

# Checks, Balances, and Ethics: Implementing Financial Controls for Associations

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Health information management (HIM) professionals are recognized for their compliance-focused activities. Coding professionals, for example, assign codes based on the available documentation and the rules that define proper code application. When hospital coders are asked to resequence a condition for a higher level DRG that was not the principal reason for admission, they resist and explain the rules defined in *Coding Clinic*. When professional coders see level 5 being applied for an outpatient encounter for a runny nose during the pollen season, they question a complete physician exam and full review of systems driven by the EHR. Additionally, HIM professionals ensure records are completed by only the appropriate clinician and that information is released only to authorized parties.

HIM professionals have agreed to abide by a code of ethics that places the patient first. They ensure that daily work is accurate and compliant with federal, state, regulatory and accrediting entity rules, and they report inappropriate activities. But a struggling economy, reductions in force at healthcare organizations and other places of employment, and other forces that drive temptation may cause some individuals—including HIM professionals—to cross ethical boundaries. When checks and balances are not in place in an organization, these transgressions can be even more difficult to prevent.

The ethical course of action is not always the easiest course of action and sometimes consciences need reinforcement. This is as true for HIM associations (regional, state, local) as it is for individuals. State, regional, and local HIM associations (HIMAs) need to ensure their cash management practices have sufficient checks and balances in place to fulfill the fiduciary role that HIMA leaders accept when elected to their respective offices.

These relatively simple practices include, but are not limited to:

- Requiring receipts for ANY expenditure that is reimbursed or paid for by the HIMA
- Requiring two signatures for checks issued (the treasurer and another officer that has no role in collecting monies for the HIMA)
- Performing quarterly (or more frequent) verification of the cash balances, deposits, withdrawals, and expenditure accounting by two officers
- Requiring a criminal background check and bonding of the treasurer
- Arranging for routine external audits

Although effective cash management may seem most critical in huge corporations where large sums of money are at stake, ethical lapses do occur on a smaller scale. In fact, the temptation may be greater in smaller environments because cash management practices often have not been put into place. As a result, embezzlement does occur in smaller organizations (for example, in regional HIMAs) and the breach of trust created by these ethical lapses has a tremendous detrimental effect on the organization and its members. The precautionary practices listed above are thus extremely important regardless of the organization's size.

If discrepancies are uncovered, anyone involved must be allowed to explain the discrepancy to the Board of Directors as a whole. A confession of inappropriate behavior does not excuse the HIMA Board's responsibility for reporting the unethical activity to AHIMA's Professional Ethics Committee and other authorities, as appropriate. Having knowledge of a wrongdoing but failing to report it is an ethical violation.

The ethical code that guides HIM professionals holds the health information management profession to a high standard and provides a path when navigating difficult situations. Upholding the tenets of the AHIMA Code of Ethics is something each of us can and must do to maintain public respect for the profession, and it is imperative to the collective contribution of HIM professionals to quality healthcare.

## Contributing Authors

Rose T. Dunn, MBA, RHIA, CPA, CGMA, FACHE

Jill Callahan Klaver, JD, RHIA

Laurie Rinehart-Thompson, JD, RHIA, CHP, FAHIMA

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