE	LOCATION	SPONSOR	TOPIC	CONTACT	PHONE
5/13-14/02	Hol. Inn Fairlane, Dearborn	MHIMA	Privacy Training	AHIMA	312-233-1100
5/15/02	Hol. Inn Fairlane, Dearborn	MHIMA	Board Meeting	Central Office	231-878-9717
5/15-17/02	Hol. Inn Fairlane, Dearborn	MHIMA	Annual Meeting	Central Office	231-767-9717
June	Detroit Area	MHIMA	Best Practices in HIM	Central Office	231-767-9717
07/26/02	MHA , Lansing Michigan	MHIMA	Leadership Conference/Board Meeting	Central Office	231-767-9717
9/13/02	MHA, Lansing, Michigan	MHIMA	Board Meeting	Central Office	231-767-9717
9/21-26/02	San Francisco, California	AHIMA	Annual Meeting and Exhibit	AHIMA	www.ahima.org
11/15/02	MHA, Lansing, Michigan	MHIMA	Board Meeting	Central Office	231-767-9717
1/17/03	MHA, Lansing, Michigan	MHIMA	Board Meeting	Central Office	231-767-9717
3/14/03	MHA, Lansing, Michigan	MHIMA	Board Meeting	Central Office	231-767-9717
5/14-16/03	Traverse City	MHIMA	Annual Meeting	Central Office	231-767-9717
10/18-23/03	Minneapolis, Minnesota	AHIMA	Annual Meeting and Exhibit	AHIMA	www.ahima.org
10/9-14/04	Washington DC	AHIMA	Annual Meeting and Exhibit/IFHRO Health Rec. Cong.	AHIMA	www.ahima.org

DO WE HAVE YOUR E-MAIL ADDRESS?

If not, please e-mail Marsha Allen in the Central Office at Marsha@MHIMA.org



MHIMA Website!

Check Out the new MHIMA website at MHIMA.org!

There is now a job bank. You can post your resume or any jobs you may have open at no cost if you are a member. We are working on the charges for posting jobs for those who are non-members.

Let us know what you think. You can contact the central office through the website. Be sure to let us know what your email address is if you have not already sent it to us.

Any suggestions for improvements or additions to the site will be considered. We are working out a few bugs, but the new site should be much easier to use and beneficial to all members.

Marsha Allen, RHIA
Central Office Coordinator
marsha@mhima.org

MHIMA

Michigan Health Information
Management Association
3311 David Bee
Muskegon, MI 49444

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