HEALTH INFORMATION MANAGEMENT IN 2016

THE HIM INDUSTRY’S TRANSFORMATIVE JOURNEY TO ENTERPRISE INFORMATION MANAGEMENT – WHAT DOES THE HIM DEPARTMENT OF THE FUTURE LOOK LIKE?

AUTHORED BY:
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IN COLLABORATION WITH:
HIM Innovation Community Thought Leaders from 20 Top Healthcare Institutions Nationwide
INTRODUCTION

The American healthcare industry is in the midst of protracted and profound transition in how care is delivered and how it is paid for. The long-term impacts of the changes already underway and those yet to come are certainly not clear. The exact course of change is being widely debated by many, from politicians to healthcare leaders to the man on the street. While the form of change may be debatable, there is little disagreement that the urgent need to improve the broken, antiquated and financially crippled healthcare system of our nation.

Reforming healthcare is a high-stakes, multifaceted endeavor with no single roadmap. The pace of experimentation and innovation will continue, and since many solutions are being designed and tested on a near real-time basis, they will not all produce the desired results. Accountable care, patient centered medical homes and bundled payments are examples of current efforts. Successful changes will be those that improve the value of healthcare as demonstrated by improved access and quality at controlled or even lower cost.

Healthcare delivery and payment will be different in five to 10 years, and the effective use of health information and data will be a key enabler for change. The United States is making unprecedented investments in the adoption and meaningful use of electronic health record and other technologies because there is broad consensus that information is a prerequisite for effective care and a well-functioning healthcare system. Useful information must be available when and where it is needed and it must be accessible to patients.

Innovation of the methods and tools for information management are also undergoing profound change. Speech recognition, natural language processing, clinical vocabularies and the upgrade to ICD-10 are examples of advances in information management necessitated by the new challenges of managing the exploding volume of digital information. Processes for managing electronic records, information stewardship and performance improvement are also undergoing profound change. The field and functions of health information management are in the spotlight because the transition to digital health information increases the complexities of information management. This paper focuses on the changing information management landscape, its implications and the strategic opportunities for healthcare organizations.

Effective management of information content is key to ensuring that investments in technology pay off. In order for healthcare providers to demonstrate that they are providing quality care at reduced costs, they need to be able to properly and efficiently manage ever-expanding volumes of clinical data. Health Information Management (HIM) has a pivotal role to play in this evolution and is being called upon to provide the people, processes and technology that are needed to most effectively manage healthcare information. In short, along with healthcare providers and government, HIM has a vital role to play to safely and effectively leverage health IT to benefit patients and improve system performance.

Technology has been developed and is being refined every day to meet the need for advanced information management. Processes are being changed along with the technology, and people are being trained on these new processes and technology. But a new paradigm for HIM is emerging, and senior healthcare leaders and even boards of trustees have a stake in expanding their understanding of effective IM and how essential it is to realizing value from IT investments. This report jump-starts that new learning and suggests specific strategies for 21st century health information management.

THE BIRTH OF THE HIM INNOVATION COMMUNITY

As a leading HIM technology and services company, Precyse is driving innovation in health information management. Founder and CEO Jeff Levitt convened an Innovation Community of Precyse colleagues to study what the HIM department of the future might look like. “Each day, Precyse colleagues partner with hundreds of healthcare organizations, and it is clear that HIM is at a crossroads because of the transitions taking place in the American healthcare system. As part of its commitment to HIM, this Community will fuel a number of internal and external dialogues about HIM futures,” said Levitt.

Linda Kloss, RHIA and former CEO of the American Health Information Management Association (AHIMA), teamed with Levitt in facilitating the work of the Precyse HIM Innovation Community and in extending the dialogues to thought leader groups within Precyse and across the broader health information and informatics landscape. “Healthcare organizations are dramatically expanding their use of information to improve patient care and organizational performance,” said Kloss. "But foundational information management practices are not fully up to the demands of a digital information environment. New thinking and new learning about capturing, managing and using digital information assets is urgently needed."
The HIM Innovation Community had three charges that were carried out in the first half of 2011:

- Identify key trends relating to the organization, functions and staffing of HIM departments
- Develop scenarios describing plausible future states for HIM departments in 2016
- Recommend how Precyse might provide leadership for its clients and for the industry

At a thought leadership breakfast during the 2011 AHIMA convention, Kloss and Precyse invited a select group of HIM leaders from major American health systems to extend the work of the Precyse team by examining the trends and future scenarios and considering their implications for the success of their organizations over the next five years.

The HIM Innovation Community continues its work of critically examining the fast-changing demands of information management, and HIM leaders are contributing. This report is not the last word; it is a potent beginning that is being shared more broadly to expand the community of those committed to leading HIM transformation.

**THE TOP 10 TRENDS IMPACTING HIM IN 2016**

An environmental scan of the social, economic, political and technological factors impacting healthcare and information management identified a number of important trends and drivers. A planning window of 2016 was used because a number of important health reform and health IT initiatives will be in place by then, plus it is a reasonable window for thinking about the future. Some of the changes that will be in place include major provisions of current health reform legislation, Stage 3 of Meaningful Use incentives and ICD-10. The top 10 trends are shown below.

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<tr>
<th>TOP 10 TRENDS IMPACTING HIM IN 2016</th>
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<td>1. Clinical and business process leaders increasingly need to own the EHR and other technologies in order for these technologies to be successful.</td>
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<td>2. Some level of Information Management is a basic competence for most who work in healthcare.</td>
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<td>3. HIM functions are distributed and embedded throughout organizations, with greater focus on support of patient care and population health mission.</td>
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<td>4. There is greater recognition of the importance of managing the Records Management/Information Management aspects of digital information through its life cycle. Critical functions will include data integrity, legal health record, e-discovery, privacy and access and authentication management.</td>
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<td>5. Plans for broad payment reform are coalescing as a result of risk- and outcomes-based payment pilots and demonstrations under the 5-year-old Affordable Care Act.</td>
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<td>6. Health systems continue to work at reducing overall costs by 20% to remain financially viable.</td>
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<td>7. The linkage between improvements in quality and improvements in financial performance is well documented.</td>
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<td>8. An increasing number of people rely on technology and information to assist in self-management and select providers who deliver cost-effective care.</td>
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<td>9. Clinicians require and use tools and information to anticipate the outcomes and cost consequences of their clinical decisions at the point of care.</td>
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<td>10. The design of ICD-11 is being evaluated, and planning for implementation is projected for 2020.</td>
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IN CONSIDERING THE 10 TOP TRENDS, HIM THOUGHT LEADERS MADE A NUMBER OF IMPORTANT OBSERVATIONS:

Ownership is shifting, but “painfully.”
Today, technology is driving process, but greater ownership by clinical and business process leaders is essential for success in the long term. HIM leaders describe the process of breaking out of silos as a “painful” but essential evolution. HIM leaders must partner with clinical and business process owners and with IT if integration and optimization is to succeed. People must own the process, and technology should enable policy and process.

IT and IM competencies are not up to the task.
Technology deployment includes features and functions training, but staff-wide training on underlying IT and IM principles and practices is generally not available. The competency gap leads to data problems and rework. Staff uses powerful tools and technologies often with minimal training.

HIM professionals are working in more “embedded” roles throughout healthcare organizations.
Leading organizations have HIM experts in revenue cycle management, IT roles such as database, EHR management and user support, quality management, patient safety, compliance, HIM and other functions where specialized data and information management skills are needed.

With the imperative of improving EHR documentation, HIM is working more closely with clinical teams.
HIM can bring value to efforts to improve the accuracy of clinical documentation while working to streamline data capture processes and eliminate redundant documentation. As applications become more sophisticated as clinical tools, the accuracy and reliability bar is raised. Having HIM analysts who understand the functionality bring issues to users that they weren’t aware of during implementation will be more important than ever.

The nature of the HIM managerial role is shifting from departmental management and supervision to management of HIM knowledge workers.
Technology is replacing clerical work in HIM services, and skilled technical work such as transcription and coding is computer-assisted, leading to a need for upgraded skills. This is a sharp reversal from the historical departmental locus for HIM work. Those in HIM enterprise management roles are finding new ways to ensure that information and records management policies and practices are in line with best practices and standards.

Information Management must be viewed as an enterprise-wide set of functions.
The scope of Enterprise Information Management (EIM) may be expanded as information assets come under better control, but the nexus of healthcare EIM is the primary and secondary patient data, structured and unstructured, residing in enterprise and departmental systems, regardless of media. Billing and payment information, e-mail, personal health record data, employee and contractor information, quality improvement data, health information exchange and other information must begin to be viewed as elements of the information asset mosaic and managed accordingly.

It’s time to start planning for how ICD-10 will be used and look ahead to broader use of clinical vocabularies and other classification systems.
Today organizations are rightfully focused on how to ensure compliance with the cutover dates for HIPAA Version 5010 and ICD-10. In 2016 there will be new groupers based on the expanded code set and enhanced data sets and because of automation, future code set updates will not be as wrenching. In 2016 we will be preparing for implementation of ICD-11 in 2018 - 2020 and its greater integration with SNOMED.

“TECHNOLOGY IS OUT AHEAD OF THE POLICY FRAMEWORK. AND REGULATIONS AND STANDARDS HAVE NOT KEPT PACE WITH THE INTRODUCTION OF TECHNOLOGY. MANY ORGANIZATIONS ARE CHALLENGED TO PLAY CATCH-UP WITH FOUNDATIONAL RECORDS AND INFORMATION MANAGEMENT POLICIES AND PROCEDURES.”
Karen Lawler, MPS, RHIA, Director of HIM and Privacy Officer for Stamford Hospital in Connecticut

“HEALTHCARE HASN’T INVESTED IN TECHNOLOGY THE WAY OTHER INDUSTRIES HAVE, AND IN MANY WAYS, THE REGULATORY ENVIRONMENT IS MAKING DEMANDS THAT WE ARE NOT TECHNOLOGICALLY ADVANCED ENOUGH TO DELIVER ON YET.”
Terri Eichelmann, MBA, RHIA, Executive Director, Health Information Management, BJC HealthCare
SCENARIOS FOR 2016 HIM SERVICES

Based on analysis of the trends and drivers of change identified by the HIM Innovation Community, four scenarios were developed reflecting HIM services in 2016. Scenarios are stories that account for a reasonable range of plausible, but structurally different futures. Use of scenarios for future planning helps mitigate the tendency to lock into an assumed likely future.

Figure A shows scenario boundaries that reflect the improvements in health system performance and the adoption of information and communication technology on the x and y axes. HIM services in 2016 are described for the four plausible future states outlined below. Please note that the figure has not been designed to position any one state as superior or desired, but rather to illustrate the continuum on each axis (marginal to superior, fragmented to integrated). Though each state represents a plausible future scenario, what evolves in reality by 2016 will most likely be a combination of all four states.

The four states illustrated in Figure A are:

• A state reflecting HIM services if technology is implemented but not optimized and improvements in health system performance stall (Marginal/Implemented). Using an automobile metaphor, this scenario is titled Model T for obvious reasons. The major characteristics for HIM services are listed in the upper-left quadrant of Figure A.

• A state reflecting HIM services under a persistence of pockets of health system improvement but modest improvements in the optimization of information and communication technologies (Superior/Implemented). This scenario was titled “Puttering Along” and HIM services characteristics are shown in the upper-right quadrant of Figure A.

• A state reflecting HIM services if technology is optimized but health system improvement remains marginal (Marginal/Optimized). For HIM, the characteristics of this state were titled “Needs Operating Instructions” and are listed in the lower-left quadrant of Figure A.

• A state of Superior and Optimized results in health system performance; the use of technology was titled “Life in the Fast Lane” and is described in the lower-right quadrant of Figure A.

Figure A:
It is expected that in 2016, there will be HIM services operating in all four scenarios. Some will look like they do in 2012, with resources tied up in managing hybrid records, creating workarounds when the unexpected happens. Persistent data quality problems will impact trust in data and limit usefulness of information. The HIM Innovation Community expects that this represents 50 percent of hospitals today and may decrease to 20 percent by 2016.

On the other hand, the Innovation Community expects that 20 percent will be in a Superior/Optimized state where there is an enterprise approach to content and information management to ensure that information assets are optimized for clinical and operational performance.

The importance of the insights gained from examining HIM services in 2016 through alternative scenarios is to next consider how to optimize HIM services effectiveness in the state that the organization is in while taking advantage of every opportunity to innovate in areas that are going to support innovation and prepare the organization for “life in the fast lane”!

**HIM PRIORITIES TO ADVANCE INFORMATION MANAGEMENT**

Scenarios provide a way to think about the future and examine what will be needed to succeed in the world we live in while considering steps to advance to records and information management services suited to an optimally performing organization.

Members of the HIM Innovation Community shared how they might advance HIM capabilities and functions in their organizations to advance to the optimized/superior scenario over the next five years. Strategies include:

- Improve change management leadership
- Strengthen the policy framework for information management
- Reduce technology and information silos
- Use clinical analytics to support overall quality and cost of care and to improve system performance for high-risk populations
- Advance the skills and professionalism for all IM positions
- Collaborate more extensively with clinical leaders
- Develop policies for longitudinal records management
- Expand resources to support data capture and clinical documentation
- Offer basic IM training for all who contribute to the electronic health record
- Hit a home run with the transition to ICD-10

“THE THEMES PRESENTED IN THESE MODELS REALLY RESONATE. THEY CONFIRM SOME OF THE PLANNING THAT WE ARE ALREADY DOING AT MY ORGANIZATION. BUT I’VE NEVER SEEN IT DOCUMENTED LIKE THIS BEFORE. THIS IS WHAT OUR INDUSTRY NEEDS.”

Susan Postal, Senior Vice President of Health Information Management Services at Parallon Business Solutions

**THE FUTURE OF THE HIM INNOVATION COMMUNITY**

The HIM Innovation Community will next move to sharing models and emerging best practices for future-focused records and information management. Through collaboration, the HIM Innovation Community can learn from one another and share what they are learning within their organizations and with other HIM colleagues.

This work was kicked off with a discussion of the sample model shown in Figure B that reflects essential functional building blocks for enterprise information management. “While this model is a work in progress, it represents the kind of thinking that the HIM Innovation Community can engage in,” said Kloss. “Describing the future state of HIM is an essential step in the change process. If we can describe and define it, then we can eventually deploy it.”
While Precyse initiated the HIM Innovation Community, it has taken on a life of its own and is no longer a Precyse-only project,” said Precyse President Chris Powell. “In order for solutions for healthcare transformation to work, a culture has to be enabled to keep in step with those solutions. And that culture is the vision for getting accurate and meaningful information out there to improve quality and save time and money. Enabling this culture can’t be achieved by one company alone. Our industry needs to work together. It is only through the combined knowledge and experience of HIM leaders all over the country that we can prepare for the changes that lie ahead.”

This indeed is the purpose of the HIM Innovation Community. It is now a living and breathing industry-wide initiative. The people who are involved are the best and brightest in the business and, by working together and sharing information, they will ensure that HIM has the tools and the mindset to see the healthcare industry through its positive transformation.

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<tr>
<th>Information Building Blocks</th>
<th>EIM Goals</th>
<th>Key Functions</th>
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<td><strong>1. Information Integrity</strong></td>
<td>To continuously improve the value of the information asset by ensuring that data and content are accurate, reliable, up-to-date, consistent and “fit for use”</td>
<td>1.1 Architecture, definitions and relationships, including metadata 1.2 Data accuracy audit, structured and unstructured data 1.3 Data provenance or lineage 1.4 Error correction/amendments 1.5 Interface and upgrade assurance</td>
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<tr>
<td><strong>2. Information Use</strong></td>
<td>To correlate and cross-reference data and content requirements to the range of clinical and business needs and ensure that those who rely on information have the requisite tools and skills to use it effectively</td>
<td>2.1 Clinical applications 2.2 Quality measurement and improvement 2.3 Patient access 2.4 Information exchange 2.5 Business applications 2.6 Research and secondary uses</td>
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<tr>
<td><strong>3. Confidentiality &amp; Protection</strong></td>
<td>To ensure that personal health information and business information are available only to authorized persons and used only for authorized purposes and that security risks and vulnerabilities are proactively managed</td>
<td>3.1 Access controls 3.2 Confidentiality/privacy 3.3 Security 3.4 Authentication 3.5 Business continuity 3.6 Audits of compliance</td>
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<tr>
<td><strong>4. Life Cycle</strong></td>
<td>To develop a common understanding of the life cycle of patient medical record and other key business records and explicit plans and processes for their retention and disposition, accounting for clinical and business needs and legal and regulatory requirements for creation and maintenance</td>
<td>4.1 Retention policies and practices 4.2 Disposition policies and practices 4.3 Audit of records, clinical and corporate</td>
</tr>
<tr>
<td><strong>5. Information Governance</strong></td>
<td>To ensure that the organization has the leadership and organizational structures, policies, procedures, technology and controls for enterprise information management that represent the highest standards for legal, ethical and business practice serving patients and stakeholders and advancing the public good</td>
<td>5.1 Transparency of policies, procedures and standards 5.2 A culture of ethical stewardship 5.3 Compliance with applicable laws, regulations, other requirements 5.4 Enhance the value of managed information assets 5.5 E-discovery</td>
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*Source: Kloss Strategic Advisors, Ltd.*

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Figure B:
ACKNOWLEDGEMENTS

Linda Kloss, MA, RHIA and Precyse would like to acknowledge the participation and contributions of the industry leaders who are participating in the HIM Innovation Community. We are impressed by your collaboration to advance HIM for the betterment of healthcare and for the patients we serve. We thank you for your valuable insights during the HIM Innovation Community meetings and look forward to our continued partnership on this transformative journey from information to intelligence. Our sincere thanks to:

Mary Lynn Berntsen, MS, RHIA, HIM Corporate Manager, UHS of Delaware, Inc.
Gloryanne Bryant, RHIA, CCS, CCDS, Regional Managing Director of HIM Revenue Cycle, Kaiser Permanente
Rachel Chebeleu, MBA, RHIA, Director of Medical Records and Professional Fee Abstraction, Entity Privacy Officer, Hospital of the University of Pennsylvania
Terri Eichelmann, MBA, RHIA, Executive Director, HIM, BJC HealthCare, Revenue Cycle Management
Jean Fuller, Corporate Director HIM, Scripps Healthcare Corporate
Robin Furlong, MS, RHIA, Director, HIM, Phoenix Children’s Hospital
Shiny B. George, MS, RHIA, CPHIMS, CCS, CCS-P, CPC, Senior Director of Health Information Management at Thomas Jefferson University Hospitals
Karen Grant, RHIA, CHP, Corporate Director, Health Information Services, Chief Privacy Officer, Partners HealthCare System, Inc.
Denise Hunt, MS, RHIA, Corporate HIM Operations Director, Catholic Healthcare West
Mary Jellinek, MS, RHIA, Manager of HIM, BJC HealthCare Revenue Cycle Management
Karen J. Lawler, MPS, RHIA, Director HIM Department and Privacy Officer, Stamford Hospital
Suzanne Layne, RHIT, System Director, HIM, Main Line Health System
Teresa Michael, BA, RHIT, Director, HIM Services, Sarasota Memorial Hospital
Elaine Paul, Corporate Coding Coordinator, Scripps Healthcare Corporate
Susan N. Postal, SVP, Health Information Management Services, Parallon Business Solutions
Juana Rosario-Colon, RHIA, Corporate Director, HIM, Orlando Health
Mary L. Staub, RHIA, CHP, Director, HIM Intermountain Healthcare
Sheila Green Shook, RHIA, Director, Health Information Management, Privacy Officer, Evergreen Healthcare
Shelly Wilson, RHIA, CHP, Director Health Information Services, Privacy Officer, Stillwater Medical Center
Barbara Woolley, MBA, RHIA, Senior Director, Health Information Management, Duke University Medical Center

Gratitude to the Precyse colleagues who participated in and helped to conceive the HIM Innovation Community—for their dedication to the advancement of the HIM profession, focus on innovation and commitment to helping providers save time, money and lives. Our sincere thanks to: Carla Ambrosius, RHIA; Cindy Doyon, RHIA; John Gentile; Peggy Giambelluca, RHIA; Florencie Lee, RHIA; Bonnie Purdy, RHIA; Cari Slote, CCS-P; Eddie Smith; and Laurie Thor, RHIA, CTR.