

# What's Your EHR IQ?

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HIM is becoming more automated and electronic every year. The basic skill set of the HIM professional has changed dramatically. The acronyms abound, from HL7 and CCHIT to HIEs. It can be hard to keep up with all the latest developments. Test your EHR IQ by answering the following questions.

**True or False: Only IT professionals need to understand the HL7 EHR System Functional Model.**

Answer: False

**What is HL7?** Health Level Seven (HL7) is an ANSI-accredited standards developing organization. It has been instrumental in developing messaging and interoperability standards. Over the past several years, HL7 has collaborated with public and private healthcare leaders to develop the EHR functional model, which was approved as an ANSI standard in February.

**Why is it important to HIM professionals?** HL7's EHR System Functional Model is the first standard to provide purchasers and vendors with a common description and understanding of an EHR's requirements. More than 130 functions, common to all care settings, are outlined in the standard.

They are grouped into three main categories: direct care, or functionality to support the direct care delivery process; supportive, or functionality that supports administrative and financial processes; and information infrastructure, or functionality for the technical requirements that support operations and direct care functions.<sup>1</sup> HIM professionals can provide invaluable assistance to the EHR selection process by bringing an understanding of these standards and criteria to the table.

**True or False: CCHIT is just another standards organization.**

Answer: False

**What is CCHIT?** The Certification Commission for Healthcare Information Technology (CCHIT) is a voluntary, collaborative, private-sector organization that has developed standards for EHR products. Formed in 2004 by AHIMA, the Healthcare Information and Management Systems Society, and the National Alliance for Health Information Technology, CCHIT is charged with certifying health IT products.<sup>2</sup>

**Why is it important to HIM professionals?** During the request for proposal step of EHR implementation, organizations can use CCHIT certification to narrow down the list of potential products.<sup>3</sup> Certification will reduce the risks for purchasers spending large amounts of capital, facilitate interoperability, which is critical for data exchange, and ensure that products have the capabilities for safeguarding the privacy of personal health information.<sup>4</sup>

**True or False: Health information exchanges are too futuristic to study now.**

Answer: False

**What is an HIE?** Health information exchanges (HIEs), also called regional health information organizations, support the exchange of patient information relative to the individual's health.<sup>5</sup> The long range vision is that a nationwide health information network will be made up of local and regional HIEs so that PHI can be exchanged confidentially and securely, wherever the individual needs care.

**Why is it important to HIM professionals?** While a 2006 survey found there were 165 HIEs in the United States, most are in the early stages of development.<sup>6</sup> This is the perfect time for HIM professionals to become involved in the development of their local HIE as issues of privacy and security of PHI are balanced with the benefits and risks of information sharing, increased quality of care, and for some, decreased control of proprietary data.

HIM professionals have a unique perspective on privacy of information and quality of care, which makes our skill set extremely valuable to the architects of HIEs. If each HIE was developed with an HIM professional on the planning team, the issues of privacy, security, HIPAA compliance, patient identification, and release of information would have the benefit of the HIM perspective. It is difficult to imagine the resulting system without the HIM viewpoint.

**True or False: In organizations with an electronic health record, the legal health record is just a printout of the EHR.**

Answer: False

**What is the legal health record?** The legal health record is “the documentation of healthcare services provided to an individual during any aspect of healthcare delivery in any type of healthcare organization.”<sup>7</sup> At first glance, this abbreviated definition could support the above myth. However, an electronic system’s capabilities, including the various media employed within an organization’s system, the consumer’s ability to research and compile information, and the expanding use of the Internet complicates what used to be an easy concept to understand.

**Why is it important to HIM professionals?** As the historical custodians of patient health information, HIM professionals must understand what data are collected within each system of their organization. If they don’t, they cannot reliably point to the information that makes up the legal health record and then testify to its suitability in documenting and supporting the decisions made in a patient’s care. Such systems include laboratory information systems, pharmacy information systems, picture archiving and communication systems, cardiology information systems, and results reporting systems.

Determining which data elements, documents, images, and audio and video files are required by the various legal and regulatory entities is the first step to identifying the legal health record, and there is no one-size-fits-all process.<sup>8</sup>

## e-HIM Resources

For more information on any of these EHR topics, all AHIMA members have access to the FORE Library: HIM Body of Knowledge (BoK). For specific articles, please see:

Carol, Ruth. “HIE at the State Level: A Role for States in Regional Data-Sharing Networks?” *Journal of AHIMA* 78, no. 3 (Mar. 2007): 45–48.

Dimick, Chris. “E-Discovery: Preparing for the Coming Rise in Electronic Discovery Requests.” *Journal of AHIMA* 78, no. 5 (May 2007): 24–29.

Hagland, Mark. “Nebraska’s Far-flung HIEs Move Forward.” *Journal of AHIMA* 78, no. 3 (Mar. 2007): 42.

Quinsey, Carol Ann. “Using HL7 Standards to Evaluate an EHR.” *Journal of AHIMA* 77, no. 4 (Apr. 2006): 64A–C.

Quinsey, Carol Ann. “Foundational Concepts of the Legal EHR.” *Journal of AHIMA* 78, no. 1 (Jan. 2007): 56–57. v

**True or False: The Electronic Discovery Civil Rule only applies to federal courts and doesn’t affect the majority of healthcare providers.**

Answer: True.

However, this new Federal Rule of Civil Procedure “is expected to set the standard for e-discovery in state and local jurisdictions over time.”<sup>9</sup>

**What is the new Electronic Discovery Rule?** The changes in the rule relate to electronic discovery (e-discovery) and require new procedures for attorneys and organizations when electronic evidence is requested during trial preparations.

**Why is it important to HIM professionals?** During pretrial conferences, attorneys will meet and agree upon matters related to discovery before litigation. HIM professionals are critical in order to provide information and record availability.

The e-discovery rule will require HIM professionals to understand all the ways data are stored in the various electronic systems within the organization in order to accommodate requests for information for computer forensics, cell phone records, e-mail, and instant messaging as well as the more traditional search for information about healthcare services provided by the organization.<sup>10</sup> This information may reside in laptops, department systems, or department databases.

## How Did You Do?

Did you answer all five questions correctly, or do you have some catching up to do? If there is some background reading on your list, AHIMA's FORE Library: HIM Body of Knowledge is a great place to start (see the box at left). The speed of change within our profession is lightning quick, and only by keeping up our specialized knowledge can we keep influencing information management in healthcare delivery.

## Notes

1. Dougherty, Michelle. "It's Official: HL7's EHR Model Becomes Approved Standard." *Journal of AHIMA* 78, no. 5 (May 2007): 56–57.
2. Leavitt, Mark, and Lisa Gallagher. "EHR Seal of Approval: CCHIT Introduces Product Certification to Spur EHR Adoption." *Journal of AHIMA* 77, no. 5 (May 2006): 26–30.
3. AHIMA e-HIM Workgroup on the RFP Process for EHR Systems. "The RFP Process for EHR Systems." *Journal of AHIMA* 78, no. 6 (June 2007): 73–76.
4. Metzger, Jane, et.al. "Taking the Measure of Inpatient EHRs: Hospitals Inch Closer to Certified Products." *Journal of AHIMA* 78, no. 6 (June 2007): 24–30.
5. Robert Wood Johnson Foundation. "Health Information Exchanges." Available online at [www.rwjf.org/newsroom/featureDetail.jsp?featureID=1391&type=3](http://www.rwjf.org/newsroom/featureDetail.jsp?featureID=1391&type=3).
6. Malepati, Sarath, Kathryn Kushner, and Jason S. Lee. "RHIOs and the Value Proposition: Value Is in the Eye of the Beholder." *Journal of AHIMA* 78, no. 3 (Mar. 2007): 24–29.
7. AHIMA e-HIM Work Group on the Legal Health Record. "Update: Guidelines for Defining the Legal Health Record for Disclosure Purposes." *Journal of AHIMA* 76, no. 8 (Sept. 2005): 64A–G.
8. Ibid.
9. AHIMA e-HIM Work Group on e-Discovery. "New Electronic Discovery Civil Rule." *Journal of AHIMA* 77, no. 8 (Sept. 2006): 68A–H.
10. Ibid.

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