

WILLIAM CAREY UNIVERSITY

COLLEGE OF HEALTH

SCIENCES

HEALTH INFORMATION

MANAGEMENT



UNDERGRADUATE STUDENT

HANDBOOK

2018-2020

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STUDENT RESPONSIBILITY FOR HANDBOOK INFORMATION

The purpose of this handbook is to serve as a guide for undergraduate students enrolled in the Health Information Management (HIM) program. It is used as a supplement to *The Translation* and the *WCU Undergraduate Catalog*. It contains information about administrative and academic policies, curriculum, and course work.

As a student, you are responsible for reading this handbook in its entirety. As part of admission to the Health Information Management program, this means that you are accountable for your activities on campus and during Professional Practice Experience. A breach of WCU or Health Information Management program policies may result in probation, suspension, or expulsion from the program or college depending on the nature of the incident. As a student, the safety and privacy of the client information you are privileged to work with is of the highest priority in the Health Information Management program of education. You are bound by the ethics of health information management.

As a student, you are responsible for payment of any medical treatment necessary as a result of any injury, or exposure to disease associated with professional practice experience.

Failure to read the information will not be considered an excuse for noncompliance with this handbook or *The Translation* and the *WCU Undergraduate Catalog*.

William Carey University reserves the right to change the policies or revise the information contained in this handbook.

The faculty has adopted rules and policies contained in this handbook. When a student finds that extenuating circumstances might justify a waiver of a particular requirement, the student may petition the Dean of the College of Health Sciences for a waiver.

Please initial and sign the Acknowledgement Statements, Appendix A, and submit it to your advisor. **NOTE:** This handbook does not replace *The Translation* and the *WCU Undergraduate Catalog*

WELCOME

Welcome to the Health Information Management Program at William Carey University! Your decision to become a part of the Health Information Management (HIM) profession will prove to be rewarding as it is one of the fastest growing occupations in one of the fastest growing industries, a HIM career places you right where the expanding arena of healthcare meets the cutting edge of information technology.

WHAT IS HEALTH INFORMATION MANAGEMENT?

HIM professionals play a critical role in maintaining, collecting and analyzing the data that doctors, nurses and other healthcare providers rely on to deliver quality healthcare. They are experts in managing patient health information and medical records, administering computer information systems and coding the diagnosis and procedures for healthcare services provided to patients.

As the world moves from a paper based to an electronic society, so does the healthcare field. The health care community is working to develop an electronic health patient record. The HIM profession is at the forefront of this movement. Advances in medical science, legislature reforms, computerization, and the need to manage health care delivery systems and healthcare costs have enhanced the roles of the health information manager.

HIM professionals work in a multitude of settings throughout the healthcare industry including hospitals, physician offices and clinics, long-term care facilities, insurance companies, government agencies and home care providers. Degreed HIM graduates may hold positions as a compliance officer, data quality manager, educator, healthcare consumer advocate, privacy/security officer, project manager, reimbursement or revenue cycle manager, information systems manager and data sets/nomenclature/classification standards manager to name a few.

QUICK FACTS ABOUT THE PROGRAM:

- Once accepted into the program, it takes 18 months to complete for students attending full-time.
- Graduates receive a Bachelor's of Science Degree upon successful completion of program requirements.
- William Carey University's HIM program is accredited by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM).
- Because our HIM program is accredited, students are eligible to sit the national certification examination for the Registered Health Information Administrators (RHIA).

CLASS ATTENDANCE AND PREPARATION

In addition to the requirements of the College of Health Sciences, the Health Information Management program follows the following guidelines for attendance and preparation:

1) Absenteeism – Professional Practice Experiences (PPE)

- a) The student is required to attend all scheduled professional practice experiences.
- b) Absence due to illness, death in the immediate family, or extreme circumstances will be handled on an individual basis provided the instructor is notified of the need to be absent **PRIOR TO** the clinical/laboratory experience.
- c) Faculty members have the right to request appropriate documentation regarding an absence. All absences will be reported to the Program Head on each campus. The Program Head has the right to intervene if he/she notes a pattern to reported absences for any student.
- d) When absent from professional practice experience, the student will be held responsible for any announcements or materials given that day. The student is also responsible for any assignments due the day of an absence.
- e) Absence from PPE may result in failure to successfully pass all required components. Alternate projects may be assigned at the discretion of the PPE instructor provided the maximum number of absences has not been attained.

2) Tardiness – Classroom/Professional Practice Experience

- a) Tardiness is defined as not being in the classroom chair or in the specified clinical area at the scheduled time.

- b) Tardiness and leaving class/clinical/laboratory early are considered unprofessional behaviors. Three tardies and/or early departures are equivalent to one absence.
 - c) Classroom doors may be closed and locked at the beginning of class. Students must then wait until a class break to enter the room.
 - d) Tardiness in the PPE area may result in an unsatisfactory grade for this item on the PPE evaluation form. Two grades of unsatisfactory for any item on the PPE evaluation form results in course failure.
 - e) Students exhibiting a pattern of tardiness will be referred to the Program Head.
- 3) Professional Practice Experience (PPE) Preparation and Safety
- a) Students are expected to come prepared to each professional practice experience. At any time inadequate preparation is demonstrated, the student will be considered unsafe for PPE performance and will not be allowed to remain at the PPE site. Failure to be prepared will result in an unsatisfactory for the day. The student will be referred to the Program Head. Two grades of unsatisfactory for any item on the PPE evaluation form will result in a grade of “F” for the course.

CURRICULUM

The HIM 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 by the department, where appropriate. A variety of instructional methods are used to facilitate your achievement of an acceptable level of performance for a given competency. If the set level of performance is not met, the student may be asked to repeat the activity in order to become a competent entry-level practitioner.

The professional curriculum builds on general education and prerequisite coursework and is designed to provide knowledge and skills in the following content domains as defined by the AHIMA 2014 Curriculum Competencies and Knowledge Clusters for HIM Education at the Baccalaureate Degree.

Health Data Management

- Health Data Structure, Content and Standards
- Healthcare Information Requirements and Standards
- Clinical Classification Systems
- Reimbursement Methodologies

Health Statistics, Biomedical Research and Quality Management

- Healthcare Statistics and Research
- Quality Management and Performance Improvement

Health Services Organization and Delivery

- Healthcare Delivery Systems
- Healthcare Privacy, Confidentiality, Legal, and Ethical Issues

Information Technology and Systems

- Information and Communication Technologies
- Information Systems
- Data Security

Organization and Management

- Human Resources Management
- Strategic Planning and Organizational Development

The Health Information Management program is an eight (8) Trimester, 60 semester credit hour program. Successful graduates will receive a Bachelor's of Science Degree in Health Information Management.

The program sequence begins every year in the fall trimester. Students waiting to enter the program may begin general education or other preparatory coursework prior to the spring semester. The program is designed for student who may or may not have experience in a health-

related profession. The program is open to any person with a minimum cumulative GPA of 2.6 who desires to become part of a dynamic healthcare team.

The curriculum begins with introductory courses and expands on the student's knowledge base as they progress through the program. Since the program expands on a student's knowledge-base, there are prerequisites required for some courses. Students need to work with their assigned advisor to ensure proper registration in courses.

DRESS IN THE CLINICAL SETTING

When preparing for PPE assignments at the clinical site, the student will wear a 3-button HIM WCU logo polo-style shirt with either blank or khaki dress pants or skirts, and name tag. Shorts, jeans, or capri length pants are not to be worn in the clinical environment. Tank tops, flip flops, or underwear as outerwear is unacceptable. Shoes will be low heeled and quiet. Appropriate underwear will be worn. Uniforms associated with employment should not be worn to the clinical site.

Female Students. Skirt length must be at least one inch below the knee. Underwear must be worn and not visible through uniform.

Male Students. Pants must touch the tops of the shoe and must not have a cuff. Undershirts worn under tops must be plain white, free from any type decoration or design. Underwear must be worn and should not be visible through the uniform.

FACULTY AND STUDENT RESPONSIBILITIES

FACULTY RESPONSIBILITIES:

In order to provide students with optimum opportunities for success in the program, the HIM faculty pledges that we will:

- Be prepared for each class, with relevant materials.
- Be available to students, with adequate notice, when a conference is requested.
- Provide a classroom environment conducive to learning.
- Provide students with course syllabi during the first week of each semester.

- Prepare students for success in the health information management profession by basing program content on AHIMA's model curricula for health information technology programs, and on the Domains and Subdomains for the Registered Health Information Administrator's certification exam.

STUDENT RESPONSIBILITIES

Students in the HIM program are responsible for:

- Respecting the rights of fellow students to a classroom environment free from disruptive behaviors.
- Communicating problems or difficulty with course content to the instructor in a timely fashion.
- Adhering to program, School of Nursing, college and clinical site policies, rules and regulations.
- Preparing for each class by completing all assignments, reading assigned material, and answering objectives and study guides in a timely fashion.
- Maintaining prompt, regular attendance in all classes and at the clinical rotations.
- Notifying the instructor when absence is necessary.
- Obtaining and submitting missed work following any absence.

The HIM program is a highly technical program, covering complex skills and applications. Most of the courses are taught in an online and hybrid format during the day-time hours. The number of hours the student will attend lecture classes, labs, and clinicals each week varies from 12 to 30. The student can expect extensive assignments in most courses. For this reason, it is recommended that when possible, students limit employment to a maximum of 20 hours per week.

SKILLS AND QUALIFICATIONS

Students must demonstrate good problem-solving and critical thinking skills and must be able to demonstrate the following requirements to accomplish health information management job essentials:

- **Visual acuity** with corrective lenses to read physicians' and health care professionals' documentation; computer forms and views on-screen and in printed formats; and small print in diagnostic and procedural code manuals
- **Hearing ability** with auditory aids to understand the normal speaking voice without viewing the speaker's face
- **Physical ability** to stand and/or sit for prolonged time periods. Persons with a previous history of carpal tunnel syndrome should be aware that most HIM functions require working at a computer for extended periods.
- **Communicate effectively in grammatically correct verbal English** by speaking clearly, understandably, and succinctly when communicating with faculty, students, patients, medical staff, administrators, and health information management personnel
- **Communicate effectively in grammatically correct written English** by writing legibly and succinctly on class assignments, clinical assignments, and in the workplace.
- **Manual dexterity** to utilize computer keyboards and other office equipment. **Students who are not proficient on a computer keyboard and/or with basic word processing functions should take a keyboarding class and/or a microcomputer applications course before applying to the program.**
- **Function safely under stressful conditions** with the ability to adapt to ever-changing health care systems and regulations.

GRADING

1. Grades during the term will be written down to the second decimal point.
2. The final grade can be rounded with 76.50% and above becoming 77% and 76.4% and below becoming 76%.
3. Clinical courses identified by course faculty may have an additional 5% devoted to a graded assignment. A final test average of 77% (76.50%) must be achieved before the additional 5% is added.

4. Non-clinical courses may have graded assignments other than course test worth more than 10% of the final grade. A grade of 77% (76.50%) must be achieved to pass the course.

GRADUATION

To be eligible for the degree of Bachelor of Science in Health Information Management, the student must have fulfilled all requirements of the university for graduation and passed all other courses with at least a “C” and be recommended by the dean and faculty. Graduates are eligible to apply to write the registered health information administrator examination (RHIA) following successful completion of the curriculum.

General

1. The student is responsible for filing for degree and paying the required fee at the time specified by the Registrar’s Office. Guidelines for completing the application are online at the Registrar’s website. Additional guidance will be provided by the student’s advisor and/or the Program Director.
2. An overall grade point average (GPA) of 2.0 and a minimum grade of C in each HIM course and each support course are required for eligibility for graduation. See university catalog for additional requirements for graduation.
3. Tuition and fees must be paid on or before deferred payment date. If paid after the deferred payment due date, the graduating student must pay the balance of the account plus the late fee by cashier’s check or money order. Personal checks will not be accepted after deferred payment date.

Application for Degree

1. Students have six years from the date of the first course taken at William Carey University to complete the degree.
2. The date of the catalog under which you wish to graduate must be correctly identified.

3. The application must be neatly typed. All transfer hours must have abbreviations of university with WCU course numbers. You must turn in one original and one copy. If you wish to keep a copy, make another one for yourself.
4. The application for degree is then to be reviewed by your program head. The Program Head will need at least one week to review and sign the application.
5. Please put the name you will use at graduation on the form. The name you type on the application will appear on your diploma.
6. Students who are candidates for May graduation are required to file applications for their degrees in the Registrar's office by October 15. Candidates for August graduation must file by March 31. Late applications will be accepted up to 30 days after the respective deadlines. There will be a \$100 late fee in addition to the graduation fee. It is the student's final responsibility for satisfying requirements for a degree.
7. Instructions for completing the application for degree are located at the Registrar's website. The student should make an appointment with his/her advisor to finalize the degree application.

**WILLIAM CAREY UNIVERSITY
APPLICATION FOR DEGREE**

Name: _____ Degree: **BS** Expects to Graduate: _____
(Enter official name only to appear on diploma.)

Today's Date: _____ Catalog Date: _____ ID #: _____

CORE CURRICULUM				MAJOR: HIM			ELECTIVES								
COURSE	#	Hr	Gr	Course #	Hr	Gr	Course #	Hr	Gr						
Religion	101	3		310	3										
	102	3													
English	101	3								311	4				
	102	3													
English Lit.	211	3								312	4				
History 101 and 102 OR 201 and 202		3								313	4				
		3													
Mathematics	131	3								314	3				
ART, MUS, or THE Appreciation		3								315	4				
Physical Activity PED or HEA 300		1								316	4				
	300	3		317	5										
Communication 101 or 202		3		405	4										
				406	3										
Statistics MAT/BUS/HAE/ PSY		3		407	3										
		4													
Sociology	101	3		401	3										
BIO or CHE	101	4		402	4										
	234	4		408	3										
	235	4		409	3										
	260	4		410	6										
Philosophy, Logic or English Lit	201 or 250 or —	3													

EXCEPTIONS/SUBSTITUTIONS AUTHORIZED:

Applicant Signature: _____ Date: _____

Program Director: _____ Date: _____

Registrar's Signature: _____ Date: _____

HEALTH STATUS REQUIREMENTS

The College of Health Sciences requires students to provide evidence of continued health status compliance. These requirements must be fulfilled in order for students to progress/remain in the program.

All students must submit the results of a current TB skin test prior to practicum assignment. Students must provide evidence of current immunizations as required by the university in the current *Undergraduate Catalog*.

The ultimate responsibility for compliance, and the appropriate documentation, with medical requirements lies with the student. Failure to have up-to-date health records will result in the inability to attend the clinical portion of a course and ultimately failure in the course. Any clinical missed because of failure to turn in skin test results will result in “Unsatisfactory” evaluation for that day and the clinical time CANNOT be made up.

HIPAA COMPLIANCE AND OTHER CONFIDENTIALITY REQUIREMENTS

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 is federal legislation dealing with the portability, privacy, and security of a person’s health information. The Health Information Management program through the HIM courses, will cover the HIPAA regulations thoroughly prior to the first scheduled practicum.

Students MUST comply with all federal and state laws and facility guidelines regarding patient confidentiality. Students are strictly forbidden from disclosing **ANY** protected health information concerning patients at clinical sites and facilities hosting off-campus tours / classes.

Some facilities require HIPAA training to be completed prior to the first day of clinical. Some require students to wear a facility ID badge in addition to or instead of the WCU ID badge. Students MUST comply with these requirements.

Each student will sign a Confidentiality Agreement agreeing to hold any and all medical information learned during the course of academic and clinical activities in strictest confidence,

and in understanding that the violation of confidentiality will result in dismissal from the academic program. Students should also be aware that medical information is confidential under state and federal laws and improper disclosures may subject the student to civil and/or criminal liability. Return the signed acknowledgement form to the administrative assistant to the Program Head. This acknowledgement form is kept in the student's folder.

INCIDENT REPORTING

Students involved in an incident (fall, injury, etc.) at the clinic site should complete a facility incident report form AND a WCU Injury Report form.

Note: A student failing to comply with WCU/HIM guidelines described in this document as they pertain to the clinical setting, or with clinical site policies, may be instructed to leave the clinical site immediately. Failure to comply with the policies may result in a grade of "F" for the course.

MISSION

The primary purpose of the program is to provide the academic foundation necessary to prepare students to be competent health information management professionals and meet the entry-level competencies that will enable them to apply management and problem-solving skills to every aspect of a medical/health record information system, regardless of the setting or environment. In addition, to provide continuing education, and consultation for health care professional in our community.

PHILOSOPHY

It is our belief that excellence in teaching, research, continuing service to the community, an emphasis on ethical, professional behavior, a high quality academic program that offers innovative curricula and the latest advancements in technology, prepares students for new workforce careers in a global economy. We educate and empower a diverse student body to lead by the force of its ideas to become critical, creative and compassionate citizens of the community and leaders of the world, with a heart for lifelong learning and dedicated public service.

PROFESSIONAL ORGANIZATIONS

American Health Information Management Association (AHIMA) - A national association of health information professionals. Health Information Management students are required to obtain student membership. As part of their membership, students will receive the *Journal of AHIMA*, have use of FORE Resources and access to the AHIMA website. Students need an AHIMA membership to apply for MSHIMA scholarships. An AHIMA membership will reduce the student cost to attend the state meeting and to write the certification examination for the RHIA.

Mississippi Health Information Management Association (MSHIMA) - Student membership of this organization is provided with membership through AHIMA. Students are eligible to attend business and educational meetings of MSHIMA, but are not be entitled to vote, nor to serve as a member of the Board of Directors, committee chairperson, committee member or delegate of MSHIMA. Registration for the annual MSHIMA meeting is provided to the student at reduced cost. Costs of the state meeting are the responsibility of the student unless otherwise noted.

This is the beginning of what will hopefully be a long and successful career in HIM. A significant component of professional success is continuing education and networking among colleagues. Each June, the MSHIMA sponsors a statewide professional conference. Students in the HIM program are required to attend this conference. The faculty will inform you which days you are to attend. Students are responsible to pay their own conference registration fees. There may be opportunities to volunteer in order to waive the registration fee. However, please be advised that it is recommended to set money aside each week in order to save the amount needed by the first of April.

PROFESSIONAL PRACTICE EXPERIENCE

Much of the Health Information Technology program consists of classroom/online-based instruction. The other component is Professional Practice Experience (PPE). In PPE, students will apply the knowledge learned to skills necessary in the health settings.

Students enrolled in the Health Information Technology program are required to complete PPE. These courses contain practical experience in health information processes. All students have, as

part of the curriculum, learning experiences in various health care facilities such as hospitals, ambulatory/physician clinics, correctional facilities, nursing homes, and other related health care providers. This experience gives students the opportunity to apply that knowledge that has been acquired in the classroom to real life situations. The experience will look at the knowledge, skills, and attitudes of the student.

GUIDELINES FOR STUDENTS AT PRACTICUM SITES

A. HOURS AT PRACTICUM SITE

The student will follow the schedule established by the director/manager of the practicum site or designee. Required hours at the practicum site will be determined by the Clinical Coordinator (Now handled by HIM Program Director) in conjunction with the practicum site director/manager prior to start of the practicum experience. The student's day should coincide as much as possible with the director's workday or the workday of the individual supervising the student during a particular assignment.

B. RULES & REGULATIONS OF THE PRACTICUM SITE:

1. During the practicum experience the student will be under the jurisdiction and responsibility of the practicum site director or his/her designee.
2. The student will comply with all policies, rules and regulations of the practicum site and HIM management.
3. The student will observe application of theory and participate in the functioning of various systems, procedures, and functions and practices at the practicum site.
4. The student will recognize that there are various acceptable alternative methods, procedures, and practices to perform HIM functions. The selection of these will be dictated by circumstances encountered in a particular situation.
5. Rotation schedules and times allotted for specific assignments will be given to the student by the practicum site director or his/her designee. The student will be responsible for following his/her own schedule and for fulfilling at least the minimum hour requirement specified. Any deviation from the schedule must be authorized by the practicum site director or his/her designee.
6. Any special duties, projects, or reports assigned by the practicum site director or his/her designee are considered to be a part of the practicum experience and will be used by the site director in evaluation of the student's performance.
7. The student is cautioned to remember that he/she is a guest of the HIM Department and/or practicum site and shall, at all times, conduct himself/herself with the maturity and demonstrate professional conduct throughout the course of the practicum.
8. Students cannot be substituted for paid staff or take responsibility or the place of "qualified" staff while at the practicum site. Students cannot complete their practicum experience at a site in which they are employed.

9. Due to conflict of interest students will not be placed at practicum sites where they will be under direct supervision of family members, relatives of family members, or previous employers.
10. Each student is responsible for the cost incurred during the practicum experience including but not limited to lodging, food, transportation, and miscellaneous personal items.
11. Students cannot receive compensation for clinical or practicum experiences

C. **HEALTH REQUIREMENTS**

It is highly recommended that the students maintain health insurance in addition to the limited liability health insurance offered to William Carey full-time students enrolled for clinical hours. Some of the practicum sites may require the student to submit evidence of health insurance prior to the beginning of the internship. Students not meeting the requirements of the practicum site will not be allowed to complete their practicum experience as scheduled and may not be allowed to reschedule until the next practicum cycle. The facilities used for the practicum experience are not responsible for any medical costs incurred by the student while at the practicum site. While these facilities may provide emergency health care services to the students, the costs of the services are the responsibility of the students. Neither the HIM Department nor William Carey, in general, are responsible for health expenses incurred by the student during their practicum experience.

Due to new Joint Commission health requirements for non-employees, practicum sites may request that the student undergo a physical or have their physician write a letter stating that the student is in good health status. See HIM Program Director for additional information.

All students must have a History and Physical Form Completed and submitted prior to being placed at site.

D. **BACKGROUND INVESTIGATION CHECKS**

Practicum sites require background investigation checks on students to insure the safety of the patients and staff they will interact with. Students will be required to order background check in sufficient time for it to be reviewed by the practicum site prior to starting your rotation. **All Students enrolled in HIM program must have a clearance of a criminal background check prior to entering the clinical setting. All costs associated with the criminal background check are the responsibility of the student.**

E. **ATTENDANCE/PUNCTUALITY/ABSENCES**

Absenteeism and tardiness are considered unprofessional and undesirable traits. While there may be times when a student may be absent due to illness or other valid reasons, it is the student's responsibility to make up the time.

- If an emergency situation arises and the student will be late, the practicum site director or his/her designee must be notified within the first thirty (30) minutes of the day. The student must provide practicum site director or his/her designee with an estimated time of arrival.
- If an emergency situation arises and the student must be absent from the practicum site, the student must immediately notify the practicum site director and the Program Director of the HIM Department. It is the student's responsibility to make arrangements to make up missed time.
- Justification for absences must be provided by presenting supporting documentation or evidence for the day or days missed. Examples of legitimate excuses include: 1) proof of hospitalization; 2) physician's written excuse; 3) copy of obituary for a death; 4) copy of summons for jury duty; and 5) copy of accident report for motor vehicle accident.
- If the student has prior knowledge that he/she will miss any time, the student must submit justification in advance of the absence. All missed days, even legitimate, will be made up during a time agreed upon with the practicum site director/manager. This could include weekends or extended hours. Should the student not abide by this tardy/absence policy, points will be taken off the final practicum grade, up to and including one or more letter grades, as deemed appropriate by Program Director.
- Do not ask to leave early – Students are expected to complete a certain number of hours in the field to fulfill the requirements of the practicum. If a student must depart early, he/she must make arrangements to with site director/ manager or designee to make up the missed hours.

F. TERMINATION FROM PRACTICUM SITE

Students who are terminated from the practicum site due to excessive absence and/or tardy, for discipline reasons, or poor performance, are responsible for finding another practicum site for that semester. Failure to do so will result in failing the course. The Program Director nor William Carey has no obligation to place a student terminated from a practicum site at another practicum site.

Should any situations/problems arise that the student feels they are unable to handle, the site director should be informed and request assistance. The Program Director can be reached via work phone or by e-mail.

G. APPEARANCE

The image you project is influenced by your personal appearance. Consequently, to be neatly groomed and tastefully dressed at all times is a must in our profession. Your wardrobe should be tastefully coordinated, neat, and clean.

Business attire *must* be worn when visiting health care facilities or engaging in practicum assignments at a site.

- Adhere to the facility's dress code. Dress in suitable business casual or office attire.
 - For example, women should wear blouses and skirts, dresses, or dress slacks. Men should wear dress shirts, ties, and dress slacks with socks. No jeans, shorts, sneakers, or t-shirts should be worn. Avoid extremes in jewelry, hairstyles and color, body piercing, tattoos, and make-up. Exposed body piercing must be removed or covered up. Tattoos should be covered up.
 - Students working in close proximity with professional staff and as such must be aware of their personal hygiene. Issues such as strong perfume/colognes, tobacco order, deodorant issues, and the like must be considered.
- Students should wear identification badge at all times, if provided.
- Students who do not comply with site requirements may be subject to appropriate action by the site directors/clinical faculty.
- If there are questions regarding proper attire and appearance, students should discuss them with the HIM Program Director.

H. **PROFESSIONAL COMMUNICATION**

- Students should be cognizant of the professional titles used at the practicum site. Medical professionals, patients, and coworkers should be addressed in the appropriate manner at all times.
- Maintain professional relationships by avoiding personal discussions.
- Students are encouraged to send personal, handwritten thank-you note to their practicum sites and specific individuals who contributed to their experience.

I. **CELL PHONES & COMPUTER USAGE**

Students **MAY NOT** use cell phones while at the practicum site. Students may be contacted at the practicum site in the case of an emergency through normal phone lines at the practicum site. Make personal calls and texts only at breaks and lunch times. Use of electronic devices such as MP3 players, pagers, and iPods are generally considered to be unprofessional.

Do not surf the Web during working hours, including checking e-mails and logging into social networking sites such as Facebook, Instagram, etc.

J. **ASSIGNMENTS/PROJECTS**

- Students should demonstrate initiative by completing projects/activities as assigned.
- If you complete your assignment early, ask for additional work rather than waiting for someone to notice.

- There may be times when clinical personnel are unavailable to work with you. During those times use initiative to interview staff, offer assistance to staff or sit with staff such as a coder, maintain your log of activities, write in your journal, or review policy manuals. Keep yourself busy.

The type of Assignments that may be included:

- **ADMISSIONS/DISCHARGE PROCEDURES**
- **QUANTITATIVE/QUALITATIVES**
- **FILING PROCEDURES**
- **RECORD TRACKING**
- **CODING**
- **RELEASE OF INFORMATION PROCEDURES/STATISTICS:**
- **PERFORMANCE IMPROVEMENT**
- **COMPUTER APPLICATION SKILLS**
- **OTHER PROJECTS AS ASSIGNED.**

K. **CONFIDENTIALITY**

Students must respect the confidentiality of patient information. Students will be expected to abide by William Carey’s Code of Student Conduct, AHIMA’s Code of Ethics, and HIPAA rules. Students will be required to sign the HIM Department’s “Student Contract & Confidentiality Statement for Professional Practice Experience” form.

L. **CONFERENCES**

For the management internship there will be a formal conference with the student at the beginning, as well as throughout the internship, to discuss activities, projects, problems, etc. A summation conference during which the student is given an idea of individual strengths, weaknesses, and overall performance should be scheduled some time prior to the end of the management internship period.

For the clinical experience, students will be evaluated at the end of the experience by the HIM director/manager or his/her designee.

M. **STUDENT LIMITED LIABILITY INSURANCE**

Student **must** purchase limited liability insurance through BXS Insurance. Student must be a member of AHIMA to purchase the insurance. The insurance provides \$1,000,000 of insurance coverage per event, up to 3,000,000 per year. The Clinical Coordinator will provide the practice sites with proof of such insurance coverage.

AHIMA student membership is \$49. Go to www.ahima.org to join.
Professional liability insurance is \$15 per calendar year.

STUDENT RESPONSIBILITIES DURING PROFESSIONAL PRACTICE EXPERIENCE

1. Student shall conduct him/herself in accordance with the rules, regulations, and procedures governing other employees of the Health Care Facilities. This includes being respectful of the facility and its employees.
2. Student is responsible for his/her own transportation to and from the Professional Practice Experience site. The student may be required to travel long distances so it is important that dependable transportation is available. The student is responsible for all costs related to transportation.
3. Student is responsible for food and lodging expenses associated with professional practice experience.
4. Student shall perform job functions as agreed upon by the supervisor of the PPE site and the WCU Professional Practice Experience instructor. Students need to be prepared and ready to work on assigned duties.
5. The student is responsible for contacting the PPE supervisor and the WCU Professional Practice Experience instructor at least **two hours** prior to the scheduled experience in case of absence or arriving late. Time must be made up for any absence.
6. The student shall understand that Professional Practice Experience time is unpaid.
7. The confidentiality statement signed at the beginning of the student's course of education is in effect during the entire Professional Practice Experience. In addition, violations of the confidentiality statement and guidelines may result in immediate dismissal from the program. The success of our practice site experiences depends on the student's conduct and ability to maintain patient confidentiality.
8. Students involved in a hospital and/or clinical agency incident reports are to be described in full and signed by the student and clinical supervisor.
9. Students should provide the Professional Practice Experience site supervisor a listing of his/her home phone, address, and emergency contact.

10. Failure to comply with the above will result in the student receiving an **unsatisfactory** evaluation for the practice day and could lead to failure of the course. The faculty reserves the right to determine if a practice make-up experience is warranted.

UNACCEPTABLE BEHAVIORS AT PROFESSIONAL PRACTICE EXPERIENCE

1. Inappropriate disclosures about patients, staff, students, physicians, or other personnel of the facility.
2. Dishonest or immoral behavior.
3. Failure to treat any patient, staff, student, physician, or other personnel of the facility with respect.
4. Failing to obey facility safety rules, (i.e. standing on chairs)
5. Failing to meet scheduled commitments such as arriving late, asking to leave early, extended breaks, long lunch, or excessive absenteeism.
6. Sleeping.
7. Conducting personal business with the use of facility equipment: personal copies, Internet browsing, use of social networking sites.
8. Use of cell phones during scheduled work hours.
9. Smoking in unauthorized areas (Assuming the student has a practicum in a state that allows designated smoking areas on business grounds).
10. Using obscene, foul, or intolerant/insensitive language.
11. Use of alcohol or drugs or under the influences of alcohol or drugs at the practicum site.
12. Threatening behavior to any person.
13. Any type of discrimination or harassment because of race, gender, age, disability, religion, or sexual orientation.

PROFESSIONAL PRACTICE EXPERIENCE GRADING

1. Professional Practice Experience evaluation is based upon performance and attendance in the clinical areas according to Domains, Subdomains, and Tasks for Registered Health Information Administrators.
2. Students are to attend Professional Practice Experience assignments in order to meet the objectives of the course.

3. Professional Practice Experience performance is graded on a letter grade basis. When a student achieves a fail, (D or F) in a site, he/she will not be allowed to register for another Professional Practice Experience until the course has been repeated.
4. Each student is to be evaluated and notified in writing if he/she is doing unsatisfactory work in any area. These students will be notified in writing of their standing.
5. Any student who consistently receives an unsatisfactory evaluation reports from the PPE site supervisor will receive an “F” for the course. Due process procedures will be followed.
6. The health care facilities, with the school’s approval, may request withdrawal of any student from clinical experiences in their institution if his/her work has a detrimental effect on its staff. Students will be given the opportunity to meet with the faculty and other interested parties to discuss the problem before any final action is taken on grade assignment.
7. Students in Professional Practice Experience will have additional assignments/projects to complete. Students are to use the Canvas for submission of assignments/projects.

PROGRAM ACCREDITATION

The Health Information Management program is accredited by the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM). Student graduating from our program accreditation of the program are eligible to sit for the national certification examination, the Registered Health Information Administrator (RHIA) credentials.

PROGRESSION AND RETENTION

Successful completion of prerequisite courses, including BIO 234 & 235, BIO 260 and MAT 131, and an overall GPA of 2.6 are required for admission to the College of Health Sciences – Health Information Management program.

Students must complete courses with a grade of C or better. One repeat is allowed on any one major course; with no more than three repeats total.

Students must meet the prerequisite requirements for each course. No student may progress through PPE courses without successfully completing with a grade of C or better the PPE course(s) previously attempted.

Request for Transfer Credit Evaluation Procedure

An official transcript evaluation is conducted soon after the student has officially enrolled at William Carey University. If transfer credit is not awarded at the time of the initial transcript evaluation, *or* if for any reason a course is not reviewed at the time of initial enrollment, the student may initiate a *Request for Transfer Credit Evaluation*.

1. The ***Request for Transfer Credit Evaluation*** should be initiated by the student who is seeking transfer credit for a course completed at another institution. The currently enrolled student seeking permission to enroll in a course at another institution should initiate the *Request for a Letter of Good Standing* instead.
2. For currently enrolled students, the ***Request for Transfer Credit Evaluation*** should be initiated only after the official transcript evaluation has been completed by the Hattiesburg Registrar.
3. *If ***supporting documentation*** is *inadequate* or *missing*, the request may be *delayed* or *declined*.

To validate the ***catalog course description*** for the term/year the course was taken, include a copy of the catalog cover or obtain written documentation from the institution. To validate the ***syllabus*** for the term/year the course was taken, include written documentation from the institution.

4. A *separate* request should be initiated for *each* course the student wishes to have reviewed.
5. After review of the request and attached supporting documents, the Program Head writes relevant comments, signs and dates the form, and submits the request to the Registrar *or* the Dean of College of Health Sciences as appropriate.
 - 1) The Registrar requests evaluation of a ***non-HIM, core*** course by the appropriate department. The request with departmental decision is returned to the Registrar who notifies the Dean of College of Health Sciences and the respective campus Program Head. The Program Head then notifies the student. The original request is placed in the student's file in the Registrar's office in Hattiesburg.
 - 2) The Dean of College of Health Sciences reviews and evaluates any request for transfer credit for a ***HIM*** course. If the course is approved, the Dean of College of Health Sciences documents this decision on the request and forwards the

original request to the Registrar for placement in the student's file in Hattiesburg. A copy of the request is sent to the respective Director who then notifies the student.

6. The routing process concludes when a copy of the request is placed in the student's local campus file.
7. If the student has not been admitted to William Carey University, the request is placed in the local campus "Prospects" file.

JOSEPH AND NANCY FAIL SCHOOL OF NURSING - WILLIAM CAREY UNIVERSITY
 HEALTH INFORMATION MANAGEMENT
 HATTIESBURG CAMPUS
Request for Transfer Credit Evaluation

 First Name MI Last Name (_____) (_____) Primary Phone Number Alternate Phone Number

 Street Address City State Zip Social Security Number

I am a *currently enrolled* in the **College of Health Sciences** as of: Term _____ Year _____
 I *have applied* for admission to the **College of Health Sciences** for: Term _____ Year _____
 I *plan to apply* for admission to the **College of Health Sciences** in: Term _____ Year _____

This is to request transfer course credit for:

 (Prefix/Number) Course Name Credit Hrs Grade Term/Year Institution

in lieu of William Carey College's: (Prefix/Number) Course Name Credit Hrs

The following supporting documents are attached (note: insufficient supporting documentation may result in a delay or decline):

- Catalog Course Description (from term/year course taken*)
- Course Syllabus (from term/year course taken*)
- Unofficial Transcript

 Signature Date

Program Head

Comments: _____

 Signature Date

Office of the Registrar (Review of NON-NURSING Course)

Comments: _____

Approved Denied

 Signature Date

Office of the Dean (Review of NURSING Course)

Comments: _____

Approved Denied

 Signature Date

SERVICE WORK ESSENTIALS (PAYMENT RESTRICTION)

- The practicum hours and required activities are specified in the course syllabus provided to the student and the clinic site. *The student is not to be compensated for duties performed during this time.*
- Students are not to be substituted for paid staff.
- Students may not take the responsibility or the place of qualified staff. However, after demonstrating proficiency, students should be permitted to perform procedures with careful supervision.
- Students may be employed at the clinical facility provided the first two criteria, above, are met. Employment must not interfere with regular academic responsibilities, clinical hours, or clinical duties. Such work must be non-compulsory, paid and subject to employee regulations.

STUDENT RECORDS

Official student records are kept in the Registrar's Office in Hattiesburg. Partial student records containing admission, progression, and advisement information are kept in the Health Information Management Department.

Transcripts of student's grades are released by the Registrar's Office (Hattiesburg Campus). Students desiring copies of their transcripts from the college must submit a written request to the Registrar's Office, Hattiesburg Campus. The Registrar will not issue transcripts unless accounts are clear with the Business Office.

SUMMARY OF POTENTIAL EXPENSES

- Tuition, Fees, Meals and Room (if applicable): These expenses are paid directly to the University.
- Clothing: A dress code has been established for professional settings in conjunction with the professional practice sites.
- Textbooks and Supplies: Textbooks and supplies may be purchased through the William Carey Bookstore.
- Housing: Should the need arise; housing for professional practice experiences is the student's responsibility. Students are responsible for both arranging and paying for their own housing.

- Meals (professional practice experiences, field trips and workshops): The cost of meals are the student's responsibility.
- Professional Dues: (approximately \$35.00 per year): Payable to the American Health Information Management Association. Student must provide a copy of proof of membership to the Program Director by the end of the Spring Trimester each year. A copy will be placed in the student's file. Failure to do so may jeopardize the student's graduation from the program.
- Criminal Background Check Fee: A criminal background check and/or child/adult abuse registry checks are required for the program. All background check expenses are the responsibility of the student. Payable to the screening agency.
- Physical Examination: A complete physical examination and updated immunizations are required for all students prior to the start of professional practice experience. Costs are dependent on provider costs for these services and the number of immunizations required.
- Name Tags: All students will be required to wear name tags that are to be worn at Professional Practice Experience sites. These are currently provided free of charge.
- Drug screening: WCU does not perform or require drug screening for college or program admission. However, to participate in the professional practice experience courses, all students must provide evidence of a negative drug screen. All expenses related to drug screening are the student's responsibility. Changes in site will not be made on the basis of this requirement.
- Transportation and Parking: Transportation to and from professional practices, field trips and workshops must be arranged by the student. Costs for both transportation and parking are the student's responsibility. Students should consider coordinating their transportation.
- MSHIMA state meeting. Attendance at the MSHIMA state meeting is a component of the HIM program. Students will be responsible for registration and other costs at this event unless otherwise noted.
- Field Trips. Field trips may be used in an effort to provide educational experiences unavailable on campus. Any costs incurred with field trips are the responsibility of the student.
- Certification Examination for the Registered Health Information Administrator (RHIA). The application fee for the examination is the responsibility of the student. The student must file

the application and the student pays the examination fee. The examination is currently offered via computerized testing at designated testing sites throughout the United States. The HIM program staff will review application details with the students prior to their completion of the program.

CODE OF CONDUCT
HEALTH INFORMATION MANAGEMENT
William Carey University

The faculty and staff of the College of Health Sciences extend a welcome to you as you enter your chosen field of study. It is our sincere desire that you attain the goals that you have set for yourself. We are here to help you!

This document is intended as a guide for questions that you may have concerning **attitude, hygiene, and dress**. Read the contents carefully, because you are responsible for the information that it contains.

The action procedure for violation of the Code of Conduct is included to insure that students are treated with fairness and that they know the procedure open to them for due process. Because students in health science programs deal directly with patients, dentists, doctors, and other professionals, the student is observed and evaluated as a total person and not merely on the knowledge that he/she possesses concerning a particular field of study. The **patient** must always come first; therefore, requirements which apply to students in health science programs may not apply to the students in other disciplines.

ATTITUDES - Clinical Practicum and Classroom

The attitudes, feelings, or emotions that you have toward yourself, your work, patients, coworkers, and your profession are reflected by your outward behaviors. Behavior may include facial expressions, actions, body language, and conversation. It is very important to your future that you exhibit behavior which reflects your attitude of openness to learning. Listed below are some of the attitudes expected of you with example(s) of the type of observable behavior which is desirable.

1. *Honesty and integrity*

- Refusal to lie, steal or deceive in any way
- Abides by the profession's code of ethics

2. *Punctuality*

- Arrives on time for class, clinics and extramural rotations
- Completes assignments on time

3. *Cooperativeness*

- Follows established departmental protocol and procedures
- Demonstrates willingness to work well with others and is receptive to suggestions for improvement

4. *Pride in workmanship*

- Strives for improvement in assignments and clinical practicum
- Requests assistance when having difficulty in attaining the specified performance standards

5. *Mature actions*

- Assumes responsibility and consequences for one's actions
- Accepts one's own limitations
- Strives to resolve personal conflicts

6. *Consideration for others*

- Demonstrates by verbal and non-verbal communication thoughtful regard for the feelings and rights of other students, the faculty and staff, and clinical practicum personnel

7. *Concern for patients*

- Demonstrates by verbal and non-verbal communication that the patient comes first
- Refrains from spoken remarks and/or facial expressions which could arouse undue concern, alarm, or embarrassment in the patients
- Respects patient's right of confidentiality of personal information
- Refrains from referring disparagingly to the services of another health professional in the presence of a patient

8. ***Enthusiasm***

- Displays initiative in class and in clinical practicum situations
- Volunteers to assume additional responsibility

9. ***Ability to accept constructive criticism graciously***

- Strives to improve and is not defensive but receptive to suggestions for improvement

10. ***Loyalty***

- Supports with words and actions the ideals and policies of the school, the program and the profession

11. ***Pride in personal appearance***

- Maintains professional appearance and personal hygiene consistent with the program's guidelines

12. ***Tact***

- Exercises discretion in words and actions in order to maintain good relations with patients, peers, and faculty

NOTE: *The faculty reserves the right to dismiss any student for failure to display attitudes, reflected by his/her behavior, consistent with those listed above.*

HIM Baccalaureate Degree Entry-Level Competencies

HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
I. Domain: Data Content, Structure & Standards (Information Governance)		
I.A. Subdomain: Classification Systems	Classification Systems	
1. Evaluate, implement and manage electronic applications/systems for clinical classification and coding	<ul style="list-style-type: none"> Encoders, Computer Assisted Coding (CAC), Systems Development Life Cycle (Evaluating, 5) 	311 317 408
2. Identify the functions and relationships between healthcare classification systems	<ul style="list-style-type: none"> Healthcare Classification Systems, taxonomies, nomenclatures, terminologies and clinical vocabularies (ICD, CPT, SNOMED-CT, DSM, RxNorm: Standard Clinical Drug Naming catalog) (Applying, 3) 	311 317 407 408
3. Map terminologies, vocabularies and classification systems	<ul style="list-style-type: none"> Mapping from a standard clinical terminology to a HIPAA code set (LOINC to CPT or SNOMED to ICD); Mapping from one code set to another code set (one revision of ICD to another) (Analyzing, 4) 	311 317 407 408
4. Evaluate the accuracy of diagnostic and procedural coding	<ul style="list-style-type: none"> Principles and applications of Classification Systems and auditing (Evaluating, 5) 	317
I.B. Subdomain: Health Record Content and Documentation	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	<ul style="list-style-type: none"> Health record components for all record types (Analyzing, 4) 	315 317 402 407
2. Compile organization-wide health record documentation guidelines	<ul style="list-style-type: none"> Standards and regulations for the Joint Commission, Commission on Accreditation of Rehabilitation Facilities (CARF), & Centers for Medicare and Medicaid Services (CMS); Health record documentation policies and procedures (Create,6) 	402 406 407
3. Interpret health information standards	<ul style="list-style-type: none"> (Evaluating, 5) 	402
I.C. Subdomain: Data Governance	Data Governance	
1. Format data to satisfy integration	<ul style="list-style-type: none"> Interoperability principles; Capture, 	311

needs.	structure, and use of health information (Analyzing, 4)	405 315 407
2. Construct and maintain the standardization of data dictionaries to meet the needs of the enterprise.	<ul style="list-style-type: none"> Data sources and data dictionary composition (Create,6) 	312 314 316
3. Demonstrate compliance with internal and external data dictionary requirements.	<ul style="list-style-type: none"> Accreditation standards for The Joint Commission, National Committee for Quality Assurance (NCQA), CARF, Community Health Accreditation Program (CHAP), Utilization Review Accreditation Commission (URAC), HL7, American Society for Testing and Materials (ASTM), Health plan Employer Data Information Sets (HEDIS), Outcome and Assessment Information Set (OASIS), and Uniform Hospital Discharge Data Set (UHDDS) (Applying, 3) 	311 315 316 402 405 407 408
4. Advocate information operability and information exchange.	<ul style="list-style-type: none"> Interoperability Standards and Health Information Exchanges (HIEs) (Evaluating, 5) 	311 315

HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
I.D. Subdomain: Data Management	Data Management	
1. Analyze information needs of customers across the healthcare continuum.	(Analyze, 4)	402
2. Evaluate health information systems and data storage design.	<ul style="list-style-type: none"> Storage media, disaster recovery, and cloud computing (Evaluating, 5) 	312 408
3. Manage clinical indices/databases/registries	<ul style="list-style-type: none"> Policies for secondary data sources, registries, and indices (Evaluating, 5) 	402 406
4. Apply knowledge of database architecture and design to meet organizational needs.	<ul style="list-style-type: none"> Data dictionary, data modeling, and data warehousing; Database architecture and design (Applying, 3) 	311* 316 312 315
5. Evaluate data from varying sources to create meaningful presentations.	(Evaluating, 5)	312 402 316 405
I.E. Subdomain: Data Management	Data Management	

1. Validate data from secondary sources to include in the patient's record, including personal health records	<ul style="list-style-type: none"> Data stewardship & Information Governance Standards; Patient-Centered Health Information technology and portals (Applying, 3) 	402 405
II. Domain: Information Protection: Access, Disclosure, Archival, Privacy & Security		
II.A. Subdomain: Health Law	Health Law	
1. Identify laws and regulations applicable to health care	<ul style="list-style-type: none"> Health information laws and regulations including HIPAA, The Joint Commission, State laws, and Centers for Medicare and Medicaid Services (CMS) (Applying, 3) 	311 402 315 406 317 408 401
2. Analyze legal concepts and principles to the practice of HIM	<ul style="list-style-type: none"> (Analyzing, 4) 	401 406
II.B. Subdomain: Data Privacy, Confidentiality & Security	Quality Management and Performance Improvement	
1. Analyze privacy, security and confidentiality policies and procedures for internal and external use and exchange of health information.	<ul style="list-style-type: none"> Patient verification and identity management policies; Privacy, confidentiality, security principles, policies and procedures, and federal/state laws; E-Discovery (Analyzing, 4) 	401 406
2. Recommend elements included in the design of audit trails and data quality monitoring programs.	<ul style="list-style-type: none"> Data security (audits, controls, data recovery, e-security, disaster recovery planning, and business continuity planning) (Evaluating, 5) 	401 406 408
3. Collaborate in the design and implementation of risk assessment, contingency planning, and data recovery procedures.	<ul style="list-style-type: none"> Health information archival and retrieval systems; Data security protection methods (authentication, encryption, decryption, and firewalls) (Analyzing, 4) 	406 408
4. Analyze the security and privacy implications of mobile health technologies.	<ul style="list-style-type: none"> (Analyzing, 4) 	406
5. Develop educational programs for employees in privacy, security, and confidentiality.	<ul style="list-style-type: none"> Privacy & security laws/regulations, adult education strategies, and training methods (Creating, 6) 	401 406
II.C. Subdomain: Release of Information	Release of Information	
1. Create policies and procedures to manage access and disclosure of personal health information.	<ul style="list-style-type: none"> Principles for releasing PHI; Elements of an authorization (Creating, 6) 	315 406
2. Protect electronic health	<ul style="list-style-type: none"> Audit techniques and principles 	315

information through confidentiality and security measures, policies and procedures.	(Applying, 3)	401 406 408
HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
Domain III. Informatics, Analytics and Data Use		
III.A. Subdomain: Health Information Technologies	Health Information Technologies	
1. Utilize technology for data collection, storage, analysis, and reporting of information.	<ul style="list-style-type: none"> Health information archival and retrieval systems; Computer concepts (hardware components, network systems architecture operating systems and languages, software packages and tools, and cloud computing applications) (Applying, 3) 	312 314 316 408
2. Assess systems capabilities to meet regulatory requirements.	<ul style="list-style-type: none"> Electronic signatures, data correction, and audit logs (Evaluating, 5) 	408
3. Recommend device selection based on workflow, ergonomic and human factors.	<ul style="list-style-type: none"> Human factors and user interface design (Evaluating, 5) 	311 408
4. Take part in the development of networks, including intranet and Internet applications.	<ul style="list-style-type: none"> Communication technologies (Network-LANS, WANS, WLANS, and VPNs); Internet technologies (Intranet, web-based systems, standards SGML, and XML) (Analyzing, 4) 	311 408
5. Evaluate system architecture, database design, data warehousing.	<ul style="list-style-type: none"> System testing; Interface management; Data relationships (Evaluating, 5) 	408
6. Create the electronic structure of health data to meet a variety of end user needs.	<ul style="list-style-type: none"> Data information and file structures (data administration, data definitions, data dictionary, data modeling, data structures, data warehousing, and database management systems) (Creating, 6) 	311 315
III.B. Subdomain: Information Management Strategic Planning	Information Management Strategic Planning	
1. Take part in the development of information management plans that support the organization's current and future strategy and goals.	<ul style="list-style-type: none"> Corporate strategic plan, operation improvement planning, and information management plans; Disaster and recovery planning (Analyzing, 4) 	401 405

2. Take part in the planning, design, selection, implementation, integration, testing, evaluation, and support of health information technologies.	<ul style="list-style-type: none"> Systems development life cycle (systems analysis, design, implementation, evaluation, maintenance, EHRs, HIEs, and RECs) (Analyzing, 4) 	401 408
III.C. Subdomain: Analytics and Decision Support	Analytics and Decision Support	
1. Apply analytical results to facilitate decision-making.	<ul style="list-style-type: none"> Data display, power point, and dashboards (Applying, 3) 	312 401 314 402 316 405
2. Apply data extraction methodologies.	<ul style="list-style-type: none"> Healthcare statistical formulas (LOS, death, birth, and infection rates); Data capture tools and technologies (forms, computer screens, templates, other health record documentation tools; clinical, financial, and administrative) (Applying, 3) 	312 314 316 402
3. Recommend organizational action based on knowledge obtained from data exploration and mining.	<ul style="list-style-type: none"> (Evaluating, 5) 	314 316 407
4. Analyze clinical data to identify trends that demonstrate quality, safety, and effectiveness of healthcare.	<ul style="list-style-type: none"> Descriptive statistics (mean, standard deviation, ranges, and percentiles); inferential statistics (T-tests, ANOVA, regression analysis, reliability, and validity); Epidemiological. (Analyzing, 4) 	314 316 402
5. Apply knowledge of database querying and data exploration and mining techniques to facilitate information retrieval.	<ul style="list-style-type: none"> (Applying, 3) 	312 314 316
6. Evaluate administrative reports using appropriate software.	<ul style="list-style-type: none"> (Evaluating, 5) 	314 401 316 407

HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
III.D. Subdomain: Health Care Statistics	Health Care Statistics	
1. Interpret inferential statistics	<ul style="list-style-type: none"> Inferential statistics (T-tests, ANOVA, regression analysis, reliability, and validity); Computerized statistical packages (SPSS & SAS) (Evaluating, 5) 	316
2. Analyze statistical data for decision making	<ul style="list-style-type: none"> Data reporting of statistical healthcare data and presentation techniques. (Analyzing, 4) 	312 316 314 402
III.E. Subdomain: Research Methods	Research Methods	
1. Apply principles of research and clinical literature evaluation to improve outcomes.	<ul style="list-style-type: none"> Research design/methods (quantitative, qualitative, evaluative, mixed, and outcomes); Literature review and evaluation; Knowledge-based research techniques (Medline, CMS libraries, AHRQ, and other websites) (Applying, 3) 	312 314 316
2. Plan adherence to Institutional Review Board (IRB) processes and policies.	<ul style="list-style-type: none"> National guidelines regarding human-subjects research (IRB process); Research protocol data management. (Applying, 3) 	314 316 406
III.F. Subdomain: Consumer Informatics	Consumer Informatics	
1. Educate consumers on patient-centered health information technologies	<ul style="list-style-type: none"> Patient centered medical homes; Patient portals, patient safety, and patient education; Personal Health Record (PHR) (Applying, 3) 	315 402
III.G. Subdomain: Health Information Exchange	Health Information Exchange	
1. Collaborate in the development of operational policies and procedures for health information exchange.	<ul style="list-style-type: none"> HIE's, local, regional including providers, pharmacies, and other health facilities (Analyzing, 4) 	315
2. Conduct system testing to ensure data integrity and quality of health information exchange.	<ul style="list-style-type: none"> Integration, interfaces, and data reliability (Creating, 6) 	408
3. Differentiate between various models for health information exchange.	<ul style="list-style-type: none"> (Evaluating, 5) 	315
III.H. Subdomain: Information Integrity and Data Quality	Information Integrity and Data Quality	
1. Discover threats to data integrity and validity.	<ul style="list-style-type: none"> Intrusion detection systems, audit design, and principles (Applying, 3) 	408

2. Implement policies and procedures to ensure data integrity internal and external.	<ul style="list-style-type: none"> • Authentication, encryption, and password management (Applying, 3) 	406 408
3. Apply quality management tools.	<ul style="list-style-type: none"> • Control charts, pareto charts, fishbone diagrams and other statistical process control techniques. (Applying, 3) 	316 402
4. Perform quality assessment including quality management, data quality, and identification of best practices for health information systems.	<ul style="list-style-type: none"> • Data quality assessment and integrity; Disease management process (case management, critical paths, and care coordination); Outcomes measurement (patient as patient, customer satisfaction, and disease specific); Patient and organization safety initiatives (Analyzing, 4) 	314 402
5. Model policy initiatives that influence data integrity.	<ul style="list-style-type: none"> • (Applying, 3) 	406 408

HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
IV. Domain: Revenue Management		
IV.A. Subdomain: Revenue Cycle and Reimbursement		
1. Manage the use of clinical data required by various payment and reimbursement systems.	<ul style="list-style-type: none"> Clinical data management; Case mix management; Reimbursement management; Payment Systems (Prospective Payment System (PPS), DRGs, Resource-Based Relative Value Scale (RBRVS), Resource Utilization Groups (RUGs), Value-Based Purchasing (VBP), MSDRGs, commercial, managed care, and federal insurance plans); Billing and reimbursement at hospital inpatient & outpatient, physician offices, and other delivery settings (Analyzing, 5) 	316 317 405
2. Take part in selection and development of applications and processes for charge master and claims management.	<ul style="list-style-type: none"> Charge master management (Analyzing, 4) 	405
3. Apply principles of healthcare finance for revenue management.	<ul style="list-style-type: none"> Cost reporting, budget variances, and budget speculation (Applying, 3) 	405
4. Implement processes for revenue cycle management and reporting.	<ul style="list-style-type: none"> Corrective Coding Initiative (CCI)- Electronic Billing X12N; Compliance strategies and reporting; Audit process (compliance and reimbursement); Revenue cycle process; Utilization and resource management (Applying, 3) 	317 402? 405
V. Domain: Compliance		
V.A. Subdomain: Regulatory		
Regulatory		
1. Appraise current laws and standards related to health information initiatives.	<ul style="list-style-type: none"> Compliance strategies and reporting; Regulatory and licensure requirements; Elements of compliance programs; Patient safety (Analyzing, 5) 	317 401 402 406
2. Determine processes for compliance with current laws and standards related to health information initiatives and revenue cycle.	<ul style="list-style-type: none"> Policies and procedures; Non-retaliation policies; Auditing and monitoring (Analyzing, 5) 	401 405 406
V.B. Subdomain: Coding		
Coding		
1. Construct and maintain processes, policies, and	<ul style="list-style-type: none"> UHDDS and Federal compliance guidelines; Official coding guidelines 	317

procedures to ensure the accuracy of coded data based on established guidelines.	from CMS, AMA, National Committee on Vital and Health Statistics (NCHVS), National Correct Coding Initiative (NCCI), and AHA. (Creating, 6)	
2. Manage coding audits.	<ul style="list-style-type: none"> Audit principles and reporting. (Analyzing, 5) 	317 405
3. Identify severity of illness and its impact on healthcare payment systems.	<ul style="list-style-type: none"> Case mix; Computer Assisted Coding (CAC) systems (Applying, 3) 	317 405
V.C. Subdomain: Fraud Surveillance	Fraud Surveillance	
1. Determine policies and procedures to monitor abuse or fraudulent trends.	<ul style="list-style-type: none"> (Analyzing, 5) 	401 405 406
V.D. Subdomain: Clinical Documentation Improvement	Clinical Documentation Improvement	
1. Implement provider querying techniques to resolve coding discrepancies.	<ul style="list-style-type: none"> Query process (written, verbal, & template queries; timeliness & interpretation; and query retention) (Applying, 3) 	407 408
2. Create methods to manage Present on Admission (POA), Hospital Acquired Conditions (HACs), and other CDI components.	<ul style="list-style-type: none"> Clinical Documentation Improvement (CDI) metrics and reporting process (concurrent, retrospective, and post-bill review) (Creating, 6) 	314
HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
VI.A Subdomain: Leadership Roles	Leadership Roles	
1. Take part in effective negotiating and use influencing skills.	<ul style="list-style-type: none"> (Analyzing, 4) 	401
2. Discover personal leadership style using contemporary leadership theory and principles.	<ul style="list-style-type: none"> (Applying, 3) 	401
3. Take part in effective communication through project reports, business reports and professional communications.	<ul style="list-style-type: none"> (Analyzing, 4) 	312 402 316 401
4. Apply personnel management skills.	<ul style="list-style-type: none"> Communication and interpersonal skills; Leadership and governance. (Applying, 3) 	401 409?
5. Take part in enterprise-wide committees.	<ul style="list-style-type: none"> Facilitation, networking, and consensus building. (Analyzing, 4) 	401 402
6. Build effective teams.	<ul style="list-style-type: none"> Team/consensus building. (Creating, 6) 	401 402
VI.B. Subdomain: Change Management	Change Management	
1. Interpret concepts of change	<ul style="list-style-type: none"> Change management; Risk exposure; 	401

management theories, techniques and leadership	Organizational design and mergers (Analyzing, 5)	402
VI.C. Subdomain: Clinical Documentation Improvement	Clinical Documentation Improvement	
1. Analyze workflow processes and responsibilities to meet organizational needs.	<ul style="list-style-type: none"> Workflow reengineering and workflow design techniques. (Analyzing, 4) 	401 402
2. Construct performance management measures.	<ul style="list-style-type: none"> Benchmarking techniques (productivity standards, report cards, and dashboards). (Creating, 6) 	314 401 402
3. Demonstrate workflow concepts.	<ul style="list-style-type: none"> Use cases; Top down diagrams; Swimlane diagrams. (Applying, 3) 	401
VI.D Subdomain: Human Resources Management	Human Resources Management	
1. Manage human resources to facilitate staff recruitment, retention, and supervision.	<ul style="list-style-type: none"> Principles of human resources management (recruitment, supervision, retention, counseling, and disciplinary action). (Analyzing, 5) 	401
2. Ensure compliance with employment laws.	<ul style="list-style-type: none"> Employment laws and labor laws (federal/state); Equal Employment Opportunity Commission (EEOC) (Analyzing, 5) 	401 406
3. Create and implement staff orientation and training programs.	<ul style="list-style-type: none"> (Creating, 6) 	401 402
4. Benchmark staff performance data incorporating labor analytics.	<ul style="list-style-type: none"> (Analyzing, 4) 	401
5. Evaluate staffing levels and productivity, and provide feedback to staff regarding performance.	<ul style="list-style-type: none"> Performance standards; Professional development in self and others. (Analyzing, 5) 	401
VI.E. Subdomain: Change Management	Change Management	
1. Evaluate initial and on-going training programs.	<ul style="list-style-type: none"> (Analyzing, 5) 	401
HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
VI.F. Subdomain: Strategic and Organizational Management	Strategic and Organizational Management	
1. Identify departmental and organizational survey readiness for accreditation, licensing, and/or certification processes.	<ul style="list-style-type: none"> Accreditation standards (The Joint Commission, National Committee for Quality Assurance (NCQA), Commission on Accreditation of Rehabilitation Facilities (CARF), 	315 401 402

	Community Health Accreditation Partners (CHAP), Utilization Review Accreditation Commission (URAC), Provider credentialing requirements, and CMS Conditions of Participation) (Applying, 3)	
2. Implement a departmental strategic plan.	<ul style="list-style-type: none"> Strategic planning, critical thinking, and benchmarking (Applying, 3) 	401 402 405
3. Apply general principles of management in the administration of health information services.	<ul style="list-style-type: none"> Organizational structures and theory. (Applying, 3) 	401
4. Evaluate how healthcare policy-making both directly and indirectly impacts the national and global healthcare delivery systems.	<ul style="list-style-type: none"> State, local, and federal policies. (Analyzing, 5) 	401 402
5. Identify the different types of organizations, services, and personnel and their interrelationships across the health care delivery system.	<ul style="list-style-type: none"> Payers/providers in all delivery settings; Accountable Care Organizations (ACOs) and Managed Care Organizations (MCOs); Medical devices and biotech (Applying, 3) 	315 401 405
6. Collaborate in the development and implementation of information governance initiatives.	<ul style="list-style-type: none"> (Analyzing, 4) 	401 402
7. Facilitate the use of enterprise-wide information assets to support organizational strategies and objectives.	<ul style="list-style-type: none"> Information management planning; Enterprise information management; Master data/information management. (Analyzing, 4) 	401
VI.G Subdomain: Financial Management	Financial Management	
1. Evaluate capital, operating and/or project budgets using basic accounting principles.	<ul style="list-style-type: none"> Budget process (capital & operating; staffing & budgeting) (Analyzing, 5) 	405
2. Perform cost-benefit analysis for resource planning and allocation.	<ul style="list-style-type: none"> Accounting principles; Cost/benefit analysis (outsourcing & acquisition) (Analyzing, 4) 	401 405
3. Evaluate the stages of the procurement process.	<ul style="list-style-type: none"> Content of and answers to a Request for Proposal (RFP), Request For Information (RFI), and Request for Quotation (RFQ) (Analyzing, 5) 	401 405
VI.H. Subdomain: Ethics	Ethics	
1. Comply with ethical standards of practice.	<ul style="list-style-type: none"> Professional ethics issues; Ethical decision making process; AHIMA Code of Ethics; Patient rights; Patient safety. 	401 405 409

	(Analyzing, 5)	
2. Evaluate the culture of a department.	<ul style="list-style-type: none"> (Analyzing, 5) 	401 405
3. Assess how cultural issues affect health, healthcare quality, cost, and HIM.	<ul style="list-style-type: none"> Healthcare professionals and cultural diversity; Cultural competence and self-awareness; Assumptions, biases, and stereotypes. (Analyzing, 5) 	401 405 409?
4. Create programs and policies that support a culture of diversity.	<ul style="list-style-type: none"> Diversity awareness training programs: age, race, sexual orientation, education, work experience, geographic location, and disability. (Creating, 6) & 	401
	<ul style="list-style-type: none"> Regulations such as Americans with Disabilities Act (ADA) and Equal Employment Opportunity Commission (EEOC). (Creating, 6) 	401

HIM Baccalaureate Degree Entry-Level Competencies (Student Learning Outcomes) (Domains, Subdomains)	Knowledge Clusters (Curricular Components)	Course Covered
VI.I. Subdomain: Project Management	Project Management	
1. Take part in system selection processes.	<ul style="list-style-type: none"> RFI and RFP (Analyzing, 4) 	316 401 405
2. Recommend clinical, administrative, and specialty service applications.	<ul style="list-style-type: none"> RFP vendor selection (Analyzing, 5) 	316 401 405
3. Apply project management techniques to ensure efficient workflow and appropriate outcomes.	<ul style="list-style-type: none"> GANTT Charts, benchmarking, and risk analysis tools. (Applying, 3) 	402
4. Facilitate project management by integrating work efforts.	<ul style="list-style-type: none"> Project management principles; Issue tracking, and facilitation techniques (Analyzing, 4) 	401 402
VI.J. Subdomain: Vendor/Contract Management	Vendor/Contract Management	
1. Evaluate vendor contracts.	<ul style="list-style-type: none"> Contract management; System acquisition and evaluation. (Analyzing, 5) 	401 405
2. Develop negotiation skills in the process of system selection.	<ul style="list-style-type: none"> (Creating, 6) 	401
VI.K. Subdomain: Enterprise Information Management	Enterprise Information Management	
1. Manage information as a key strategic resource and mission tool.	<ul style="list-style-type: none"> Workflow reengineering and workflow design techniques. (Analyzing, 4) 	401 402
Supporting Body of Knowledge (Pre-	BIOMEDICAL SCIENCES	

requisite or Evidence of Knowledge)		
	Anatomy (Applying, 3)	313
	Physiology (Applying, 4)	310
	Medical Terminology (Evaluating, 5)	314,316,
	Pathophysiology (Analyzing, 4)	317
		313,314,
	Pharmacotherapy (Analyzing, 4)	316,317
		313, 317

Bloom's Taxonomy: Revised Version

1 = Remembering: Can the student recall or remember the information?

2 = Understanding: Can the student explain ideas or concepts, and grasp the meaning of information?

3 = Applying: Can the student use the information in a new way?

4 = Analyzing: Can the student distinguish between the different parts, break down information, and infer to support conclusions?

5 = Evaluating: Can the student justify a stand or decision, or judge the value of?

6 = Creating: Can the student create new product or point of view?

Registered Health Information Administrator (RHIA) Examination Content

Number of Questions on Exam: 180

Exam Time: 4 hours

Domain 1 – Data Content, Structure & Standards (Information Governance) (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 2 – 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
B2. Design policies and implement security practices to safeguard Protected Health Information
B3. Investigate and resolve healthcare privacy and security

issues/breaches

C. Release of Information

C1. Manage access, disclosure, and use of Protected Health Information to ensure confidentiality

C2. Develop policies and procedures for uses and disclosures/redisclosures of Protected Health Information

Domain 3 – 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 4 – 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 5 – 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 e

The Vision, Mission, and Values of the American Health Information Management Association

Vision:

“AHIMA ... leading the advancement and ethical use of quality health information to promote health and wellness worldwide”

- AHIMA is the worldwide professional association of recognized leaders in health information management, informatics, health data technology, and innovation.
- AHIMA proactively promotes the technological advancement of health information systems that enhance the delivery of quality healthcare.
- Based on AHIMA's Code of Ethics and applicable law, AHIMA will promote the ethical and appropriate use of health information, and its members will ascribe to and conduct themselves in accordance with the Code of Ethics as part of their professional responsibility.
- AHIMA recognizes that quality health and clinical data are critical resources needed for efficacious healthcare and works to assure that the health information used in care, research, and health management is valid, accurate, complete, trustworthy, and timely.
- AHIMA is concerned about the effective management of health information from all sources and its application in all forms of healthcare and wellness preservation.
- Health issues, disease, and care quality transcend national borders. AHIMA's professional interest is in the application of best health information management practices wherever they are needed.

Mission:

AHIMA leads the health informatics and information management community to advance professional practice and standards.

AHIMA Core Values:

QUALITY

Demonstrated by an abiding commitment to innovation, relevance and value in programs, products and services

INTEGRITY

Demonstrated by openness in decision-making, honesty in communication and activity, and ethical practices that earn trust and support collaboration

RESPECT

Demonstrated by appreciation of the value of differing perspectives; enjoyable experiences; courteous interaction; and celebration of achievements that advance our common cause

LEADERSHIP

Demonstrated by visionary thinking; decisions responsive to membership and mission; and accountability for actions and outcomes

American Health Information Management Association

Standards of Ethical Coding

Introduction

The Standards of Ethical Coding are based on the American Health Information Management Association's (AHIMA's) Code of Ethics. Both sets of principles reflect expectations of professional conduct for coding professionals involved in diagnostic and/or procedural coding or other health record data abstraction.

A Code of Ethics sets forth professional values and ethical principles and offers ethical guidelines to which professionals aspire and by which their actions can be judged. Health information management (HIM) professionals are expected to demonstrate professional values by their actions to patients, employers, members of the healthcare team, the public, and the many stakeholders they serve. A Code of Ethics is important in helping to guide the decision-making process and can be referenced by individuals, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups).

The AHIMA Code of Ethics (available on the AHIMA web site) is relevant to all AHIMA members and credentialed HIM professionals and students, regardless of their professional functions, the settings in which they work, or the populations they serve. Coding is one of the core HIM functions, and due to the complex regulatory requirements affecting the health information coding process, coding professionals are frequently faced with ethical challenges. The AHIMA Standards of Ethical Coding are intended to assist coding professionals and managers in decision-making processes and actions, outline expectations for making ethical decisions in the workplace, and demonstrate coding professionals' commitment to integrity during the coding process, regardless of the purpose for which the codes are being reported. They are relevant to all coding professionals and those who manage the coding function, regardless of the healthcare setting in which they work or whether they are AHIMA members or nonmembers.

These Standards of Ethical Coding have been revised in order to reflect the current healthcare environment and modern coding practices. The previous revision was published in 1999.

Standards of Ethical Coding

Coding professionals should:

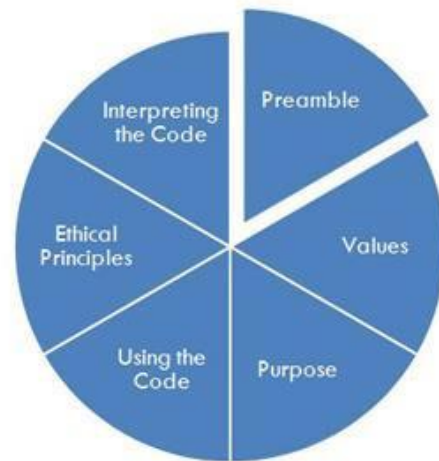
1. Apply accurate, complete, and consistent coding practices for the production of high-quality healthcare data.
2. Report all healthcare data elements (e.g. diagnosis and procedure codes, present on admission indicator, discharge status) required for external reporting purposes (e.g. reimbursement and other administrative uses, population health, quality and patient safety measurement, and research) completely and accurately, in accordance with regulatory and documentation standards and requirements and applicable official coding conventions, rules, and guidelines.

3. Assign and report only the codes and data that are clearly and consistently supported by health record documentation in accordance with applicable code set and abstraction conventions, rules, and guidelines.
4. Query provider (physician or other qualified healthcare practitioner) for clarification and additional documentation prior to code assignment when there is conflicting, incomplete, or ambiguous information in the health record regarding a significant reportable condition or procedure or other reportable data element dependent on health record documentation (e.g. present on admission indicator).
5. Refuse to change reported codes or the narratives of codes so that meanings are misrepresented.
6. Refuse to participate in or support coding or documentation practices intended to inappropriately increase payment, qualify for insurance policy coverage, or skew data by means that do not comply with federal and state statutes, regulations and official rules and guidelines.
7. Facilitate interdisciplinary collaboration in situations supporting proper coding practices.
8. Advance coding knowledge and practice through continuing education.
9. Refuse to participate in or conceal unethical coding or abstraction practices or procedures.
10. Protect the confidentiality of the health record at all times and refuse to access protected health information not required for coding-related activities (examples of coding-related activities include completion of code assignment, other health record data abstraction, coding audits, and educational purposes).
11. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal coding practices, and fosters trust in professional activities.

American Health Information Management Association Code of Ethics

The AHIMA Code of Ethics serves as a professional ethics guide for its members and credentialed professionals who are not members.

- **Preamble** – provides the ethical obligation of AHIMA members and credentialed professionals who are not members.
- **Values** – summarizes core values based on AHIMA’s mission.
- **Purpose** – delineates the seven purposes of the Code of Ethics.
- **Using the Code** – describes how members and credentialed professionals who are not members should use the Code.
- **Ethical Principles** – Outlines and interprets the 11 principles that are the Code of Ethics’ foundation and serve as a guide to members and credentialed professionals who are not members.



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.

Code of Ethics 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.

1.9. 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 and 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.*

Acknowledgement

Adapted with permission from the Code of Ethics of the National Association of Social Workers.

Resources

National Association of Social Workers. Code of Ethics. 1999. Available online on the NASW web site.

AHIMA. Code of Ethics, 1957, 1977, 1988, 1998, and 2004.

AHIMA. Standards for Ethical Coding. 2008. Available in the AHIMA Body of Knowledge.

Harman, L.B., ed. *Ethical Challenges in the Management of Health Information*, 2nd ed. Sudbury, MA: Jones and Bartlett, 2006.

McWay, D.C. *Legal and Ethical Aspects of Health Information Management*, 3rd ed. Clifton Park, NY: Cengage Learning, 2010.

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

ACKNOWLEDGEMENT STATEMENTS

Complete, detach and return to Jude Haney, Program Director, on the first day of class in HIM _____.

Initial

1. _____ I have received and read the HIM Undergraduate Student Handbook.
2. _____ I have reviewed and agree to abide by the general course and program requirements described in the HIM Undergraduate Student Handbook.
3. _____ I have reviewed and agree to abide by the practicum and off-site tour/class requirements described in the HIM Undergraduate Student Handbook.
4. _____ I have reviewed the Code of Conduct for Health Information Management described in the HIM Undergraduate Student Handbook and agree to abide by the Code of Conduct while enrolled in the HIM program.
5. _____ I have reviewed the Domains and Subdomains described in the HIM Undergraduate Student Handbook. I understand that these items represent AHIMA's course content requirements for all HIM curriculum courses and are the basis for the cumulative final in HIM 404 and the national RHIA certification exam.
6. _____ I agree to abide by all policies and guidelines described in the WCU catalog, the HIM Undergraduate Student Handbook, and all School of Nursing and HIM Program policies while enrolled in the HIM Program. I acknowledge that failure to do so is grounds for dismissal from the HIM Program. I am aware there is a two-attempt limit in the HIM program.
7. _____ I agree to abide by the rules and regulations of facilities to which I am assigned, clinicals, and off-campus tours/classes.
8. _____ I have read and understand the policies with regards to privacy and security of personal health information. I agree to maintain confidentiality of all information obtained while a student in Health Information Management at William Carey University including, but not limited to, financial, technical, or propriety information of the organization and personal and sensitive information regarding patients, employees, and vendors. I understand that inappropriate disclosure or release of patient information is grounds for dismissal from the program.
9. _____ I understand that all immunizations must be completed and submitted prior to the first day of clinicals and that I will not be allowed to go to clinicals unless all immunizations are complete and my TB screening is current and negative.

_____/_____/_____ **Printed Name**

Signature