

Watching the Puck: Gauging HIM's Trajectory in the e-HIM Transition

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by Sandra Nunn, MA, RHIA, CHP

Steve Case, cofounder of AOL and current founder, chairman, and CEO of Revolution Health, gave the keynote speech at the Healthcare Information and Management Systems Society convention this past winter. Someone asked him why he was reaching into a consumer-driven healthcare venture, and he answered by quoting Wayne Gretzky, famed hockey player, saying, "You don't need to know where the puck is, you need to know where the puck is going."

That is a useful metaphor for HIM professionals struggling to wrap their minds around the trajectory of today's HIM career and its intersection with IT and legal services. The three professions have always collaborated to some degree, and that collaboration is clearly increasing. But where is it going?

Charting the HIM-IT Trajectory

We largely determine our career paths based on preferences. No matter what the chosen trajectory, however, every HIM path is characterized by one constant. The HIM professional provides the advice and counsel upon which organizations can rely to chart the course of optimal reimbursement and efficient automation, while steering the enterprise away from compliance and regulatory pitfalls.

The automation that IT brought to healthcare arrived first in accounting. Early systems were transaction-based and could handle the relatively straightforward automation of billing. Attempts to apply these financial systems to the capture of patient care information failed due to the complexity of care delivery and the difficulty of seeing sufficient return on investment from these systems. However, HIM was with data processing, as IT was then called, right from the start.

The phrase *data integrity* walked the halls of HIM long before the terminology migrated to IT. HIM pioneers stood up with IT, including vendors, and built the first electronic master patient indexes, automated the first coding and abstracting systems, and employed bar-coding technology in its first healthcare applications.

In the 1970s HIM entrepreneurs saw the future and created companies offering organizations and their IT departments consulting, outsourcing, and product development services. These trajectories continue to carry HIM professionals, insistent about the collection of the right data for every patient every time, into IT companies offering the development and implementation of enterprise master person indexes, where HIM professionals provide expertise on compliant identity management.

Other paths bring HIM professionals with analytical skills and conversant with a myriad of coding and reimbursement methodologies for every level of healthcare delivery into IT companies offering compliant revenue optimization and charge description management methods.

These same professionals offer counsel on fraud avoidance to their IT companies and to the customers they serve. Stepping into today's EHR development world, they offer expertise on structuring EHRs to provide the documentation necessary to support legal and compliant requests for reimbursement.

Developing the Legal IT Support

When information applications evolved beyond transaction-based, administrative systems, some of the very first systems to automate and deliver clinical information electronically were transcription software, chart-tracking applications, and release of information management systems. Results reporting and the beginnings of electronic charting arrived at the same time.

Establishing the case for the legality of electronic signatures on transcribed documents, HIM staff established the first policies on electronic authentication. Beginning in the early 1980s, verbal or telephone orders could be entered into early clinical systems, and HIM personnel established procedures for electronic authentication of orders within the legal timeframes established by the referenced states.

Managing access to protected health information is old hat to the HIM staff who over the years have developed access management policies for hard-copy records and have used the first electronic chart-tracking systems to implement more sophisticated access control.

HIM policies and procedures governing release of information were grounded in federal and state law and regulations, accreditation standards, and professional association requirements. With the arrival of national controls for release of information as spelled out in HIPAA, HIM was well positioned to create policy, procedure, and process around the legal standards HIPAA established for the privacy and confidentiality of patient information.

The concurrent arrival of more sophisticated, integrated electronic health record systems moved HIM closer to IT, as the two domains collaborated with legal services to define the content of the legal electronic health record and the substance of the designated record set.

Responsible for implementing electronic document management systems and electronic medical record systems, HIM specialists are stepping up to the plate to assess the legality of copy-and-paste documentation functionality, date and time stamping on after-the-fact charting, and authorship and authentication questions on electronic documents. Forms management is morphing right under the feet of HIM staff, who find themselves advising and supporting clinical and administrative staff on electronic forms creation, versioning, and archiving.

HIM has always had a role in establishing policy around access to records. In collaboration with IT, appropriate access must now be established for electronic records that face outward from the organization on physician portals and in conjunction with the development of personal health records. HIM expertise will help legal services and IT determine the boundaries between organizational records and the patient's personal records.

The New Role of E-Discovery

The new Federal Rules of Civil Procedure have pushed e-discovery preparations onto the short list of work that healthcare enterprises will undertake in the immediate future. Virtually impossible to achieve in isolation, compliance with e-discovery requirements will require an integrated team to deliver electronic record production. As HIM moves toward looking at production of records for e-discovery outside of the electronic health record, the line between HIM and IM begins to blur.

Records management begins to stretch into the management of records in content systems specializing in the categorization and cataloging of unstructured documents and records. IT will team with records management professionals to implement enterprise content management systems that automate record expiration dates and include collaboration tools allowing for workflow management and the retention of the mapping surrounding re-engineered business processes.

Ultimately records management skills underlie much of what IT will endeavor to accomplish in the coming decades. IM—as HIM will become—may join the IT team, align itself with legal services, or develop into an enterprise records management entity that serves its organization through the categorization and management of all enterprise documents and records creating, finally, the foundation for an organization's knowledge of itself.

It is an organization's intimate knowledge of itself that will make it capable of controlled electronic record release and e-discovery compliance.

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