

Voice in the Future: HIM Director Takes HIM Seat in HIE Discussions

Save to myBoK

by Chris Dimick, staff writer

Frank Kribbs, RHIA, couldn't sit idle while others discussed core HIM issues. As soon as Kribbs heard about the work groups being formed nationwide to discuss privacy and security issues related to interoperable health information exchange (HIE), he volunteered to help.

HIM needed a voice in this discussion, Kribbs notes. The outcome of the project would likely help shape the future of HIE and the future of HIM. Kribbs joined up and then encouraged other HIM professionals to join their state work groups.

"Other entities are going to be setting the stage for how we do our jobs in the future if we do not step up and lead the way," Kribbs wrote in an AHIMA Communities of Practice posting last year at the beginning of the project. "I can only imagine what pieces of the puzzle would be left undone if HIM professionals were not aware of this project and [never] stepped up in each of the states and territories participating."

Getting Involved

HIM is a perfect fit for the self-described "detail oriented" Kribbs, who has worked as an HIM director or manager since his 1998 graduation from East Central University in Ada, OK. In the years prior to that, Kribbs served in the US Navy as a hospital corpsman.

Currently the director of HIM at Wise Regional Health System in Decatur, TX, Kribbs was one of several HIM professionals around the country to join 34 state-level work groups that formed the Health Information Security and Privacy Collaboration (HISPC), a project under contract with the Department of Health and Human Services. Its purpose was to discuss the policies and practices that need to be in place nationwide in order to ensure privacy and security during electronic health information exchange.

Kribbs was living in Oklahoma at the time the HISPC groups formed, and he volunteered for six months last summer and fall before moving to Texas for his current job. He worked on the three Oklahoma HISPC work groups that discussed HIE implementation, variation, and solutions.

In the groups, Kribbs and other team members identified specific roadblocks to HIE, talking about data encryption standards, access, legalities of exchange, and other barriers and solutions to interoperability. They then made recommendations for improving the flow of information without sacrificing its confidentiality or security.

The Key to HIE

His participation gave him a better understanding of other healthcare stakeholders, Kribbs says. Physicians, attorneys, and an IT director voiced their positions in the groups, which helped Kribbs better understand their views, needs, and concerns.

HIM professionals must be included in HIE discussions, Kribbs says. He was surprised that the HISPC call for volunteers said nothing specific about HIM professionals. "There was nothing in there that said, 'We need somebody from an HIM medical records standpoint to step in here and give their viewpoints as well,'" Kribbs says. After all, the development of interoperable electronic HIE will affect every aspect of healthcare—HIM in particular, he says. For example, it is HIM that will be doing these record transfers.

No matter what happens in healthcare, it always ends up in medical records," Kribbs notes. "If we get involved from the get-go, we are going to have more input and more direct say in how our jobs are going to be done."

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