Happy New Year 2017!!! MAHIMA has been busy working on a number of initiatives to present to you in the New Year. We have aligned our strategic plan with AHIMA and are focusing on Information Governance this year, and we will also continue to reach out to schools in order to promote the field of Health Information Management.

I had the opportunity to attend the 2016 AHIMA National Convention in Baltimore, Maryland and spent Sunday in the House of Delegates. MAHIMA delegates attended the following subgroups which focused on a variety of interesting topics, to include:

- HIM Re-Imagined- Joy Rose, RHIA, CCS
- The Multigenerational Workforce – Jackie Judd, CCS
- Patient Generated Health Data- Diana Lindo, MM, RHIT, CCS
- Communication in the House of Delegates-Karen Grant, RHIA, CHP
- Regulatory Impact on the Profession-Norma Chitvanni, RHIT, CHPS

These subgroups were well attended meetings and we were able to provide feedback to AHIMA. We look forward to seeing some of our feedback incorporated into the

INFORMATION GOVERNANCE (IG) CORNER
Submitted by Lori McNeil Tolley, M.Ed, RHIA

Welcome to our new pilot addition to Connect – the Information Governance Corner.

We look forward to starting a conversation with our MAHIMA membership around IG projects you are working on, maybe interested in taking on at your facility or an IG activity you’ve attended and recommend. If you would like to share your IG story or questions please share them to the MAHIMA IG Corner.

Sharing an IG event:
On Tuesday, November 29, 2016, I attended the ONC workshop via WebEx and I very much enjoyed the format (panels and role playing). The 1-day workshop focused on the use of clinical documentation — as captured by EHRs — in legal, payment, and oversight contexts. The workshop brought together panels of experts to discuss the current landscape around how EHRs have been used as a record in the legal environment and for purposes such as medical documentation, claims support, audit trail records, and fraud identification. The 10:00 a.m. segment on Medical Documentation and Clinical Reliability included a wonderful presentation from our own Diana Warner, MS, RHIA, CHPS, FAHIMA, American Health Information Management Association.

Diana presented on IG topics including EHR Usability Challenges for Clinicians;
AHIMA TRIUMPH AWARD FOR LEADERSHIP
KAREN GRANT,
MAHIMA PRESIDENT
Martha Hamel, CHPC

Since their inception in 1994, the AHIMA Triumph Awards have honored those professionals responsible for advancing the field of health information management (HIM). Each year, AHIMA members nominate those that have demonstrated extraordinary leadership, volunteerism and talent. As part of a long and cherished tradition, the Triumph Awards continue to be the highest recognition of excellence, dedication and service, and are presented annually at the AHIMA Convention & Exhibit.

This year, our MAHIMA President, Karen Grant, RHIA, CHP was awarded the AHIMA Triumph Award for Leadership. Karen is a distinguished leader who is widely recognized for her many professional accomplishments, proven leadership abilities and innovative ideas. The award was conferred at the General Session of AHIMA’s Annual Convention in Baltimore, MD on Monday, October 17, 2016.

John Glaser, Sr. VP, Population Health, Jeanne Fernades, Past President, MAHIMA and Charles Saponaro, President, MRA all submitted their letters of support for Karen. John Glaser had worked with Karen from 1995

DO YOU WANT ANOTHER AHIMA CREDENTIAL?
MAHIMA HAS A SCHOLARSHIP TO HELP THAT HAPPEN!
Marianne Garfi, RHIA, CCS-P

The idea behind this article was to take a snapshot look at the membership, and the credentials we hold in Massachusetts. Many members do not realize the Association gives a scholarship for obtaining a new credential.

Through discussion, the question arose as to which are the most significant credentials held by our CSA membership.

Let’s see the results of an overview; looking only at credentials and job titles

Of the membership of 1466, 1148 members have 1 or more credential. That leaves 318 without a credential.

The most held credential was the CCS, followed by the RHIA. Interestingly, 461 members reported ‘coding’ in their job title. The next most significant position is the director/manager, with 274 members reporting these job titles.

An interesting thought to ponder is how many of the 318 had a credential at one time, and let it expire. Why did they allow the credential to expire? Did they all

MACRA AND CMS MEDICARE ID CARD INITIATIVE - MANDATORY CHANGES
From the November-December AHIMA Journal-Summarized by Norma Chitvanni RHIT, CHPS

The Centers for Medicare and Medicaid Services (CMS) has until mid-2019 to remove Social Security Numbers (SSN’s) from the Medicare ID cards of 150 million Medicare beneficiaries, both living and dead.

This is a provision of the Medicare Access and CHIP Reauthorization Act (MACRA). According to an article in Modern Healthcare this act is intended to reduce the rates of medical identity theft among seniors by removing beneficiary SSN’s and replacing it with a randomly generated eleven digit alphanumeric string of characters. In order to achieve this new provision, MACRA will direct CMS to issue new Medicare ID cards which will not display numbers, be coded or have numbers embedded in the card. This will eliminate access to beneficiaries SSN’s.

The MACRA mandated change means CMS must also generate new numbers for deceased beneficiaries whose Medicare linked records are archived. The article further explains that this change involves reprogramming 75 Legacy information technology systems that CMS and its contractors use to process Medicare claims. This effort will also require updating hundreds of thousands of private sector computers that handle healthcare claims which include hospitals physician practices, and clearinghouses. CMS and their contractors will need to have their information technology systems modified to send or accept the new ID’s by April 2018. CMS is planning to use new and old ID numbers during the transition period ending in December 2019.

This will no doubt be a tedious process for all organizations, best to talk with your finance staff to ensure they are aware of this upcoming change.