Master of Science in Health Informatics Administration Program
Student Handbook (Updated 2017)
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PURPOSE OF THE MASTER OF SCIENCE IN HEALTH INFORMATICS ADMINISTRATION PROGRAM HANDBOOK

The purpose of the University of Maryland University College, Master of Science in Health Informatics Administration Program Handbook is to assist you in successfully completing your graduate degree. You are responsible for reading the material carefully and discussing any questions you might have with a faculty member, the Program Academic Specialist or the Program Chair. You are responsible for complying with the guidelines, expectations and requirements as stated within the pages of this handbook and specific course syllabi.
OVERVIEW OF THE UNIVERSITY OF MARYLAND UNIVERSITY COLLEGE (UMUC)

About UMUC

Founded in 1947, University of Maryland University College (UMUC) is the largest public university in the United States. As one of the 12 degree-granting institutions of the University System of Maryland, it specializes in high-quality academic programs tailored to working adults and has earned a global reputation for excellence as a comprehensive virtual university. UMUC provides educational opportunities to approximately 90,000 students throughout Maryland, across the United States, and in 27 countries around the world. The university offers undergraduate and graduate degrees, certificate programs, and noncredit leadership development. For more information regarding UMUC and its programs, visit www.umuc.edu.

Accreditation/Governance Statement

University of Maryland University College is accredited by the Commission on Higher Education of the Middle States Association of Colleges and Schools, 3624 Market Street, Philadelphia, PA 19104 (267-284-5000), one of the six regional accrediting agencies recognized by the U.S. Department of Education. UMUC is governed by the University System of Maryland Board of Regents and certified by the State Council of Higher Education for Virginia. UMUC is a constituent institution of the University System of Maryland.

Nondiscrimination

UMUC is committed to ensuring that all individuals have equal access to programs, facilities, admission, and employment without regard to personal characteristics not related to ability, performance, or qualifications as determined by UMUC and/or University System of Maryland policy or by federal, state, or local authorities, in accordance with UMUC Policy 40.30 Policy and Procedures on Affirmative Action and Equal Opportunity (https://www.umuc.edu/policies/adminpolicies/admin04030.cfm). UMUC does not discriminate against or harass any person because of race, religion, color, creed, gender, marital status, age, national origin, ancestry, political affiliation, mental or physical disability, sexual orientation, or veteran status (including Vietnam-Era veterans). All inquiries regarding UMUC’s Nondiscrimination Statement or compliance with applicable statutes and regulations should be directed to the director of Diversity Initiatives, Office of the President, UMUC, 3501 University Boulevard East, Adelphi, MD 20783-8000 (phone 800-888-UMUC, ext. 7940).
Welcome to the Master of Science in Health Informatics Administration program at the University of Maryland University College. It is with great pleasure to serve as the Program Chair. I am pleased to have you as a student within one of the top-rated programs in the nation. This program, of which you are now a part, answers a real need locally, nationally and internationally for qualified Health Informatics and Information Management professionals.

As a graduate you will be able to make your own contribution to the U.S. health care industry. As a whole, the Health Informatics and Information Management profession finds itself at a pivotal point in its history. It is on the cusp of change and of ever increasing professional opportunities. The Bureau of Labor Statistics projects twenty-two (22) percent employment growth from 2012 to 2022. This means that it is a great time to be a student and that more jobs will be available for you when you graduate!

Your fellow students come from a variety of backgrounds and experiences. Some are deciding for the first time on a career while others are changing careers or going back to work after a period in which they did not work. What you have in common is the desire to qualify yourselves to work in an interesting and challenging profession.

In the event you have any questions, please do not hesitate to contact me via email at zakevia.green-lawson@umuc.edu or feel free to contact Mrs. Meena Bipat, Academic Specialist via email at meena.bipat@umuc.edu.

On behalf of the University of Maryland University College, thank you for choosing us to pursue your online graduate education!! I look forward to your progression within the program and even more so, the opportunity to watch you walk across the stage during commencement to confer your Master of Science in Health Informatics Administration degree.

Best Wishes on Your UMUC Academic Journey,

Dr. Zakevia D. Green, Ph.D., MSHA, LHRM, RHIA, FAHIMA
Program Chair & Collegiate Faculty
Master of Science in Health Informatics Administration
University of Maryland University College
PROGRAM OVERVIEW

Mission, Vision, Goals

The vision for the Master of Science in Health Informatics Administration program parallels the mission and vision of UMUC. The Master of Science in Health Informatics Administration program vision is to cultivate health informaticists and information management professionals with advanced training and practical skills for the planning, managing, designing, implementing and evaluating health information systems and technologies. Such that graduates of the Master of Science in Health Informatics Administration program will fulfill workforce and industry demands to provide high quality and timely health information, which is the cornerstone of a quality health care system.

To assure quality in its program, the degree aligns to UMUC standards for academic quality, which focus on providing value to students delivering education that prepares them to succeed in the workplace of today and the future. Academic programs like the Master of Science in Health Informatics Administration enable students to intellectually explore, successfully master and ethically employ new and relevant knowledge, skills and dispositions necessary to achieve their personal and professional goals. Faculty have extensive academic and professional experience in the disciplines they teach and are supported in delivering engaging educational experiences that foster student learning. Teaching methods incorporate the most current, innovative and effective instructional models that engage and support students throughout the learning process. Academic programs employ multiple means to assess student learning to ensure that students are achieving the stated knowledge, skills and levels of preparation necessary for academic and professional success. University programs and services support and promote the efforts of students and alumni, providing them with life-long learning opportunities as they pursue their personal and professional goals. The Master of Science in Health Informatics Administration program measures learning quality in the knowledge, skills and achievements of our students, as demonstrated in their classroom successes and post-graduate accomplishments. Our five guiding principles further drive an institutional commitment to the continuous improvement and enhancement of academic quality.

The Master of Science in Health Informatics Administration degree program is designed to train students in the rapidly growing and dynamic field of health informatics and information management. The program provides students with a broad exposure and greater understanding of the management of health IT projects to contribute to delivery of quality patient care within the U.S. health care delivery system. The HIMS program combines both information technology and health care administration theory with real-world applications to provide a career boost for health professionals. Upon the successful completion students will be able to:

- Design, manage and interpret health classification systems, health care databases, data warehouses, health care data sets, registries, electronic health record and other mediums of health information systems
- Demonstrate the ability to interpret and comply with various aspects of state and federal legal and regulatory standards (i.e. coding and revenue, privacy, security, federal employee labor
laws, confidentiality, release of information, maintenance of health record, licensure and accreditation)

- Perform and present health informatics and information management related research methods and statistical analysis
- Adhere to and promote health informatics and information management professional ethical practices and decision making principles
- Demonstrate leadership of health informatics and information management entities, processes and standard health information systems and technologies
- Design and implement various health informatics and information management policies and procedures (i.e. fraud and surveillance, data management, personnel management, data privacy, security and confidentiality).

Program Curriculum

The HIMS curriculum requires thirty (36) credits of coursework, two (2) integrative health informatics administration courses, one of which is a capstone, five (5) technology courses, four (4) health care administration courses; and a healthcare research methods course.

Program Rules

Students must have successfully completed 30 credits prior to enrolling in HIMS 670.

Recommendations

1. Candidates for this program should have at least three years of professional work experience in a health care setting or in information technology in a health care setting
2. The recommended first courses are HCAD 600 and ITEC 610.
3. Students will benefit most by taking the courses in the order listed.
4. Students who wish to improve their graduate writing skills may take UCSP 605, Effective Graduate Writing (0).
5. Prior to enrolling in HCAD 640, students pursuing this program should have successfully completed (minimum grade of B or better at the graduate level or C or better at the undergraduate level) a three credit course in financial decision making.
6. Students who have not had any recent statistics use should take UCSP 630 prior to taking HIMS 650.

Current Curriculum

Required Courses

- ** UCSP 615, Orientation to Graduate Studies at UMUC (0)  
(to be taken within the first 6 credits of study)**
- HCAD 600, Introduction to Health Care Administration (3)
- ITEC 610, Information Technology Foundations (3)
- HIMS 650, Research Methods for Health Care Managers (3)
- INFA 610, Foundations of Information Security and Assurance (3)
- HIMS 655, Health Data Management (3)
- HCAD 640, Financial Management for Health Care Organizations (3)
- HCAD 650, Legal Aspects of Health Care Administration (3)
- HIMS 661, The Application of Information Technology in Health Care Administration (3)
- ITEC 640, Information Technology Project Management (3)
- DBST 651, Relational Database Systems (3)
- IMAT 637, IT Acquisitions Management (3)

**Capstone Course**

- HIMS 670, Health Informatics Administration Capstone (3)

**Accreditation**

In the spring of 2006, the Master of Science in Health Informatics Administration program (approved under the former title, Master of Science in Health Administration Informatics (HAIN)) satisfied all requirements to obtained accreditation by the Commission on the Accreditation for Health Informatics and Information Management Education (CAHIIM). As of spring 2017, the Master of Science in Health Informatics Administration program, obtained eligibility for graduates to register for the Registered Health Information Administrator (RHIA) national certification examination by demonstrating full compliance stipulated by the American Health Information Management Association (AHIMA), Commission for Certification on Health Informatics and Information Management (CCHIIM).

**Master of Science in Health Informatics Administration Adjunct Faculty**

Faculty within the Master of Science in Health Informatics Administration Program is a diverse group of accomplished academicians with significant industry and teaching experience in health information and informatics management and related backgrounds, which enables them to impart a superior education experience. Program faculty are certified and licensed in a vast array of healthcare specialties that include but not limited to: Registered Health Information Administrators (RHIA), Certified Coding Specialist (CCA), Licensed Health Care Risk Managers, Certified Project Manager Professionals (PMP) and Certified Health Data Analyst (CHDA). Furthermore, our experienced pool of faculty obtained industry experience with entities such as The Office of Health Information Technology (HRSA), The Centers for Medicare and Medicaid Services (CMS), The Pentagon, Georgetown University Medical Center, St. Luke’s Hospital (Houston), IBM, The U.S. Department of Health and Human Services (UDHHS), The Office of the National Coordinator (ONC), The National Naval Medical Center and Navy Surgeon General’s Office, Tricare Management Agency, Research Triangle Institute and The Pennsylvania Department of Public Health.
Academic Specialist

Mrs. Meena Bipat
Email: meena.bipat@umuc.edu
Office: (240) 684-2448

The Master of Science in Health Informatics Administration program Academic Specialist, Mrs. Meena Bipat is responsible for the coordination and response to student concerns. Mrs. Bipat, day to day tasks may also include but not limited to:

- Interacting with prospective students
- Assisting students with scheduling matters
- Interpreting and explaining department policies and procedures
- Providing assistance regarding student degree planning
- Referring students to proper university supporting resources (i.e. procedural problems such as registering, withdrawing and/or payment issues)
- Disseminating university and program related information and updates to students
- Supporting faculty and program chairs with the handling of student and program related matters
- Serving as the Co-Advisor of the Master of Science in Health Care Administration, Student Upsilon Phi Delta (UPD) Student Honor Society & the Master of Science in Health Informatics Administration, Health Informatics and Information Management Leaders of Tomorrow (HIMLOT) Student Association

Advisory Board

The Master of Science of Health Informatics Administration Program, Advisory Board is a group of industry and educational experts who advise HIMS Program staff regarding the establishment, maintenance and effectiveness of the university’s education programs and services. They provided workplace knowledge and to ensure that all aspects of HIMS education reflects the need and current conditions of the workplace and that program graduates are capable of performing as highly competent health informatics/information professionals. Typically the advisory board will comprise of a makeup of six (6) to twelve (12) board members. On average, the advisory board will meet virtually via WebEx a minimum of twice per academic year (fall/spring). In between the regular scheduled of two (2) to three (3) meetings per academic year, updates or the request for action will be communicated via email.

UNIVERSITY, DEPARTMENTAL & PROGRAM RELATED POLICIES & PROCEDURES

University

Academic Integrity
As a member of the University of Maryland University College (UMUC) academic community that honors integrity and respect for others you are expected to maintain a high level of personal integrity in your academic work at all times. Your work should be original and must not be reused in other courses.

**Classroom Civility**

Students are expected to work together cooperatively, and treat fellow students and faculty with respect, showing professionalism and courtesy in all interactions. Please review the Code of Civility for more guidance on interacting in UMUC classrooms: https://www.umuc.edu/students/support/studentlife/conduct/code.cfm (https://www.umuc.edu/students/support/studentlife/conduct/code.cfm).

**Policies and Procedures**

UMUC is committed to ensuring that all individuals are treated equally according to Policy 040.30 *Affirmative Action, Equal Opportunity, and Sexual Harassment*.

Students with disabilities who need accommodations in a course are encouraged to contact the Office of Accessibility Services (OAS) at accessibilityservices@umuc.edu, or call 800-888-UMUC (8682) or 240-684-2287.

The following academic policies and procedures apply to this course and your studies at UMUC.

150.25  **Academic Dishonesty and Plagiarism** – UMUC defines academic dishonesty as the failure to maintain academic integrity. All charges of academic dishonesty will be brought in accordance with this Policy.

151.00  **Code of Student Conduct**

The following policies describe the requirements for the award of each degree:

170.40  **Degree Completion Requirements for the Graduate School**

170.41  **Degree Completion Requirements for a Bachelor’s Degree**

170.42  **Degree Completion Requirements for an Associate’s Degree**

170.71  **Policy on Grade of Incomplete** - The grade of I is exceptional and only considered for students who have completed 60% of their coursework with a grade of B or better for graduate courses or C or better for undergraduate courses and request an I before the end of the term.

170.72  **Course Withdrawal Policy** - Students must follow drop and withdrawal procedures and
130.80 Procedures for Review of Alleged Arbitrary and Capricious Grading – appeals may be made on final course grades as described herein.

205.06 Calculation Of Grade-Point Average (GPA) for Inclusion on Transcripts and Transcript Requests – Note: Undergraduate and Graduate Schools have different Grading Policies (i.e. The Graduate School does not award the grade of D). See Course Syllabus for Grading Policies.

Library Support

Extensive library resources and services are available online, 24 hours a day, seven days a week at https://www.umuc.edu/library/index.cfm (https://www.umuc.edu/library/index.cfm) to support you in your studies. The UMUC Library provides research assistance in creating search strategies, selecting relevant databases, and evaluating and citing resources in a variety of formats via its Ask a Librarian service at https://www.umuc.edu/library/libask/index.cfm (https://www.umuc.edu/library/libask/index.cfm).

Student Support Services

At University of Maryland University College, we recognize that it takes dedication and commitment—of your time and finances—to pursue higher education, and we’re here to support you during every step of your academic journey. Please visit http://www.umuc.edu/students/support/ for a complete listing of student support services.

Learning Management Support

To successfully navigate the online classroom new students are encouraged to view the Classroom Walkthrough under Help in the upper right menu of the LEO classroom. Those requiring technical assistance can access Help@UMUC Support directly in LEO under the Help menu. Additional technical support is available 24 hours a day, seven days a week via self-help and live chat at https://www.umuc.edu/help (https://www.umuc.edu/help) or by phone toll-free at 888-360-UMUC (8682).

Departmental

Departmental Policy on Originality

The work in this class must be your own and original to this course. Work prepared for other courses or use of material obtained from other students is expressly prohibited and can result in a grade of zero "0" for the assignment and/or course failure. Please refer to The Graduate School Academic Dishonesty and Plagiarism Policy (cited in your syllabus) for more information.

Departmental Late Policy
Timely completion of all assignments is critical to student success in the Graduate School. You should take assignment deadlines seriously and plan in advance to allocate sufficient time to meet deadlines. Instructors may at their sole discretion grant limited extensions of time for unexpected business, health or personal emergencies beyond the student’s control. In order to be granted such an extension, you must make the request in advance of the due date and support the request by a compelling rationale that would be fair to others in the class. The instructor may request documentation. Any such extension will be for a specific period, not to exceed one week.

For late submissions that have not been approved by the instructor the penalty will be a five (5) percent reduction in the grade (on the hundred percent scale) for that assignment for each day that the assignment is late. No submissions will be accepted after grades have been posted for the class as a whole. There will be no extensions for the assignments due the last week of class. Late submissions of time sensitive assignments:

**Discussion Activity:**

A discussion activity is a timed (over a course of a week) activity intended to promote active discussion of the course material among students as well as productive engagement between students and faculty on the principles and practices being introduced in the course. If you are unable to make the required postings to a discussion due to an unexpected business, health, or personal emergency beyond the student's control, you may request that the faculty member provide an alternative assignment. Such request should be made within one week of the missed discussion activity. You must support this request with a compelling rationale, indicating why such an action is justified. Faculty has discretion to grant or deny a request for an alternative assignment. Should such a request be granted, the faculty member will determine a submission due date. There will be no extensions of that due date. Failure to meet the due date will result in a zero (0) for that week's discussion activity.

**Other Time Sensitive Assignments:**

Certain assignments in your class (such as some quizzes, tests, and certain exercises) might be considered time sensitive. The maximum possible extension for such assignments will be three (3) days. (Note: Encountering technical problems on a day when an assignment is due creates lots of stress. Practical tip: Students who plan to submit work a day in advance seem to have less difficulty.)

**Departmental Policy on Extra Credit**

There is no "extra credit" available to students in this class, and you will not be able to redo assignments after they have been graded.

**Program**

**Master of Science in Health Informatics Administration Program**

**Discussion Board Guidelines**

Students enrolled in the University of Maryland University Maryland (UMUC), Master of Science in Health Informatics Administration (HIMS) is expected to participate in discussions using the
Discussion Boards embedded within the Learning Management System (LMS) online classroom. As a replacement of the traditional in-class experience, discussion boards in an online environment enable classroom engagement, interaction and communication among students as well as with your professor. At minimum all initial postings must contain 250 words and all replies at minimum must contain at least 75 words. A minimum of two (2) scholarly peer-reviewed references are required for each initial posting. HIMS students are encouraged to read a minimum of ten (10) posts by fellow classmates to ensure that the topic of discussion(s) is thoroughly understood. HIMS students are required to initially post to the given topic by the close of Wednesday at 11:59 PM EST and respond to at least at minimum two other student postings by the close of Sunday at 11:59 PM EST.

Master of Science in Health Informatics Administration Program
Live Conferences Guidelines

Live conferences may be included in the Master of Science in Health Informatics Administration program curriculum. This includes but not limited to the following core-courses: HCAD 640, HCAD 650, HIMS 650, HIMS 655, HIMS 661 and HIMS 670. Live conferences are synchronous real-time interactions between the Professor and the entire class. Scheduled live conferences is an excellent tool that promotes one-on-one communication with your professor, the opportunity to explore and apply weekly course topics/concepts, discuss upcoming assignments and projects and review content in preparation for an upcoming assessment (quiz/exam. Live conferences are non-graded.

Live conferences will be conducted via WebEx (or a similar system). WebEx is a communications system that supports virtual meetings, presentations and teleconferences etc. or another similar communications system selected adopted by your Professor. The confirmed schedule including the date and times within the course room as an announcement and/or email will be provided by your professor. In some cases, if multiple sections are held in a given semester, a master schedule maybe provided to participate in a live conference hosted by a fellow professor.

Typically live conferences are held for one (1) hour. Within twenty-four (24) – forty-eight (48) hours after the recorded live conference, your professor, will follow up with the link to access the recording.

Grading Scale

According to UMUC’s grading policy, the following marks are used:

<table>
<thead>
<tr>
<th>Undergraduate</th>
<th>Graduate</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>90-100</td>
</tr>
<tr>
<td>B</td>
<td>80-89</td>
</tr>
<tr>
<td>C</td>
<td>70-79</td>
</tr>
</tbody>
</table>

*70-79*
<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>D</td>
<td>60-69</td>
<td>N/A**</td>
</tr>
<tr>
<td>F</td>
<td>59 or below</td>
<td>69 or below</td>
</tr>
<tr>
<td>FN</td>
<td>Failure-Non attendance</td>
<td>Failure-Non attendance</td>
</tr>
<tr>
<td>G</td>
<td>Grade Pending</td>
<td>Grade Pending</td>
</tr>
<tr>
<td>P</td>
<td>Passing</td>
<td>Passing</td>
</tr>
<tr>
<td>S</td>
<td>Satisfactory</td>
<td>Satisfactory</td>
</tr>
<tr>
<td>U</td>
<td>Unsatisfactory</td>
<td>Unsatisfactory</td>
</tr>
<tr>
<td>I</td>
<td>Incomplete</td>
<td>Incomplete</td>
</tr>
<tr>
<td>AU</td>
<td>Audit</td>
<td>Audit</td>
</tr>
<tr>
<td>W</td>
<td>Withdraw</td>
<td>Withdraw</td>
</tr>
</tbody>
</table>

**The grade of "B" represents the benchmark for The Graduate School. Students must maintain a Grade Point Average (GPA) of 3.0 or higher. Classes where final grade of C or F places a student on Academic Probation must be repeated. ** The Graduate School does not award the grade of D.**
PROFESSIONAL ASSOCIATIONS

The American Health Information Management Association (AHIMA)

History

The American Health Information Management Association (AHIMA) traces its history back to 1928 when the American College of Surgeons established the Association of Record Librarians of North America (ARLNA) to "elevate the standards of clinical records in hospitals and other medical institutions." This farsighted recognition of the importance of medical record quality to patient care and research underlies the organization today.

Since its formation, the organization known now as AHIMA has undergone several name changes that reflect the evolution of the profession. In 1938 the Association changed its name to the American Association of Medical Record Librarians (AAMRL) for a more succinct representation of the membership. AAMRL moved forward with the creation of standards and regulations that established its members as medical record experts. When the Association became the American Medical Record Association in 1970, medical record professionals had increased their involvement in hospitals, community health centers, and to other health service facilities outside the hospital. They had also begun to play a critical role at their institutions in the administration of federal programs such as Medicare.

As the healthcare industry underwent restructuring and decision-making became increasingly driven by data, the Association changed its name in 1991 to the American Health Information Management Association. Its current name captures the expanded scope of clinical data beyond the single hospital medical record to health information comprising the entire continuum of care.

Mission

AHIMA leads the health informatics and information management community to advance professional practice and standards. AHIMA is working to promote this mission through:

- Informatics: Transforming data into Health Intelligence
- Leadership: Developing HIM leaders across all healthcare sectors
- Information Governance: Being recognized as the health industry experts in information governance
- Innovation: Increasing thought leadership and evidence-based HIM research
- Public Good: Empowering consumers to optimize their health through management of their personal health information.
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.

Core Values

- Quality: Demonstrated by an abiding commitment to innovation, relevance and continuous improvement in programs, products and services.
- Integrity: Demonstrated by openness in decision-making, honesty in communication and activity, and ethical practices that command 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

AHIMA Timeline

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1928 (Oct. 11):</td>
<td>Association of Record Librarians of North American (ARLNA) founded</td>
</tr>
<tr>
<td>1929:</td>
<td>Bulletin of the Association of Record Librarians of North America published</td>
</tr>
<tr>
<td>1933:</td>
<td>Registered Record Librarian (RRL) credential established.</td>
</tr>
<tr>
<td>1938:</td>
<td>Bulletin, American Association of Medical Record Librarians, replaces</td>
</tr>
<tr>
<td>Year</td>
<td>Event</td>
</tr>
<tr>
<td>------</td>
<td>-------</td>
</tr>
<tr>
<td>Dec. 1944</td>
<td>Name of association changed to American Association of Medical Record Librarians (AAMRL) when Canadian members formed their own organization</td>
</tr>
<tr>
<td>Dec. 1944</td>
<td><em>Journal of the American Association of Medical Record Librarians</em> replaces <em>Bulletin, American Association of Medical Record Librarians</em></td>
</tr>
<tr>
<td>1953</td>
<td>Accredited Record Technician (ART), credential established.</td>
</tr>
<tr>
<td>1954</td>
<td>Certified Record Librarian (CRL) designation established to recognize RRLs who had been in the field for at least 15 years and had made significant contributions to the profession. It was discontinued in 1964 because the general membership thought its use detracted from that of the RRL.</td>
</tr>
<tr>
<td>Jan 1964</td>
<td><em>Medical Record News, the Journal of the American Association of Medical Record Librarians</em> replaces <em>Journal of the American Association of Medical Record Librarians</em></td>
</tr>
<tr>
<td>1970</td>
<td>Name of association changed to American Medical Record Association (AMRA)</td>
</tr>
<tr>
<td>Feb 1970</td>
<td><em>Medical Record News, the Journal of the American Medical Record Association</em> replaces <em>Medical Record News, the Journal of the American Association of Medical Record Librarians</em></td>
</tr>
<tr>
<td>1978</td>
<td>Registered Record Administrator (RRA) credential replaces the Registered Record Librarian (RRL) credential</td>
</tr>
<tr>
<td>Aug 1980</td>
<td><em>Journal of the American Medical Record Association</em> replaces <em>Medical Record News</em></td>
</tr>
<tr>
<td>1991</td>
<td>Name of association changed to American Health Information Management Association (AHIMA)</td>
</tr>
<tr>
<td>Nov 1991</td>
<td><em>Journal of the American Health Information Management Association</em> (Journal of AHIMA) replaces <em>Journal of the American Medical Record Association</em></td>
</tr>
<tr>
<td>1992</td>
<td>Certified Coding Specialist (CCS) credential established</td>
</tr>
</tbody>
</table>
1997: Certified Coding Specialist - Physician-based (CCS-P) credential established

1999: Fellow of the American Health Information Management Association (FAHIMA) designation established to recognize members who have made significant and lasting contributions to the HIM profession

2000: Registered Health Information Technician (RHIT) credential replaces the Accredited Record Technician (ART) credential; Registered Health Information Administrator (RHIA) credential replaces the Registered Record Administrator (RRA) credential.

2001: Certified Coding Associate (CCA) entry-level coding credential established

2002: Certified in Healthcare Privacy (CHP) credential created

2002: Certified in Healthcare Security (CHS) credential, sponsored by HIMSS and administered by AHIMA created

2002: Certified in Healthcare Privacy and Security (CHPS) credential, sponsored jointly by AHIMA and HIMSS, created

2008: Certified Health Data Analyst (CHDA) credential created

2011: Certified Documentation Improvement Practitioner (CDIP) credential created

2011: Certified Healthcare Technology Specialist (CHTS) credential created (this credential was originally known as HIT Pro)

**PROFESSIONAL CODE OF ETHICS**

The American Health Information Management Association

**Purpose**

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:

1. **Promotes high standards of HIM practice**
2. **Identifies core values on which the HIM mission is based**
3. **Summarizes broad ethical principles that reflect the profession's core values**
4. **Establishes a set of ethical principles to be used to guide decision-making and actions**
5. **Establishes a framework for professional behavior and responsibilities when professional obligations conflict or ethical uncertainties arise**
6. **Provides ethical principles by which the general public can hold the HIM professional accountable**
7. **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.

- A health information management professional shall:
- Advocate, uphold, and defend the individual's right to privacy and the doctrine of confidentiality in the use and disclosure of information.
- 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.
- 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.
- Refuse to participate in or conceal unethical practices or procedures and report such practices.
- Advance health information management knowledge and practice through continuing education, research, publications, and presentations.
- Recruit and mentor students, peers and colleagues to develop and strengthen professional workforce.
- Represent the profession to the public in a positive manner.
- 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.
- State truthfully and accurately one's credentials, professional education, and experiences.
- Facilitate interdisciplinary collaboration in situations supporting health information practice.
- Respect the inherent dignity and worth of every person.

AHIMA Standards of Ethical Coding

Coding professionals should:

- Apply accurate, complete, and consistent coding practices for the production of high-quality healthcare data.
- 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.
- 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.
- 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).
- Refuse to change reported codes or the narratives of codes so that meanings are misrepresented.
- 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.
- Facilitate interdisciplinary collaboration in situations supporting proper coding practices.
- Advance coding knowledge and practice through continuing education.
- Refuse to participate in or conceal unethical coding or abstraction practices or procedures.
- 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).
- Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal coding practices, and fosters trust in professional activities.

(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. Revised 2013: http://bok.ahima.org/doc?oid=105098)
The Healthcare Information and Management Systems Society (HIMSS)

History

The Healthcare Information and Management Systems Society (HIMSS) was organized in 1961 as the Hospital Management Systems Society (HMSS), an independent, unincorporated, nonprofit, voluntary association of individuals. HMSS was founded on the thesis that an organized exchange of experience among members and other interested parties could promote a better understanding of the principles underlying hospital management systems and could develop new principles for improving the skills of the person who directs hospital programs and the practitioner who analyzes, designs, or improves hospital systems. The purpose of the Society as stated in the original constitution was “to promote the continual improvement of hospital management systems through organized programs of research, education, and professional practice.”

Mission

Globally, lead endeavors optimizing health engagements and care outcomes through information technology.

Vision

Better health through information technology.

HIMSS Code of Ethics

The HMSS Code of Ethics was developed in 1964 and adopted in 1965 and minor changes were made in 1980. It was instituted to serve as guidelines to all HMSS members for their work in hospital management systems. The Code of Ethics stipulates professional behavior that requires members to:

- Cooperate in promoting the effectiveness of the profession by exchanging information and experience with colleagues and other groups dedicated to the improvement of hospital management systems.
- Endeavor to extend public knowledge of the objectives, activities, and contributions of their profession.
- Act in professional matters with fidelity to the best interests of the client or employer, as long as such interest does not conflict with this code.
- Endeavor to protect the professional from misunderstanding and misinterpretation.
- Take proper safety precautions in the design of systems and facilities that affect patients, employees, or the public.
- Perform the assigned work in a spirit of cooperation and understanding and give due regard to the dignity and worth of the individual.
- Refrain from using their position or influence for selfish advantage and from advertising their work in a self-laudatory manner.
- Refrain from expressing public opinions on matters for which they are not qualified, and abstain from practices likely to discredit or to do injury to the dignity and honor of the profession.
- Take care that credit is given to those to whom credit is properly due.
- Refrain from intervening in the practice of a colleague without the colleague’s knowledge and from disparaging the work of the colleague.

**MEMBERSHIP**

It is recommended that students join AHIMA and or HIMSS by the completion of HIMS 655, Health Data Management. Student membership entitles students to various benefits that include but not limited to: discounts on textbooks, certification examinations, discounted hotel and rental car rates and other products and services available active members. The one-time student membership fee to join AHIMA is $45.00 and $30.00 to join HIMSS (Note: Membership Fees are Subject to Change).

- For more information and link to join AHIMA: [http://www.ahima.org/membership](http://www.ahima.org/membership)
- For more information and link to join HIMSS: [http://www.himss.org/membership/student](http://www.himss.org/membership/student)
Founded in the summer of 2016, the Health Informatics & Information Management Leaders of Tomorrow (HIMLOT) is a student and alumni-led organization within the Master of Science in Health Informatics Administration program at the University of Maryland University College (UMUC). As participating members, both students and graduates will receive professional guidance and support from the university and program faculty. The benefits of membership include mentorship, networking, professional development, career coaching, research, volunteer and service opportunities as well as other opportunities to enhance the knowledge and career advancement of its members. For more information, contact Program Chair & HIMLOT Advisor, Dr. Zakevia D. Green-Lawson, Ph.D., MSHA, LHRM, RHIA, FAHIMA via email at zakevia.green-lawson@umuc.edu or Program Academic Specialist & HIMLOT Co-Advisor, Mrs. Meena Bipat via email at meena.bipat@umuc.edu.

Join us on our HIMLOT Google Plus LinkedIn site: https://plus.google.com/u/1/communities/114431161617175285316

UMUC Academic Clubs/Student Organization “HIMLOT” Profile: http://www.umuc.edu/students/support/studentlife/clubs.cfm
Registered Health Information Administrator (RHIA)

Whether you're just starting the journey or well on the path of a successful HIM career, AHIMA certification is your guide to career enhancement, increased salary, and greater success in your chosen profession. Earning an AHIMA credential puts you in a special league, positioning you as a leader and role model in the health informatics and information management community. Investing in AHIMA certification is an investment in yourself and your long-term career.

Upon the successful completion of the Master of Science in Health Informatics Administration Program, graduates are strongly encouraged to register for one of the healthcare industry most sought after certification, the Registered Health Information Administrator (RHIA). Working as a critical link between care providers, payers, and patients, the RHIA:

- Is an expert in managing patient health information and medical records, administering computer information systems, collecting and analyzing patient data, and using classification systems and medical terminologies.
- Possesses comprehensive knowledge of medical, administrative, ethical and legal requirements and standards related to healthcare delivery and the privacy of protected patient information.
- Manages people and operational units, participates in administrative committees, and prepares budgets.
- Interacts with all levels of an organization - clinical, financial, administrative, and information systems - that employ patient data in decision-making and everyday operations.

(Note: Students in CAHIIM-accredited programs for RHIT or RHIA, enrolled in their final term of study, are now eligible to apply for and take their respective certification exam early. Eligible students include the following: Students currently enrolled and in their last term of study; Students who have completed their coursework but have not yet graduated; Graduates currently waiting for their official transcripts.

Suggested Resources

AHIMA Candidacy Guide:
http://www.ahima.org/~/media/AHIMA/Files/Certification/Candidate_Guide.ashx
Certified Associate in Healthcare Information and Management Systems (CAHIMS) / Certified Professional in Healthcare Information and Management Systems (CPHIMS)

HIMSS conducts certification examination for programs in healthcare information and management systems:

- **Certified Professional in Healthcare Information and Management Systems (CPHIMS):** is a professional certification program for experienced healthcare information and management systems professionals.
- **Certified Associate in Healthcare Information and Management Systems (CAHIMS):** is designed for emerging professionals who may or may not have experience within the industry. **CAHIMS is designed to be a pathway for careers in health IT**

Each certification examination is designed to test a well-defined body of knowledge representative of professional practice in healthcare information and management systems. Successful completion of a certification examination is an indicator of broad-based knowledge in healthcare information and management systems. Certification examinations conducted by HIMSS are independent of each other. Each leads to a certification credential in healthcare information and management systems.

**Suggested Resources:**

APPENDIX A: COURSE DESCRIPTIONS

UCSP 615, Orientation to Graduate Studies at UMUC
(Required within the first 6 credits of graduate study for all new graduate students, except MBA students). An overview of the skills needed for academic and professional success. Focus is on enhancing communication and critical thinking skills. Assignments provide familiarity with tools such as social media and library and information resources. APA style and resources are also addressed. 0 Credits

HCAD 600, Introduction to Health Care Administration
An introduction to the principles of management and leadership as the foundations for the administration of health care products and service delivery. The evolution of management principles and practices are traced and the bases for health care administration are analyzed. Emphasis is on the management of global health care systems in technological societies and the need for innovation and creativity in health care administration. Focus is on mastering graduate-level critical thinking, writing, and ethical decision making skills. 3 Credits

ITEC 610, Information Technology Foundations
A fundamental study of technology and its applications, as well as the economic and social issues they have raised. Topics include computers, peripherals, databases, and networks; operations (of business, government, and other enterprises), decision support systems, and acquisition of information technology resources; and information security, productivity, equitable access by users, intellectual property rights, and global reach. Discussion also covers current and future developments in the field and their implications. 3 Credits

HIMS 650, Research Methods for Health Care Managers
(Formerly HAIN 650.) Prerequisite: HIMS 655. The application of basic statistics and research methods from the health informatics/information and health care administration perspective. Emphasis is on the analysis of clinical and administrative data to assist in decision making; health care planning; research; reporting to local, state and national entities; and policy development. Topics include institutional review boards, ethics in research, the research process, epidemiology, case mix, vital statistics, registries, interpretation and presentation of data, data collection, and quality outcomes and measures. 3 Credits

INFA 610, Foundations of Information Security and Assurance
(Must be taken as the first course in the program.) An overview of techniques for ensuring and managing information security. Topics include administrative and technical security controls to prevent, detect, respond to, and recover from cyber attacks; risk and vulnerability analysis to select security controls; security planning; security architecture; security evaluation and assessment; and legal, ethical, and privacy aspects of information assurance. Discussion also covers information security fundamentals, such as cryptography, authentication, and access control techniques, and their use in network, operating system, database, and application layers. Security issues of current importance are stressed. 3 Credits
HIMS 655, Health Data Management
(Formerly HAIN 655) A foundational overview of health informatics/information management as a profession and as a subset of the health care delivery system. Health informatics/information principles and practices are explored as they relate to the application, analysis, management, and architecture of health data. Topics include data mapping, data structures, clinical terminology, and classification systems. Discussion also covers ICD-10, health record content, documentation standards, data management policies and procedures, meaningful use, data sources, and information governance. 3 Credits

HCAD 640, Financial Management for Health Care Organizations
Prerequisite: MGMT 640. An in-depth study of health care economics and the financial management of health care organizations. The economic principles underlying the American health care market and the financial management of health services organizations within that market are examined. Analysis covers free market and mixed market economies; barriers to free market economies; health care industry regulation, licensure, and certification; and various coverage and health care payment mechanisms. Topics also include reimbursement mechanisms and their effect on health care provider organizations, managed care, capitation, and per case or per diagnosis payment, as well as how these financial strategies are utilized by third-party payers. Focus is on financial challenges such as uncompensated care, cost increases, increased competition, and increased regulation and how health care providers should respond to them. Ratio analysis, cost analysis, working capital, capital budgeting and investment in relation to net present value and value added to the organization, and other financial management techniques are also discussed. 3 Credits

HCAD 650, Legal Aspects of Health Care Administration
A comprehensive analysis of the more significant legal issues encountered by health care administrators and the ramifications of those issues. Both theoretical and practical applications of law are addressed with an analytical focus on the prompt identification of legal and bioethical issues arising from and affecting various health care employment settings. The intersection of law, ethics, and bioethics is scrutinized in various contexts. The principles of health care law in a complex constitutional system are examined in relation to current proposals and policy developments in areas such as privacy, contracts, tort reform, and the regulation of the health care marketplace. Topics include legal and regulatory constraints imposed on the health care industry, the liability of health care providers, the rights of patients, employment law and labor relations, and administrative law for health care organizations. 3 Credits

HIMS 661, The Application of Information Technology in Health Care Administration
(Formerly HAIN 661) Prerequisite: HIMS 655. An overview of historical, current, and emerging health information systems and technologies. Focus is on applying a system life-cycle process to the adoption of an electronic health record system. Discussion covers various ways that information technology can aid in operations management and the strategic decision-making process. Topics include project management, clinical and decision support systems, report generation, data analytics, workflow processes, health information exchange, enterprise information management,
training and development, data quality, user interfaces, data capturing technologies, personal health records, population health, data safeguards, business intelligence, and artificial intelligence. 3 Credits

**ITEC 640, Information Technology Project Management**
An examination of the fundamental principles and practice of managing programs and projects in an information processing and high-tech environment. The dynamic nature of IT and the effect of life cycles are explored. The fundamental building blocks of high-tech management styles (including project planning, organizational structure, team building, and effective control mechanisms) are addressed. Discussion covers the effect of product and project life cycles in delivering a successful IT project, considering the obsolescence factors in procurement/stakeholder contracts. The goal is to gain a solid foundation to successfully manage each phase of the project life cycle, work within organizational and cost constraints, set goals linked directly to stakeholder needs, and utilize proven management tools to execute a dynamic project on time and within budget. Emphasis is on how to apply the essential concepts, processes, and techniques in the management of large-scale governmental or commercial programs. Topics also include the need for global vision, strong planning techniques, appropriate training before introducing any IT product into the market, and discipline in executing tasks. 3 Credits

**DBST 651, Relational Database Systems**
An introduction to relational databases, one of the most pervasive technologies today. Presentation covers fundamental concepts necessary for the design, use, and implementation of relational database systems. Focus is on basic concepts of database modeling and design, the languages and facilities provided by database management systems, and techniques for implementing relational database systems. Topics include implementation concepts and techniques for database design, query optimization, concurrency control, recovery, and integrity. A foundation for managing databases in important environments is provided. Assignments require use of a remote access laboratory. 3 Credits

**IMAT 637, IT Acquisitions Management**
A study of management practices related to the acquisition of IT systems, components, and services. Emphasis is on the importance of enterprise strategic planning and the concomitant IT strategic planning. Issues related to the development of the IT acquisition plan, financial planning and budgeting, integration of the proposed acquisition within the overall goals of the enterprise, and related IT program management are examined in the context of overarching management challenges. Federal IT systems, contract and procurement policies, and procedures provide examples for analysis of concepts with wider relevance. 3 Credits

**HIMS 670, Health Informatics Administration Capstone**
(Formerly HAIN 670) Prerequisite: Completion of 30 credits of program coursework, including HIMS 650, HIMS 655 and HIMS 661. Review of the proficiencies and competencies of a registered health information administrator (RHIA) as preparation for taking the RHIA certification exam. Emphasis is on professional development and test-taking strategies. An evidence-based capstone project on a topic related to health informatics or health information requires the integration and application of knowledge and skills acquired through previous coursework and experience. Discussion covers
informatics issues, challenges for U.S. and global health care systems, potential new health care delivery models, approaches to strategically shaping local and national informatics policy, and the role of information technology in supporting the full continuum of care in health organizations. Tools and methods for strategic planning, implementing, using, and evaluating the efficacy of information systems are explored. 3 Credits
APPENDIX B. RHIA CONTENT OUTLINE

Number of Questions on Exam: 180 multiple choice (160 scored/20 pretest)
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/rediscoveries 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 work flow 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., cost benefit, business planning)
   F3. Assist with preparation of capital budget

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

H. Ethics
   H1. Adhere to the AHIMA code of ethics

I. Project Management
   I1. Utilize appropriate project management methodologies

J. Vendor/Contract Management
   J1. Evaluate and manage contracts (e.g., vendor, contract personnel, maintenance)

K. Enterprise Information Management
   K1. Develop and support strategic and operational plans for entity-wide health information management

Adopted from the AHIMA Certification Candidate Guide
Updated March 3, 2016
I, ________________________________, have reviewed a copy of the University of Maryland University College, Master of Science in Health Informatics Administration Program, 2017-2018 Program Handbook. I am read, understand and fully accept the program guidelines, expectations and requirements.

Print Name: ____________________________________________

Signature: ____________________________________________
APPENDIX D. CONFIDENTIALITY STATEMENT

MASTER OF SCIENCE IN HEALTH INFORMATICS ADMINISTRATION PROGRAM
CONFIDENTIALITY STATEMENT

Throughout the Master of Science in Health Informatics Administration Program at the University of Maryland University College, I may have access to patient medical information. I realize that patient information is private and must be kept confidential. I also realize that unauthorized release of information is punishable by a fine and/or imprisonment.

Throughout my educational program at the University of Maryland University College, I will at no time inappropriately release confidential information and I will adhere to the Code of Ethics of the American Health Information Management Association and/or the Code of Ethics of the Healthcare Information and Management Systems Society.

I understand that unauthorized release of patient information may result in immediate termination from the program or further academic actions.

Date: _____________________

Print Name: __________________________________________

Signature: __________________________________________
APPENDIX D. PROFESSIONAL RESOURCES & REFERENCES

- AHIMA Career & Student Center [http://www.ahima.org/careers](http://www.ahima.org/careers)
- American Health Information Management Association (AHIMA) [www.ahima.org](http://www.ahima.org)
- Allied Health Opportunities [www.gvpub.com](http://www.gvpub.com)
- American Health Quality Association [www.ahqa.gov](http://www.ahqa.gov)
- American Hospital Association [www.aha.org](http://www.aha.org)
- American Hospital Association Research Data [www.ahadata.com](http://www.ahadata.com)
- American Hospital Director [www.ahd.com](http://www.ahd.com)
- American Medical Association [www.ama-assn.org](http://www.ama-assn.org)
- American Medical Informatics Association [www.amia.org](http://www.amia.org)
- American National Standards Institute [wwwansi.org](http://wwwansi.org)
- Association for Clinical Documentation Improvement Specialists [http://hcpro.com/acdis/about.cfm](http://hcpro.com/acdis/about.cfm)
- Association for Healthcare Documentation Integrity [www.ahdi.gov](http://www.ahdi.gov)
- Blue Cross/Blue Shield [www.bcbs.com](http://www.bcbs.com)
- Center for Disease Control and Prevention [www.cdc.gov](http://www.cdc.gov)
- Centers for Medicare and Medicaid [www.cms.gov](http://www.cms.gov)
- Center for Health Transformation [www.healthtransformation.net](http://www.healthtransformation.net)
- Certification Commission for Healthcare Information Technology [www.cchit.org](http://www.cchit.org)
- Commission on the Accreditation of Rehabilitation Facilities [www.carf.org](http://www.carf.org)
- Compliance Information [www.compliancealert.net](http://www.compliancealert.net)
- Department of Health & Human Services [www.hhs.gov](http://www.hhs.gov)
• eHealth Initiative www.ehealthinitiative.org
• Federation of State Medical Boards www.fsmb.org
• Food & Drug Administration www.fda.gov
• Healthcare Cost and Utilization Project www.ahrq.gov/data/hcup
• Healthcare Information and Management Systems Society www.himss.org
• Health Grades www.healthgrades.com
• Health Level Seven www.hl7.org
• Joint Commission www.jointcommission.org
• Kaiser Family Foundation www.statehealthfacts.kff.org
• National Association for Healthcare Quality www.nahq.org
• National Association of Health Data Organizations www.nahdo.org
• National Center for Health Statistics www.cdc.gov/nchs
• National Committee for Quality Assurance www.ncqa.org
• National Committee on Vital and Health Statistics www.ncvhs.hhs.gov
• National Information Center for Health Services Administration www.nichsa.org
• National Information Standards Organization www.niso.org
• National Institute of Health www.nih.gov
• National Quality Measures Clearinghouse www.qualitymeasurers.ahrq.gov
• Office of the National Coordinator of Health Information Technology www.hhs.gov/healthit
• Robert Wood Johnson Foundation www.rwjf.org
• Vital and Health Statistics www.ncvhs.hhs.gov