



AKHIMA

Mission Statement

Our Mission is to promote the art and science of health information management by achieving and maintaining high standards of competency, developing education programs, and promoting professional growth.

Along with physicians, hospital administrators, and other health professionals, we continually strive to improve the quality of health care information for all Alaskans. We endeavor to meet challenges of a changing health care delivery system by providing competent assistance and contributions within the scope of our profession.

THE NORTHLINE

INCOMING PRESIDENT'S MESSAGE

Vicki Ament, RHIA, CCS, CCS-P

Hello!

I've begun to notice a change in the air; it looks like fall is approaching. I hope everyone has had a chance to enjoy the beautiful summer that we were so fortunate to have this year.

Maggie Lehn and I were able to attend the AHIMA Summer Team Talks in Chicago this past July. This provided an opportunity for CSAs to connect and exchange some great ideas. We also got some great updates from AHIMA's leadership. Don't hesitate to contact Maggie or myself if you have any questions.

With the approach of fall comes the annual Fall Coding Workshop on October 29th and 30th. Please visit the AKHIMA website for updates and make plans to attend. More information will be forthcoming. This is a wonderful opportunity for some outstanding education.

Fall also brings the AHIMA National Convention in October in Grapevine, Texas this year. This provides the AKHIMA membership an opportunity for their voice to be heard through their House of Delegates. I hope as many of you can attend as possible, the education and updates provided are of the highest quality. Please contact any Board member for questions you may have.

As you heard from Doreen Booth last February AHIMA challenged the CSAs to grow. Although we did not win in our category, we did experience an overall growth of 9.3% to a total membership of 211. This new level raises our House of Delegate representation from two to three. This is an amazing accomplishment for our state and you will be receiving further information/

It's not too early for everyone to consider the opportunity of placing themselves on the ballot for the AKHIMA Board next spring or volunteering in some capacity. Keep in mind that AKHIMA is an association of volunteers and everyone has unique talents that are welcome.

Take the time to read the Northline. Cathy Gross does an awesome job providing AKHIMA this service!



AHIMA CEO Linda Kloss resigns . . .

CHICAGO, July 16, 2009—The American Health Information Management Association today announced that chief executive officer, Linda Kloss, RHIA, CAE, FAHIMA, has decided to step down effective March 31, 2010 after 15 years of leadership, over which time the organization's membership, revenues and national influence have all experienced substantial growth. The AHIMA Board of Directors has initiated a national search for her successor.

"Serving as AHIMA's CEO has been a privilege and the highpoint of my career," Kloss said. "It has been an honor to work with so many able and dedicated members, volunteers, and staff. We have seen huge progress at AHIMA and in the role of health information management in our industry. I am proud of what we have accomplished together." Kloss, who has been AHIMA's CEO since 1995, said she intends to continue her career-long commitment to improving health information and will explore ways she might contribute in these critical times during the coming months.

AHIMA president Vera Rulon, MS, RHIT, CCS, FAHIMA, said the Board of Directors is committed to focusing on meeting AHIMA's strategic goals while planning for a smooth transition of executive leadership. "We thank Linda for her leadership of AHIMA over the years and for working with the board over the coming months to make certain we accomplish a smooth leadership transition by the spring of 2010," Rulon said.

During Kloss's tenure, AHIMA has enjoyed a period of unprecedented membership growth and expansion. The association now serves 53,000 members with leadership in advocacy, education, certification, and lifelong learning. The association leads important healthcare industry projects in both the public and private sectors, while affiliates such as the AHIMA Foundation and the Commission on Accreditation for Health Informatics and Information Management Education support its mission.

FALL CONFERENCE NEWS

*Michael Gage, RHIT, CCS,
AKHIMA Program Chair*



Calling all spooks, and coders too!

We are currently in the process of finalizing speaker contracts are offering a broad spectrum of topics for the fall coding workshop, which will be held October 29th and 30th in Anchorage at the BP Center.

Make plans now to attend . . . seating is limited and fills fast. Don't miss out on this great opportunity to further your coding skills!

Direct any questions to Michael Gage, RHIT, CCS, at Michael@akhima.org

MEMBER SPOTLIGHT



Janie Batres, RHIT, CCS, was featured on page 86 in the July 2009 Journal of AHIMA. Janie has been an AKHIMA member for many years, and is currently employed at the Alaska Native Medical Center in Anchorage, Alaska as the Data Quality Manager. (Some of you will remember her as Janie Miller.)

Congratulations on your moment of fame and for being a volunteer leader! AKHIMA is proud to have members such as you who so are dedicated to the HIM profession.



Update Your AHIMA Profile

Remember to update your member profile at AKHIMA's web site: akhima.org. Follow the link from the main page to AHIMA's website and update your information.

RACs, MICs, Really? Oh My!

By Dawn Carman, Esq., RHIA, CHC, FACHE

As if you aren't already acronym challenged in your real work, it's time to introduce you to RACs and MICs. Like characters in a movie, you wait and wait in suspense for them to appear. Coming soon to health care near you! The Medicare Modernization Act of 2003 created the Recovery Audit Contractor (RAC) demonstration project. Its ultimate goal – to identify and recover improper Medicare payments. RACs are not part of a government agency to control skyrocketing costs. Rather, RACs are independent contractors paid on a contingency fee basis. They get a percentage of improper payments collected from providers.

The RAC demonstration project ran 2003-2008 in five states. Using special software, RACs scrutinized claims and medical records in the following services: hospital inpatient and outpatient; skilled nursing; physician; ambulance; laboratory; and durable medical equipment. What were the key errors? Coding, medical necessity, duplicate payments, and fiscal intermediary mistakes. The bottom line? In July 2008 CMS announced that RACs identified \$1.3B in improper payments. It's probably no surprise that 96% of the improper payment were overpayments.

The success of the RAC demonstration project led Congress to pass the Tax Relief and Health Care Act of 2006 to make RACs permanent. CMS divided the country into four RAC regions – A, B, C, and D. It bid four RAC contractors to phase in all 50 states by 2010.

Let the show begin! But wait! Two unsuccessful RAC bidders complained to the Government Accounting Office. CMS halted the work of the four RAC contractors. A one year moratorium was put in place by the Recovery Audit Contractor Program Moratorium Act of 2007. Congress wanted more study by CMS and number crunching from the Comptroller General. Lawsuits were filed. One of the biggies, AnMed Health et al. v. Leavitt et al., alleged that CMS recouped \$30M in supposed overpayments before the hospitals could ask for reconsideration. Another complaint was that CMS allowed the RACs to use a different standard for medical necessity than the one providers must use.

In September 2008, MLN Matters 6183 clarified recoupment. First, after an unfavorable initial determination, withholding can begin on the 41st day after a demand letter unless a provider requests redetermination. The request must be received within 30 days of the date of the demand letter. Second, after an unfavorable redetermination decision, withholding starts on the 61st day unless an appeal for reconsideration is timely filed. Third, after an unfavorable reconsideration decision, withholding can start.

Now that the RAC protest has been resolved, in June 2009, CMS set forth a two stage plan to phase in RAC work in June 2009. Really, the show has now begun! Details can be found at <http://www.cms.hhs.gov/RAC/>. Alaska, in Region D, is slated for RACs in August 2009 or after. The Region D RAC is HealthDataInsights, Inc.

At this point in the show, we know that RACs must follow National Coverage Determinations (NCDs), Local Coverage Determinations (LCDs), and Medicare policy in their work. Critics will be watching closely. How do we prepare? It's time to get your cast of characters together: health information management, billing, utilization management, medical staff, audit, and compliance.

RAC prep checklist:

- Review OIG Work Plan priorities at <http://oig.hhs.gov/publications/docs/workplan/2009/WorkPlanFY2009.pdf>
- Review RAC demonstration project lessons learned at <http://www.cms.hhs.gov/rac/downloads/rac%20evaluation%20report.pdf>
- Identify your organization's documentation and claims risk areas now rather than waiting for the RACs to do it for you
- Draft internal policies and procedures for your organization's response to RAC inquiries
- Timely respond to RAC inquiries!

The next blockbuster is the Medicaid Integrity Program (MIP). This is a five year plan to significantly increase the resources to CMS to combat fraud, waste, and abuse in the Medicaid program. Like RACs, the MICs aim to catch payment errors for Medicaid. However, among other differences, the MICs are paid a flat rate rather than a contingency fee.

MIC goals include:

- Conduct reviews to find fraud, waste, and abuse
- Audit provider claims
- Identify overpayments
- Educate state Medicaid agencies, providers, managed care companies, beneficiaries, and others on Medicaid payment integrity

The RACs and MICs will soon be playing here in Alaska. Oh my! It's time to make room in our brains for these two acronyms. It's also time to assert your health information management role in your organization's compliance success story. More on MICs in the next Compliance Corner.

A MESSAGE FROM THE EDITOR

Summer is almost over . . . fall will soon be upon us, hard to believe! And with the coming of fall, AKHIMA's program committee is preparing for the fall coding workshop. Michael Gage, RHIT, CCS, is working diligently on preparing a full line of coding education for you. Any ideas for topics can be directed to Michael@akhima.org.

Summer's busy times will soon conclude, so maybe it's time for you to consider volunteering for one of AKHIMA's committees or workgroups. If you have any spare time and would like to be considered for a volunteer position, contact Vicki Ament, AKHIMA's President, at Vicki@akhima.org.

"YOU ARE NOT ALONE" MENTORING PROGRAM

The Alaska HIM mentoring program was created by Leslie Gordon, RHIA, as project in her master's program. It's goal is to promote professional relationships between new graduates and students and an HIM professional who is willing to teach, guide, share and serve as a resource.

If you would like more information on this program, contact Leslie Gordon, RHIA, Program Director, University of Alaska Southeast Sitka Campus, Leslie.Gordon@uas.alaska.edu or connect to the program through AKHIMA's website: <http://akhima.org/mentor.asp>

BULLETIN BOARD

Jobs Opportunities:

- HIM Opportunities, Evan Thomas Associates
- Senior Compliance Analyst/Privacy Officer, Southcentral Foundation
- Compliance Specialist, Southcentral Foundation
- HIM Manager, Maniiliaq Foundation
- Certified Coder, TCAssociates

For detailed information on the above listed jobs, please connect through the link listed below:

<http://akhima.org/jobboard.htm#HIM%20Opportunities>

AKHIMA is looking for Volunteers for our committees. If you would like to volunteer, please submit a letter of interest to Vicki Ament, AKHIMA President at Vicki@akhima.org

- Bylaws Committee, Karen Glaser, Chair
- Program Committee, Michael Gage, Chair
- Scholarship Committee, Leslie Gordon, Chair
- Silent Auction Committee, Chair Vacant
- Legislative Committee, Chair Vacant



MARK YOUR CALENDARS

FALL 2009 CODING WORKSHOP

~ October 29 & 30, 2009

AKHIMA SPRING CONFERENCE

~ May 4 – 7, 2010

AKHIMA Conferences held at:

**BP Energy Center
Anchorage, Alaska**

AHIMA NATIONAL CONVENTION SCHEDULE

Grapevine, Texas
~ Oct. 3-8, 2009

Orlando, Florida
~ Sept. 25 – 30, 2010

Salt Lake City, Utah
~ Oct. 1 – 6, 2011



HIM Humor



WHAT YOUR DOCTOR REALLY MEANS . . .

Doctor says: one of several things could cause your symptoms.
Doctor means: I haven't the foggiest idea what is wrong.

Doctor says: I'd like to run that test over.
Doctor means: The lab lost your sample.

Doctor says: This prescription may have a few side effects.
Doctor means: You may experience sudden hair growth on your palms.

Doctor says: Your insurance should cover most of this.
Doctor means: You may have to sell your house to cover the rest.