

HIM as the Middleman to Informatics and Data Analytics

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We hear so much about the amount of data available in healthcare today. But we are just beginning to understand the importance of analyzing that data to make decisions. As buzzwords like “information governance” and “data analytics” are becoming more mainstream, the analysis of data is becoming an expectation—a requirement, in fact—for healthcare organizations. It is no longer an acceptable practice to ask for information and not do anything with it. In order to continue to be progressive in healthcare and to meet the “[triple aim](#)” we need to analyze and use healthcare data more effectively to produce the kind of outcomes in healthcare that are needed and that our consumers expect.

Given this lofty goal, the members of the AHIMA Informatics and Data Analytics Task Force were asked to share some thoughts about how HIM professionals are putting this expectation into action. One task force member started with sharing some background definitions: “In general, informatics is the natural progression of health information management. [Webster’s definition](#) of informatics is: the collection, classification, storage, retrieval and dissemination of recorded knowledge. HIM has been doing that even with the use of paper records—providing the records to other people—and natural progression into the electronic world, free text, structured data fields.”

Resoundingly, the overwhelming feeling of the team members echoed the importance of HIM to the progression of informatics and data analytics in healthcare organizations. One of the respondents stated, “We are the profession who has this knowledge to manage and analyze data accurately. We have the text book knowledge and best practice experience (and) can contribute to the informatics war, the new terminology, the new demand and broader aspects and domains of healthcare.” In fact, another member went on to say that “Our profession needs to emphasize that we understand the data and what it is saying. It justifies that we are needed for that [type of new role]. HIM professionals make the best data analysts because they truly understand the data!”

One of the members also mentioned that HIM is the perfect middleman. So, we looked up “middleman” and found this book called “[The Middleman Economy](#)” and the editorial about it on [this link](#). It states:

“Middlemen are more prevalent—and more important—than ever. Agents, brokers, dealers, and resellers get a bad rap, but they play a crucial role in almost every platform today—including the ones that were meant to cut them out of the transaction. As a result, being an effective middleman has become an even more valuable skill than it was in the past.” The book’s author, Marina Krakovsky, outlines six roles to embrace and execute to be an effective middleman:

- The Bridge
- The Certifier
- The Enforcer
- The Risk Bearer
- The Concierge
- The Insulator

While an HIM professional could play all of these roles within a 24-hour period, the role that seems to complement HIM the most is that of the Concierge. “The Concierge reduces hassles and helps clients make good decisions in the face of information overload.” Sound familiar? Our clients could be the patient, the clinician, the health information exchange organization, the payor, the federal government... the list goes on and on.

So what does all of this mean for today’s HIM professional? One task force member summed it up best: “[There is] huge potential in the direction that HIM is going toward. It will take time to convince people of the value that we as HIM professionals hold. The return on investment needs to be envisioned and the HIM profession needs to be sold—[HIM professionals must be the] lobbyists in making the change happen in today’s healthcare environment.” Another task force

member described our value and the value of data as being able to "...bring about a proactive versus a reactive approach. Being able to identify and mitigate the 'why' and be proactive for these situations can have a financial impact on facilities. HIM can prove this benefit of a proactive approach."

We're in an economy—whether the financial, housing, or healthcare sector—where convenience is expected. When online shopping, we expect websites such as Amazon.com to know our preferences because of what we've clicked on in the past. We expect our social media accounts such as Facebook to remember our password and only show us posts from friends and businesses that we've demonstrated preference for within the website. All of this convenience is based on data. Amazon and Facebook have made the data meaningful to the consumer. Healthcare is in the process of doing the same thing. Person-centric care is an expectation, not just a quality measure. HIM is the perfect and essential middleman. We just need to put ourselves in the right light.

So are you ready to take the next step towards being an informatics and data analytics HIM middleman? AHIMA offers two pathways to certification in the fields of Informatics and Data Analytics. With the continuing advancements in technology and the increasing demand for qualified health informatics professionals, AHIMA's new informatics credential will provide credibility and recognition to individuals who possess the required knowledge and expertise of health informatics. The new informatics credential will help Informatics professionals demonstrate competency in the informatics field, and the CHDA certification demonstrates mastery in the field of data analytics. To learn more about obtaining the CHDA credential, visit the AHIMA.org CHDA certification page here: <http://www.ahima.org/certification/chda>.

The Informatics beta exam will launch in December 2016. If you'd like to take the beta exam for a reduced cost of \$119, visit <https://www.surveymonkey.com/r/LKBG8XM>.

The [AHIMA Data Institute: Making Information Meaningful](#) meeting will be held December 8-9 in Las Vegas, NV. The Data Institute offers innovative best practices for data management from experts relaying real-world experiences on critical topics such as patient safety and quality of care, evidence-based medicine pathways, pay for performance, hospital readmission rates, and population health and reporting.

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