UNIVERSITY OF DETROIT MERCY

Health Information Management and Technology

Student Handbook

2021-2022

HEALTH INFORMATION MANAGEMENT and TECHNOLOGY PROGRAM

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Welcome to the HIMT Program at Detroit Mercy!

You have chosen a career in healthcare which is growing by leaps and bounds! And at a university which offers you an excellent, globally focused, service-based learning experience.

The HIMT faculty at Detroit Mercy follow our mission to provide you with a wide-range of educational experiences in an environment which promotes student growth.

Consistent with Mercy and Jesuit traditions,
The HIMT faculty promote a values-based education to foster the spiritual, intellectual, social and psychological growth of the learner.
The HIMT faculty is committed to faith based social justice especially for vulnerable populations.

The HIMT program is both CAHIIM accredited and partnered with HIMSS. This gives you proof of a quality, technology focused HIMT program. We also include a service-learning experience within the practicum to enrich your ability to "give back" to your community.

Thank you for allowing myself and the HIMT Department the opportunity to facilitate your educational journey. We wish you success! If you need any assistance along the way, please do not hesitate to contact myself or anyone in the HIMT department.

To quote Robert Greenleaf (1977) "Not much happens without a dream."

Dr. Pat DeVoy
PhD, EdS, RHIA, CPPM, CPC
HIMT Program Director/Department Chair
devoyps@udmercy.edu

Description of the HIMT Profession

The HIMT profession encompasses a vast range of healthcare fields which are rapidly expanding and incorporates the fields of technology, science, management, and law. HIMT professionals utilize critical thinking skills to acquire, analyze, protect and provide healthcare data and information to provide a safe continuum of care for patients. HIMT professionals are found as leaders in healthcare through administration, research, and technology and are vital to the operations of both large and small healthcare facilities.

According to the Bureau of Labor and Statistics (2019) the demand for HIM professionals is expected to increase by more than 18% which means 25,000 to 50,000 new jobs. The beginning salary range of $50,000 to $75,000/year expands to a median salary range of $99,730 annually.

Introduction

Welcome to University of Detroit Mercy (Detroit Mercy) Health Information Management and Technology (HIMT) Program. This *HIMT Student Handbook* is intended to be used as a reference to policies and procedures related to the HIMT program and should be referred to throughout your program journey. In addition to the policies and procedures in the *HIMT Student Handbook*, students are expected to adhere to all policies in the:

Detroit Mercy Student Handbook

http://www.udmercy.edu/life/policies/index.php

Detroit Mercy Current Undergraduate Catalog

http://www.udmercy.edu/catalog/

Important Contact Information

Program Address

Health Information Management and Technology
College of Health Professions
University of Detroit Mercy
4001 W McNichols Rd
Detroit, MI 48221-3038

Administration

Dr. Janet Baiardi, PhD, RN
Interim Dean
College of Health Professions & McAuley School of Nursing
University of Detroit Mercy
4001 W McNichols Rd
313.993.3297
baiardjm@udmercy.edu

Dr. Pat DeVoy, PhD, LPN, RHIA, CPC, CPPM, CMA
HIMT Program Director/Department Chair
Health Information Management and Technology
College of Health Professions
University of Detroit Mercy
4001 W McNichols Rd
313.993.1565
devoyps@udmercy.edu

Paula Strussione, BS, MHSA
Academic Coordinator
Health Information Management and Technology &
McAuley School of Nursing
College of Health Professions
University of Detroit Mercy
4001 W McNichols Rd
313.578.0569
pstrussi@udmercy.edu

Admissions Process for HIMT Program

Follow the links below for admission information.

Freshman Admission Process

Freshman Admission Process | University of Detroit Mercy (udmercy.edu)

Transfer Admission Process

https://www.udmercy.edu/admission/transfer/admission-process.php

International Admissions Process

https://www.udmercy.edu/admission/international/admission-process.php

HIMT Program Admissions Process

https://www.udmercy.edu/admission/apply.php

Policy Development and Change

Revisions of existing policy may be made at any time for corrections, clarifications, additions or up-dates. Substantial revisions will be disseminated to students in a timely manner.

Detroit Mercy

History

http://www.udmercy.edu/about/history.php

The University mission evolved from the educational traditions of its sponsors, the Society of Jesus and the Sisters of Mercy. These Catholic traditions emphasized concern for the dignity of the person and for the common good of the world community. The Society of Jesus (Jesuits) founded the University of Detroit in 1877. The Sisters of Mercy, Province of Detroit, founded Mercy College of Detroit in 1941. Together these religious congregations created a partnership in higher education to establish the University of Detroit Mercy in 1990. Each religious congregation brings its spirit to the mission of the University. The spirit includes commitment to quality education, the service of faith, promotion of justice, and compassionate service to persons in need.

Mission

http://www.udmercy.edu/about/mission-vision/

University of Detroit Mercy, a Catholic university in the Jesuit and Mercy traditions, exists to provide excellent, student-centered undergraduate and graduate education in an urban context. A Detroit Mercy education seeks to integrate the intellectual, spiritual, ethical and social development of students.

Vision

http://www.udmercy.edu/about/mission-vision/

University of Detroit Mercy will be recognized as a premier private university in the Great Lakes region, distinguished by graduates who lead and serve in their communities.

Accreditation and Academic Compliance

https://www.udmercy.edu/academics/academic-affairs/research/compliance.php
University of Detroit Mercy is accredited by the Higher Learning Commission (HLC), an independent organization that accredits higher education institutions. The **Higher Learning Commission (HLC)** is an independent corporation and one of two commission members of the North Central Association of Colleges and Schools (NCA), which is one of six regional institutional accreditors in the United States. The Higher Learning Commission accredits degree-granting post-secondary educational institutions in the North Central region.

Last Reaffirmation of Accreditation: 2016-2017
Next Reaffirmation of Accreditation: 2026-2027

College of Health Professions

http://healthprofessions.udmercy.edu/about/index.php

Mission

The College of Health Professions, in the Mercy and Jesuit traditions, prepares professionals to lead individuals, families, and communities to optimal health and well- being.

Vision

The College of Health Professions is an Urban Center of academic excellence that prepares graduates to lead and serve the complex health care needs of our local and global communities and will be recognized for leadership and innovation in higher education.

Guiding Principles

The guiding principles of the College of Health Professions exemplify living our mission and moving toward our vision:

- Passion for Excellence and Lifelong Learning
- Valuing the unique contributions of each member of the CHP
- Integrity and Ethics
- Social Justice and Needs of the Underserved
- Accountability to the Community
- Responsiveness to the State of Practice, and the Foundational Sciences

HIMT Program

Mission

The Health Information Management and Technology program at University of Detroit Mercy will provide industry relevant training and education in health information management and information technology within the Jesuit and Mercy tradition of intellectual, spiritual, ethical and social development. Graduates of the Health Information Management and Technology program at University of Detroit Mercy will be equipped with the knowledge, skills and abilities to improve healthcare delivery and patient safety by utilizing technology to manage patient information and data.

Vision

The vision of the Health Information Management and Technology program at University of Detroit Mercy is to produce globally prepared leaders in the Health Information Management and Technology profession who are able to transform, interpret and administer healthcare data to improve healthcare delivery and patient safety and security.

HIMT Program Goals

The goals of the HIMT Program at Detroit Mercy is to prepare students:

1. To professionally and ethically practice health information technology within a global healthcare system.

2. To organize and manage healthcare data, perform quality assessment and performance improvement and apply the principles of organizational and human resources management to health information technology.

3. With the knowledge, skills and characteristics needed to successfully earn the Registered Health Information Management Administrator (RHIA®) credential.

HIMT Program Objectives

Graduates of University of Detroit Mercy, Health Information Management and Technology, Bachelor of Science and Post-Baccalaureate Certificate program will be proficient in the following areas:

1. Knowledge: Demonstrate the principles and best practices of health information management in planning, designing, managing and evaluating healthcare data systems

2. Research/Critical Thinking: Apply research, technology and critical thinking skills to problems within healthcare data

3. Operations: Apply best practices in the leadership, management and decision-making processes of health information and the application of technology

4. Ethics/Professionalism: Demonstrate ethical, professional and legal behavior in the practice of health information management and the application of technology

Philosophy of HIMT Faculty

Consistent with Mercy and Jesuit traditions, the faculty of the Health Information Management and Technology (HIMT) program will promote a values-based education to foster the spiritual, intellectual, social, and psychological growth of the learner. The HIMT faculty is committed to faith based social justice especially for vulnerable populations.

Education is the process of acquiring new knowledge, skills, attitudes, and values to meet the challenges of the contemporary world and the communities we serve. The HIMT faculty believes education is a dynamic, interactional process that involves changes in perception, thinking, feeling, and action. Building on Mercy and Jesuit traditions, the faculty is committed to creating a learning community of discourse and service, utilizing pedagogy that encourages ongoing reflection on our human experience. Faculty and students work together to further the social, political, economic and spiritual well-being of the human community. In that regard, the program strives to attract learners that are characterized by a diversity of cultural, racial, ethnic and socioeconomic backgrounds. The HIMT program actively recruits and values faculty and

students who reflect this diversity. Partnerships in the community are developed and utilized to provide students with experiences of diversity in administrative settings.

The HIMT faculty strives to promote a sense of altruism, confidence and autonomy with accountability and a commitment to lifelong learning and professional competency. The Bachelor of Science is the foundation for health information professionals in order to meet the complex, multifaceted role of the healthcare professional. Education must integrate a strong liberal arts foundation with core competencies of clinical, information technology, leadership and management.

Accreditation

The HIMT baccalaureate degree and the post-baccalaureate certificate programs are accredited by the Commission on Accreditation for Health Informatics and Information Management (CAHIIM).

This international accreditation allows graduates of the baccalaureate degree and the post-baccalaureate certificate programs to take the Registered Health Information Administrator (RHIA) certification exam. Early test eligibility is available for students currently enrolled in the baccalaureate degree program which provides the opportunity to sit for the RHIA exam during their last semester of study.

The HIMT program is also recognized as an Educational Partner with the Health Information and Management Systems Society (HIMSS) which provides students with the knowledge the program has met rigorous standards in providing technology education in healthcare.

Non-Discrimination

The HIMT Program does not discriminate based on race, age, creed, gender, sexual orientation, color, national origin, marital status, religion, or any other factor prohibited by law. This applies to all aspects of its operations.

Advisory Committee

The HIMT program has an active and dynamic advisory board. The HIMT Advisory Board provides the program with current HIM healthcare practices along with providing input on all HIMT program changes. See Appendix D, *HIMT Advisory Board Membership*.

Curriculum Competencies

The HIMT program is built upon the strict and rigorous standards of the Commission on Accreditation for Health Informatics and Information Management (CAHIIM) along with the recommendations of the Health Information and Management Systems Society (HIMSS). HIMT program competencies may be found in the *2018 Baccalaureate Degree Curriculum Competences* in Appendix E.

Communication

An important skill required by HIMT professionals is the ability to communicate with clients, patients and colleagues. To contribute to a positive educational environment in the HIMT program, students, faculty, staff, and administrators need to be able to communicate clearly. Effective communication has a positive influence on our educational community. In order to foster communication in the HIMT program, the following has been established:

When sending an email to a HIMT department member, include the name and section of the course, along with your name in the subject line.

- Make sure that your email is *professional* in tone.
- Email should be spell checked and grammatically correct. Always proofread your email messages prior to sending.
- All students are required to use University of Detroit Mercy email address for all course correspondence. The reasons for this policy are to:
  - Protect your confidential information
  - Manage spam on the University server
  - Ensure you get a response; non-Detroit Mercy email addresses will be dumped into "junk" email
  - Do not use abbreviations
  - Allow time for a response- do not re-email until you have allowed a sufficient amount of time to respond.

Office Hours/Mailboxes for HIMT Program Director/Department Chair and Faculty

HIMT Program Director/Department Chair and Full-time faculty members are available to students on an appointment basis. Specific times of availability are posted on a faculty member's door and within the course Blackboard site. Email for an appointment.

Adjunct faculty members will generally schedule office hours in conjunction with courses they are teaching. If adjunct faculty are teaching online, they will offer online office hours which will be posted in their syllabus and the Blackboard site.

Office Hours

The Dean and HIMT Program Director/Department Chair are available to meet with students by appointment. Appointments may be scheduled by:

Dean, College of Health Professions - 313.993.3297

HIMT Program Director/Department Chair – devoyps@udmercy.edu

Mailboxes

CHP college staff are available from 8:30 AM to 5:00 PM, Monday through Friday, to accept messages or materials for faculty mailbox delivery (Summer Hours - 8:30 AM to 4:30 PM). Do **NOT** slide assignments under a faculty office door.

Curriculum (HIMT)

The HIMT program can be completed either online of in-seat through full or part-time enrollment.
Transfer applicants to the HIMT program must have a minimum overall cumulative GPA of 2.0

HIMT List Course

HIMT Major

Course Number	Course Name	Credits
HIM 1090	Information Systems for Global Healthcare	3
HIM 2050	Medical Terminology	3
HIM 2080	PathoPharmacology for Healthcare Professionals	3
HIM 2600	Global Healthcare Data and Statistics	3
HIM 3400	Healthcare Revenue Cycle Management	3
HIM 3750	Healthcare Classifications Systems	3
HIM 3900	Clinical Documentation Improvement	3
HIM 4250	Quality and Security of Health Information	3
HIM 4600	Global Leadership and Strategic Planning for Health Professionals	3
HIM 4800	Healthcare Information and Data Governance	3
HIM 4900	Service-Learning Health Information Management Internship	3
	Total	**33**

HIMT Minor

Course Number	Course Name	Credits
HIM 1090	Information Systems for Global Healthcare	3
HIM 2600	Global Healthcare Data and Statistics	3
HIM 3400	Healthcare Revenue Cycle Management	3
HIM 3750	Healthcare Classifications Systems	3
HIM 3900	Clinical Documentation Improvement	3
HIM 4250	Quality and Security of Health Information	3
	Total	**18**

HIMT Post-Baccalaureate Certificate

Course Number	Course Name	Credits
HIM 1090	Information Systems for Global Healthcare	3
HIM 2600	Global Healthcare Data and Statistics	3
HIM 3400	Healthcare Revenue Cycle Management	3
HIM 3750	Healthcare Classifications Systems	3
HIM 3900	Clinical Documentation Improvement	3
HIM 4250	Quality and Security of Health Information	3
HIM 4600	Global Leadership and Strategic Planning for Health Professionals	3
HIM 4800	Healthcare Information and Data Governance	3
	Total	**24**

HIMT Course Schedule

Fall	Winter	Summer
HIM 1090 Information Systems for Global Healthcare	HIM 2050 Medical Terminology	HIM 2050 Medical Terminology
HIM 2050 Medical Terminology	HIM 2080 PathoPharmacology	HIM 2080 PathoPharmacology
HIM 2080 PathoPharmacology	HIM 2600 Global Healthcare Data and Statistics	HIM 2600 Global Healthcare Data and Statistics
HIM 2600 Global Healthcare Data and Statistics	HIM 3400 Healthcare Revenue Management	
HIM 3750 Healthcare Classification Systems	HIM 4600 Global Leadership and Strategic Planning for Health Professionals	
HIM 3900 Clinical Documentation and Management of Health Information	HIM 4800 Health Information and Data Governance	
HIM 4250 Quality and Security of Health Information	HIM 4900 Service-Learning HIMT Internship	
HIM 4900 Service-Learning HIMT Internship		

HIMT Course Descriptions

HIM 1090 Information Systems for Global Healthcare
Information Systems for Global Healthcare presents the structure and application of health information technology systems at both the organizational and global level. The utilization, assess, creation and evaluation of health information technologies will be covered and analyzed through assignments, case studies and projects which interact with actual health information technology systems. Students will also evaluate organizational, national and global healthcare technology systems and their interoperability and application of health information. Requirements for the HIMSS Certified Associate in Healthcare Information and Management Systems (CAHIMS)© exam will be discussed along with the MGMA Certified Medical Practice Executive (CMPE)© credentialing exam content.

HIM 2050 Medical Terminology
This course will provide students with a basic understanding of the meaning and appropriate use of medical terminology by presenting the concept of basic word parts. The concepts of medical terminology which include spelling, pronunciation, common abbreviations, and word roots, prefixes, and suffixes will be covered. Terms are presented by body structure and related to health, illness, diagnostic procedures and treatment.

HIM 2080 PathoPharmacology for Healthcare Professionals
PathoPharmacology for Healthcare Professionals will provide students with an introduction to both pathology and pharmacology by presenting the core concepts and mechanisms of both disease and pharmacology. The classifications of drugs will be presented by their application and effects to the systems of the body. This course will provide the basic knowledge of PathoPharmacology needed in many healthcare professions and the foundation for further study in both pathology and pharmacology.

HIM 2600 Global Healthcare Data and Statistics
Global Healthcare Data and Statistics provides the student with the application of statistical and probability reasoning to both organizational and global healthcare data. Sampling techniques, basic statistical analyses, probability measures, data mining and analysis of organizational and global healthcare statistics will be covered while applying ethical research techniques to various projects. The application, interpretation, evaluation and management of healthcare data and statistics will be the focus along with the ability to communicate and present statistical data. Preparation for the American Health Information Management (AHIMA) Certified Health Data Analyst (CHDA)© credentialing exam will be presented in part in both HIM 2600 and HIM 4800. Requirements for the HIMSS Certified Associate in Healthcare Information and Management Systems (CAHIMS)© exam will be discussed along with the MGMA Certified Medical Practice Executive (CMPE)© credentialing exam content.

HIM 3400 Healthcare Revenue Management
The revenue cycle will be examined through various reimbursement methodologies for appropriate application and compliance within state and federal regulatory requirements. Students will manage and validate the assignment of healthcare classification system codes within the revenue cycle for accuracy and gaining reimbursement. The basics of health insurance, public funded healthcare programs, managed care contracting, healthcare services reimbursement and healthcare financial management are covered through the analysis of the provider/payer cycle of reimbursement. Additionally, segments of the competencies of the MGMA Certified Medical Practice Executive (CMPE)© credentialing exam will be covered.

HIM 3750 Healthcare Classifications Systems
This course will examine the ICD-10-CM, ICD-10-PCS, CPT and HCPCS coding classification systems Students will explore the rules and guidelines for these coding systems while applying this knowledge to the practice of ethical coding. The recognition and application of correct clinical documentation for coding will also be covered. Preparation for the American Academy of Professional Coders (AAPC) Certified Professional Coder (CPC)© credentialing exam will be presented. Additionally, segments of the competencies of the MGMA Certified Medical Practice Executive (CMPE)© credentialing exam will be covered.

HIM 3900 Clinical Documentation Improvement
Clinical Documentation and Management of Health Information will provide an in-depth look at the process of clinical documentation. Students will address the verification of documentation within patient personal health information to support patient diagnosis, patient progress, clinical findings and discharge documentation requirements along with validation procedures for secondary source data. The development and analysis of organization-wide healthcare documentation guidelines will be discussed along with policies and procedures for the disclosure of healthcare information and improvement of clinical documentation quality. Preparation for the American Health Information Management Association (AHIMA) Certified Documentation Improvement Practitioner (CDIP)© credential exam will be presented in part in both HIM 3900 and HIM 4800. Requirements for the MGMA Certified Medical Practice Executive (CMPE)© credentialing exam will also be presented.

HIM 4250 Quality and Security of Health Information
Quality and Security of Health Information will provide students the ability to develop, analyze and monitor healthcare privacy and security systems. Privacy and security policies and procedures will be covered along with systems esting to ensure data integrity both within the organization and globally. Workflow processes within healthcare will also be discussed and students will construct and analyze workflow performance measures. Preparation for the American Health Information Management Association (AHIMA) Certified in Healthcare Privacy and Security (CHPS)© credential exam will be presented along with HIMSS Certified Associate in Healthcare Information and Management Systems (CAHIMS)© and MGMA Certified Medical Practice Executive (CMPE)© credentialing exam content.

HIM 4600 Global Leadership and Strategic Planning for Health Professionals
Global Leadership and Strategic Planning for Health Professionals will provide students with the theory and process of leadership, organizational planning and supervision on both an organizational and global scale. Students will discuss effective negotiations, communication, and influencing skills within a culturally diverse society along with the application of strategic planning and project management. Human resources management, staff recruitment and the analysis of workflow will be discussed along with managing information as a key resource. Credentialing content for the HIMSS Certified Associate in Healthcare Information and Management Systems (CAHIMS)© will also be presented.

HIM 4800 Healthcare Information and Data Governance

Healthcare Information and Data Governance will provide students with an in-depth look at data supervision throughout the lifecycle of the organization while adhering to regulatory and environment requirements. Students will learn the application of the five levels of information governance and the development and maintenance of organizational-wide and global interoperability. Improvement of patient outcomes, compliance, security risk mitigation, organizational decision-making and streamlining business practices through data governance will be covered. Preparation for the American Health Information Management Association (AHIMA) Certified Documentation Improvement Practitioner (CDIP)© credential exam will be presented in part in both HIM 3900 and HIM 4800. The HIMSS Certified Associate in Healthcare Information and Management Systems (CAHIMS)© exam content will also be presented.

HIM 4900 Service Learning HIMT Internship

The Service Learning/Project Based HIMT Practicum will provide students with the opportunity to apply their HIMT skills to a service-learning project within healthcare. Students will complete a minimum of 80 hours of practicum experience while completing an applicable HIMT project at a healthcare facility which serves the underserved. The HIMT Practicum experience may be completed on-site or virtually (depending on the healthcare organization/facility requirements). HIM 4900 will also include an intense review process for the American Health Information Management Association (AHIMA) Registered Health Information Administrator (RHIA)© exam (which may be taken during the last semester of the HIMT program) and collaboration with the Detroit Mercy Center for Career and Professional Development to develop job readiness skills. This course should be taken in the last semester of the HIMT major.

Fall 2021 Book List

HIM 1090 Information Systems for Global Healthcare

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Health Information Management: Concepts, Principles and Practice 6th edition
By Oachs and Watters
AHIMA Press
ISBN: 978-1-58426-725-6
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Health IT and EHR's: Principles and Practice 6th edition
By Amatayakul
AHIMA Press
ISBN: 978-1-58426-529-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Introduction to Information Systems for Health Information Technology 3rd
By Sayles and Kavanaugh-Burke
AHIMA Press
ISBN-13: 978-158426-626-6

HIM 2050 Medical Terminology

The Language of Medicine by Davi-Ellen Chabner 11th edition
By Davi-Ellen Chabner
Elsevier Publishing
ISBN: 978-0-32337-081-3

HIM 2080 PathoPharmacology for Healthcare Professionals

Pathopharmocolgy with Printed Access Card
(Bundle: Loose-leaf version: MindTap access 12 months)
By Colbert and Pierce
Cengage
ISBN: 978-1-305-94625-5

HIM 2600 Global Healthcare Data and Statistics

A Practical Approach to Analyzing Healthcare Data 3rd edition
By White
AHIMA Press
ISBN: 978-1-58426-427-6

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Health Information Management: Concepts, Principles and Practice 6th edition
By Oachs and Watters
AHIMA Press
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Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

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By Amatayakul
AHIMA Press
ISBN: 978-1-58426-529-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Statistics and Data Analytics for Health Data Management
By Davis and Shiland
Elsevier Publishing
ISBN: 978-1-4557-5315-4

Recommended if taking the CHDA exam, but not required-

CHDA Exam Preparation 2nd edition
By White
AHIMA Press
ISBN: 978-158426-618-1

HIM 3750 Healthcare Classification Systems

Buck's Step-by-Step Medical Coding 2020 Edition
By Buck
Elsevier Publishing
ISBN-13: 978-0-32360-949-4

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

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Medical Terminology and Anatomy for Coding, 4th edition
By Shiland
Elsevier
ISBN: 978032722360

HIM 3900 Clinical Documentation and Management of Health Information

Clinical Documentation Improvement Principles and Practice
By Hess
AHIMA Press
ISBN: 978-1-58426-502-3

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
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AHIMA Press
ISBN: 978-1-58426-529-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 4250, HIM 4600, HIM 4800

Recommended if taking the CDIP exam, but not required for Class-

Certified Documentation Improvement Practitioner (CDIP) Exam Preparation
By Easterling
AHIMA Press
ISBN: ISBN: 9781584264576

HIM 4250 Quality and Security of Health Information

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Health Information Management: Concepts, Principles and Practice 6th edition
By Oachs and Watters
AHIMA Press
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Introduction to Health Information Privacy and Security 2nd Edition
By Rinehart-Thompson
AHIMA Press
ISBN: 978-1-58426-588-7

Quality and Performance Improvement in Healthcare:
Theory Practice and Management 7th edition
By Shaw and Carter
AHIMA Press
ISBN: 978-1-58426-663-1

Recommended but not required if taking the CHPS exam-

Certified in Healthcare Privacy and Security (CHPS) Exam Preparation
By Brinda
AHIMA Press
ISBN: **978-158426-490-3**

HIM 4900 Service Learning/Project Based Health Information Management Professional Internship Experience

Health Information Management: Concepts, Principles and Practice 6th edition
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Registered Health Information Administrator Exam Preparation 7th edition
With RHIA Exam Registration
By Shaw and Carter
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Must be purchased at Detroit Mercy Bookstore
Do not purchase until you talk with the Professor

Servant Leadership Across Cultures
By Trompenaars
McGraw Hill
ISBN: 978-0-07166-435-6

The Servant as Leader (booklet)
By Robert Greenleaf
ISBN: 978-0-98220-122-0
Also used in HIM 4600

Winter 2022 Book List

HIM 2050 Medical Terminology

The Language of Medicine by Davi-Ellen Chabner 11th edition
By Davi-Ellen Chabner
Elsevier Publishing
ISBN: 978-0-32337-081-3

HIM 2080 PathoPharmacology for Healthcare Professionals

Pathopharmocolgy with Printed Access Card
(Bundle: Loose-leaf version: MindTap access 12 months)
By Colbert and Pierce
Cengage
ISBN: 978-1-305-94625-5

HIM 2600 Global Healthcare Data and Statistics

A Practical Approach to Analyzing Healthcare Data 3rd edition
By White
AHIMA Press
ISBN: 978-1-58426-427-6

Health Information Management Case Studies 2nd Edition
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AHIMA Press
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Statistics and Data Analytics for Health Data Management
By Davis and Shiland
Elsevier Publishing
ISBN: 978-1-4557-5315-4

Recommended if taking the CHDA exam, but not required-

CHDA Exam Preparation 2nd edition
By White
AHIMA Press
ISBN: 978-158426-618-1

HIM 3400 Healthcare Revenue Management

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

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By Oachs and Watters
AHIMA Press
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Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800, HIM 4900

The Physician Billing Process 3rd Edition
By Keegan and Woodcock
MGMA
ISBN-13: 978-1568294940

Principles of Healthcare Reimbursement, 6th edition
By Casto
AHIMA
ISBN: 978-1-58426-646-4

HIM 4600 Global Leadership and Strategic Planning for Healthcare Professionals

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Health Information Management: Concepts, Principles and Practice 6th edition
By Ochs and Watters
AHIMA Press
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Health IT and EHR's: Principles and Practice 6th edition
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AHIMA Press
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Also used in HIM 1090, HIM 2600, HIM 3400, HIM 3750, HIM 3900, HIM 4250, HIM 4600, HIM 4800

Leadership Development for Healthcare: A Pathway, Process, and Workbook
By Johns
AHIMA Press
ISBN: 978-1-584260-463-7

Servant Leadership Across Cultures
By Trompenaars
McGraw Hill
ISBN: 978-0-07166-435-6

The Servant as Leader (booklet)
By Robert Greenleaf
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Also used in HIM 4900

HIM 4800 Health Information and Data Governance

Health Information Management Case Studies 2nd Edition
By Foley
AHIMA Press
ISBN: 978-1-58426-769-0
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AHIMA Press
ISBN: 978-1-58426-725-6

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Enterprise Health Information Management and Data Governance
By Johns
AHIMA Press
ISBN 978-1-58426-155-1

Health IT and EHR's: Principles and Practice 6th edition
By Amatayakul
AHIMA Press
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By White
AHIMA Press
ISBN: 978-158426-618-1

College of Health Professions – Bachelor of Science Degree

Health Information Management and Technology Major

Plan of Study

Name_____ **T0**_____ **HIMT entry term**_____

CORE CURRICULUM ***(54 cr)***

KNOWLEDGE AREAS A-F

A Communication Skills (6 cr)
A1 CST 1010 _____
A2 ENL 1310 _____

B Mathematics/Statistical (6 cr)
B1 MTH 1010 (or higher) _____
B2 STA 2250 _____ ___

C Scientific (3 cr)
C1 Physical Sci (fulfilled by supportive course BIO 2300)
C2 Social Sci _____

D Religious & Philosophical (9 cr)
D1 PHL 1000 _____
D2 RELS _____
D3 2nd PHL or RELS_____

E Essential Humanities (9 cr)
E1 Historical Experience _____
E2 Literary Experience _____
E3 Aesthetic Experience _____

F Ethics & Social Responsibility (3 cr)
F1 ETH 3580 _____

INTEGRATING THEMES 1-6 ***(18 cr)***
IT1 Reading, Writing, & Research _____
IT2 Critical Thinking _____
IT3 Cultural Diversity _____
IT4 Human Difference _____
IT5 Personal Spiritual Dev _____
IT6 Spirituality & Social Justice _____

SUPPORTIVE COURSES ***(6 cr)***
BIO 2300 Human A&P Lecture I _____
BIO 2320 Human A&P Lecture II _____

SUPPORTIVE ADMIN COURSES *(9* ***cr)***
HSA 3001 (HY) Acct for Health Professions _____
HSA 3100 (OL) Laws & Regulations_____
HSA 4700 (HY) Evidence-Based Research _____

HY – Hybrid (Classes online and in seat)
OL - Online

HIM MAJOR REQUIREMENTS ***(33 cr)***
HIM 1090 (OL) Info Systems for Global Hlth_____
HIM 2050 (OL) Medical Terminology_____
HIM 2080 (OL) PathoPharm for Hlthcare _____
HIM 2600 (OL) Global Hlthcare Data Stats_____
HIM 3400 (OL) Healthcare Revenue Cycle Mgmt_____
HIM 3750 (OL) Healthcare Classification Systems_____
HIM 3900 (OL) Clinical Document Improvement_____
HIM 4250 (OL) Quality Security Hlth Info_____
HIM 4600 (OL) Global Leadership_____
HIM 4800 (OL) Hlthcare Info Data Gov_____
HIM 4900 (OL) Service Learning Internship_____

SUPPORTIVE TECHNOLOGY FOCUS
Data Analytics Focus ***(18 cr*** *focus in data analytics – no minor awarded)*
CIS 3350 (OL) Intro to Human Factors & IT_____
CIS 4060 (OL) Software Requirements & Design_____
CIS 4070 (OL) Software Test & Qual Assurance or **CIS 4600** (OL) Data Mining for Cybersecurity_____
CIS 4505 (OL) Software Project Mgmt_____
CIS 4720 (OL) Intro to Incident Response_____
CIS 4850 (OL) IA Risk Management_____
OR
Cybersecurity Minor ***(18 cr*** *Minor in Cybersecurity)*
CIS 1010 Foundations of Cybersecurity_____
CIS 4070 (OL) Software Test & Quality Assure _____
CIS 4560 Database Design _____
CIS 4570 Networks_____
CIS 4650 (OL) Information & Society_____
CIS 4710 Ethical Hacking_____
OR
Computer Science Minor ***(18 cr*** *Minor in Comp Science)*
CSSE 1712 Intro to Programming I_____
CSSE 1722 Intro to Prog II _____
CSSE 3430 Data Structures _____
CSSE 3540 Database Systems **&** Programming _____
Select two of the following CSSE Electives (6 credits)
CSSE 2130 Java _____
CSSE 3560 Mobile Application Development _____
CSSE 4150 Software Engineering_____
CSSE 4440 Web Technology _____
CSSE 4490 Operating Systems_____
CSSE 4540 Computer Security _____
CSSE 4550 Artificial Intelligence _____
CSSE 4610 Data Mining _____

Credit Summary ***(degree requires a minimum of 120 credits)***
Core Curriculum ***(54)*** _____
HIMT Major Courses ***(33)*** _____
Supportive Tech Focus ***(18)*** _____
Supportive Courses ***(6)*** _____
Supportive Admin Courses ***(9)*** _____
Elective credits ***(if needed to reach 120)*** _____
TOTAL CREDITS_____

College of Health Professions Policies and Procedures

Academic Appeals

https://healthprofessions.udmercy.edu/about/pph.php

Academic Advising

The HIMT program recognizes the need for guidance continues throughout the learning process. Faculty and academic advisors are available for students in the HIMT program. Academic advising in the HIMT program is a shared responsibility among students, advisors and faculty members. The shared responsibilities of students and advisors can be more specifically stated as:

Student Responsibilities

- Identify advising and registration dates in the *Schedule of Classes.*
- Identify your faculty advisor.
- View course schedule at www.udmercy.edu/classschedule.
- Contact your advisor as early as possible and be **prepared** for advisement.
- Maintain throughout the program, an advising portfolio containing a copy of your program plan, grade reports, and other related information. Students are expected to be informed and knowledgeable regarding their plan of study.
- Plan registration according to the appropriate curriculum plan with adherence to listed course pre and co-requisites.
- Consult with your advisor concerning course selection and program requirements as needed.
- Register online.
- Inform advisor of any changes or need for change in registration or issues concerning academic status.
- Consult with your advisor regarding academic concerns or any issue that might influence academic performance and progress.

NOTE: Only assigned advisors or the HIMT Program Director/Department Chair may approve and sign Student Registration/Add-Drop Forms.

Honor Code

https://healthprofessions.udmercy.edu/about/pph.php

Students in the College of Health Professions at University of Detroit Mercy are expected to exhibit behaviors that epitomize academic, professional and personal integrity. They are committed to the traditions of the Sisters of Mercy and the Society of Jesus that emphasize values, respect for others, and academic excellence. Adherence to such high standards is necessary to ensure quality in education and clinical care in all College of Health Professions programs. A student's acceptance into a program of the College of Health Professions is conditional upon signing an affirmation of the *CHP Student Honor Code* (Appendix F).

Honor Council

Charge

The function of the CHP Honor Council is as follows:

- To develop a keener understanding of such concepts as personal and professional honor and integrity within the student body of CHP
- To identify and sponsor activities and events for students and faculty of the CHP that promotes such understanding
- To ensure all CHP programs disseminate the Honor Code to all incoming students and obtain their students' support of the Code's provisions
- To monitor and annually review the processes, policies, and procedures of the Honor Council and draft and submit to the CHP faculty for approval any necessary revisions

- To hear and investigate allegations of dishonorable conduct within the CHP and make recommendations to the Dean and/or Program/Department Directors and/or the Academic Progression Committee

Membership

Faculty representation on the Council will consist of a total of three faculty members from the CHP. One of these three faculty members will be a faculty representative from the McAuley School of Nursing-Grand Rapids. All faculty members will be appointed by the Dean of the CHP and will serve a two-year term. Student representation will consist of representatives from each CHP program, as identified by the following:

- Health Services Administration (2 students)
- McAuley School of Nursing-Grand Rapids (1 student)
- McAuley School of Nursing-Detroit (3 students)
- Nurse Anesthesia (2 students)
- Physician Assistant (2 students)

Student membership will consist of a total of 10 CHP students, all of whom are appointed by the Dean to serve a two-year term. Both faculty and students will serve staggered terms, such that approximately one-half of the total membership changes with each academic year.

Complaints/Allegations

Complaints or allegations of unprofessional or dishonorable conduct on the part of a student in a CHP program may be made directly to any or all members of the Honor Council. Complaints can be made in person, in writing, or via e-mail.

Regardless of the communication methods employed, within seven business days of making a complaint a complainant must come, in person, before a quorum of the Honor Council to answer questions regarding the complaint. A quorum will consist of a simple majority of Council members, with at least one of these being a faculty representative.

After completion of this initial meeting with the complainant, the Honor Council will vote as to whether or not the complaint constitutes an appropriate issue for the Honor Council to pursue. A decision will be reached by a simple majority vote. The outcome of this vote will either be to initiate a fuller investigation of the allegation, to refer the complainant to a more appropriate venue, or to decide that the complaint does not warrant further action.

A decision to further investigate the allegation will include, but not be limited to, an interview with the student or students against whom the complaint is made, as well as interviews with any advisor, faculty member, student, university staff member, or staff from any partner organizations. Within 30 days of receiving the initial complaint, a quorum of the Honor Council must meet to vote on the Council's final decision and recommendations. At this point, the Council will decide that no further action is indicated or that some manner of sanction against the student or students is indicated.

The Honor Council acts as a recommending body only. Recommendations of sanction may include anything from a verbal counseling to the dismissal of the student from their CHP program. Recommendations of the Honor Council are made directly to the Program or Department Director and the Dean of the College of Health Professions. All proceedings of the Honor Council are to be kept in strict confidence. The Director and/or the Dean may share Honor Council recommendations with the faculty involved, when necessary. Violations of the confidentiality rights of students and faculty within the CHP would constitute unprofessional and dishonorable conduct on the part of the individual or individuals making the disclosure.

Complaints Against the HIMT Program

At any time during the regular academic year, a student with a complaint regarding course content, presentation of content, conduct of students, or conduct of faculty in the classroom should directly address the complaint with the professor teaching the course. If, after meeting with the professor, the student believes that his/her concerns have not been adequately addressed, the student may pursue these concerns according to the following sequence:

- Review with HIMT Program Director/Department Chair
- Review with Dean, College of Health Professions

The complaint process is to be followed in sequential order. Complaints not following within the sequential order will be referred back to the appropriate faculty member or administrator.

Grading Policies

All HIMT courses must be completed with a “C” or better.

Grading Scale HIMT Program

%	GRADE
100-95	A
94-91	A-
90-88	B+
87-84	B
83-81	B-
80-78	C+
77-75	C
74-72	C-
71-69	D+
68-65	D
64-0	F

Course Grading

Successful completion of all HIMT courses is dependent upon achievement of a minimum of C.

Incomplete Grade

A student may request an incomplete grade from the faculty if there is a legitimate reason acceptable to the professor and the student is progressing satisfactorily in the course and has completed at least 50% of the course work. The faculty and student agree on the time limit for completion of the course and sign the appropriate form, but all course work must be completed no later than the sixth week of the following semester. Failure to meet the stated requirements will result in an automatic grade of I/F.

Withdrawal
Students who officially withdraw from a class after the 100% refund period and before 75% of the course has taken place will receive a grade of W. Students cannot withdraw from any course after 75% of that course has taken place. This date is calculated based on the published beginning and ending date for the course. A student in the HIMT program who needs to withdraw needs written approval of the advisor for the withdrawal. Permission for a student to withdraw after 75% of the course has taken place will be granted only in unavoidable circumstances. If a student is unable to complete any of his/her classes and is physically unable to come to file the Change of Registration, a letter to this effect should be sent by the student to the HIMT Program Director/Department Chair prior to the withdrawal deadline.

Forced Withdrawal
In some cases, a "Change of Registration" may be initiated by the CHP and/or HIMT Administration to remove a student from a course. This action is taken at the discretion of the HIMT Program Director/Department Chair after consultation with faculty any time the safety or well-being of that student, client, other students, or agency personnel is in jeopardy. The action will also be instituted if the student has failed to follow the procedures, regulations, prerequisites, or requirements of the University or the College or Health Professions. Forced withdrawal will also be instituted when a student has gained registration in a class by misrepresentation (refer to Academic Advising section).

Course Policies and Procedures

Assignments (Written or Oral)
All assignments must be completed and submitted on the day they are due. Arrangements for an extension of time for an assignment must be made before the date the assignment is due and will be given only for serious reasons.

For late assignments, the faculty have the option to:
- Maintain the required due date or time of the assignment
- Change the required due date or time of the assignment
- Change the assignment
- Lower the grade of late assignments
- Refuse to accept the late assignment and assign a failing grade

The original paper and a copy of all reference materials must be submitted for written assignments. The original is to be duplicated, as the paper may not be returned to the student.

All written assignments must follow American Psychological Association (APA) format.

Class Absence and Attendance

Absences

The University recognizes the importance of class attendance by all students. When athletic schedules and schedules for other Detroit Mercy-sponsored activities are constructed, class absences must be taken into consideration and should be kept at a minimum.

It is the responsibility of the student involved in Detroit Mercy-sponsored activities to inform instructors well in advance (or as soon as the student knows) when classes must be missed, and to complete any assignments due during the absence, in accordance with the instructor's written policy in the syllabus for the course. The student and instructor are encouraged to work out some reasonable accommodation regarding course requirements, if classes are to be missed. In the case of student athletes, the student is expected to present the instructor with a schedule of competitions, from the athletic department, during the first week of class.

Attendance

Students enrolled in in-seat classes are expected to attend all classes (i.e., lecture, seminar, practicums). Practicum absences are an individual responsibility and should be seriously considered when establishing priorities of time. Anticipated absences should be discussed with the Practicum Mentor prior to the time of the absence.

Students enrolled in online classes are expected to be actively participating in class assignments and discussions by reading assigned chapters and completing at least one graded activity, assignment, etc. each week. If a student fails to log into an online class for one week, it will be assumed the student has dropped the class.

Students must also be actively participating in the online portion of in-seat classes by actively completing online assignments. If a student fails to log into Blackboard or attend an in-seat class for one week, it will be assumed the student has dropped the class unless the student notifies the instructor via email.

Examinations

Process

- Assigned seating may be used for examinations
- Examination dates, times, and locations may be changed at the sole decision of the instructor
- Faculty proctors may be present for all examinations. Additional proctors may be used based on the conditions of the examination and the availability of faculty
- Students may bring only writing implements and other authorized materials to their seat. Any materials not authorized by the course faculty, book bags, etc., must be placed in a location designated by the course faculty
- Answers will be written only on the examination itself or on other materials as designated by the course faculty
- A student discovered cheating in any manner on an examination is liable for disciplinary action as described in this *HIMT Student Handbook* under "Academic Dishonesty". Students may be requested to produce valid identification at any time while in the examination room. Failure to produce such identification when requested will result in the examination grade being withheld until identification is verified

Dates

- All examinations are to be taken at the scheduled dates, times and locations
- Make-up exams for those unable to write an exam on the scheduled day will be scheduled only on approval of the HIMT Program Director/Department Chair and/or the instructor. It is expected that the student contact the instructor prior to missing an examination due to some extraordinary circumstance

- It will be the sole decision of the faculty member as to whether or not the student will be allowed to make up an examination. Factors which faculty will evaluate to determine eligibility for makeup include the reason for the absence, and notification of the absence prior to the scheduled examination time according to policy
- Make-up exams may not contain the same items or be in the same format as the original exam. Faculty also has the prerogative to establish a maximum attainable grade for the missed examination
- Make-up exams will be done at the date, time and location determined by the faculty member, and in most cases, will be completed by no later than the next regularly scheduled class day

Professional and Ethical Conduct

The HIMT program has established standards for determining the professional and ethical conduct of students. All students enrolled in this program are expected to adhere to a standard of behavior consistent with the high standards of their profession. Compliance with all institutional rules and regulations, city, state and federal law is expected.

Student conduct includes the following considerations:

- **Concern for the welfare of patients** (real or simulated) as evidenced by a thoughtful and professional attitude in obtaining information and primary or secondary data from patients and/or patient medical records.

- **Concern for the rights of others**, shown by: dealing with class peers, professional and staff personnel, and with all other members of the health team in a considerate manner and with a spirit of cooperation; respectful of all people despite differences encountered in a classroom setting or a professional capacity regardless of race, religion, gender, sexual orientation or disability; assuming an appropriate and equitable share of duties among peers.

- **Responsibility to duty**, which involves: effectively undertaking duties with enthusiasm and persevering until complete. If this is not possible, or student will be late or absent, student must notify responsible persons with an explanation.

- **Trustworthiness**; being truthful and intellectually honest in communication with others; acceptance of responsibility for meeting multiple demands by establishing proper priorities and by completing work; discerning accurately when supervision or advice is needed before acting; maintaining confidentiality of information concerning patients.

- **Professional demeanor**, which means: neat and clean appearance in attire that is acceptable as professional; maintaining equilibrium under pressures of fatigue, professional stress, or personal problems; avoidance of the effects of alcohol or of drugs and following the practicum site's tobacco use policies.

It is not possible to enumerate all forms of inappropriate behavior.

The following, however, are examples of behavior, which would constitute a violation of professional standards:

- Harassment, harm, abuse, damage, or theft to or of any person or property including copying of copyrighted materials and software on University of Detroit Mercy grounds or property owned by any hospital/clinic, affiliated institution/organization, or individual to which the student may be assigned.
- Entering or using practicum site facilities without authorization or disrupting teaching, administrative, or employee functions of the practicum site.
- Falsifying practicum hours, practicum records, or practicum experiences.

- Contacting agency personnel outside of the practicum learning experience without authorization.
- Conviction of a felony.
- Participating in academic or practicum endeavors of University of Detroit Mercy or its affiliated institutions while under the influence of alcohol, a controlled substance, or illicit drugs or unlawful use, possession, or distribution of illegal drugs and alcohol.
- Placing a patient in needless jeopardy or unethical disclosure of privileged information.
- Behavior or grooming which elicits a lack of respect and confidence from faculty or colleagues.
- Abusive or disrespectful conduct toward members of the faculty, administrative or professional staff, employees, students, patients, or visitors to University of Detroit Mercy and/or its affiliated practicum sites.

Practicum Policies

Please refer to the *HIMT Student Practicum Guide* for further information regarding the health check, drug screening and criminal background check.

Drug Screening

https://healthprofessions.udmercy.edu/_files/pdf/Drug_Screening_Policy_Procedure.pdf

Criminal Background Check

https://healthprofessions.udmercy.edu/_files/pdf/Criminal_Background_Check_Policy_Procedure.pdf

Practicum Site Assignment

Students will be responsible in assisting/finding their practicum site assignment. Refer to the HIMT Student Practicum Guide for further information.

Required Hours

The student is responsible for completing 60 hours for the practicum. This will include HIMT competencies and a service-learning project. Practicum hours, unless agreed to by student, Practicum Mentor and HIMT Program Director/Department Chair, should be completed in one semester.

Professional Grooming and Attire

Students are expected to exercise good judgment in their grooming, hygiene and personal appearance. They are expected to dress in a professional manner which conforms to the established dress code in their practicum. Contact the HIMT Program Director/Department Chair or HIM Academic Coordinator if there are any questions regarding appropriate grooming and attire for a practicum.

Student Practicum Evaluation

Evaluation of student performance is an ongoing collaborative process. Students and faculty are expected to communicate frequently regarding completing the objectives. An evaluation form is completed by the Practicum Mentor following the practicum experience. The student is required to complete an evaluation of the practicum experience. The HIMT Program Director/Department Chair will review the results with the student post-practicum.

Student Practicum Absence

Tardiness and absences from the practicum site are unacceptable except in an emergency situation. Should an absence or tardiness be unavoidable, the student should notify the Practicum Mentor at least one hour prior to the scheduled session. Failure to report an impending absence is considered lack of accountability and may be reflected in the practicum evaluation. In the event of a practicum absence, the student must make up all missed contact hours, unless agreed to by student, Practicum Mentor and HIMT Program Director/Department Chair.

Accidents or Unusual Events
Any accident or unusual circumstance in which students have become involved during their practicum experience must be reported to their Practicum Mentor.

Medical Record and Health History Information (HIPAA) Confidentiality
All data gathered about the patient and his/her illness, including all items within a patient's medical history, is privileged information.

- Students should not discuss or present a patient's records in a manner or situation which would violate the confidential nature of that record.
- Charts or contents, e.g., lab reports, etc., are not to be removed from the practicum site.

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 mandates Federal privacy protection for individually identifiable health information. Standards have been set for health care providers who transmit health care transactions electronically. While at the practicum site, most of the health care providers and administrators you will come in contact with will be under the HIPAA guidelines and requirements.

Social Media
In addition to the University Social Media policy, students in practicums are expected to follow all practicum site policies regarding the use of technology. This includes all tools, computers, online platforms or software. All HIMT students should keep the following in mind:

- Site computers cannot be used for any personal business.
- All personal communication including cell phone calls and texting must occur outside the practicum site.
- Students should never post or discuss any information about patients, families or clinical agencies on social media platforms.
- No pictures of patients, families, staff or units may be posted on any social media platform or anywhere.

Professional Disciplinary Sanctions
Students who fail to meet the standards specified in the program policy on attendance, professional decorum, clinical conduct, academic misconduct or dishonesty or professional ethics are subject to sanctions including, but are not limited to, warning, reprimand, probation and dismissal. The HIMT Program Director/Department Chair will adjudicate all matters involving dismissal for professional misconduct.

Warning
A warning is a written letter to a student for misconduct that is found to be isolated, promptly correctable, and does not violate a specific program, University policy or jurisdictional law. A warning may be issued by any faculty member, or any representative of University of Detroit Mercy. Warnings are reported to the HIMT Program Director/Department Chair for informational purposes. Temporary entry is made into the student record and made permanent if further action is required. Warning letter(s) is/are removed upon successful completion of education.

Reprimand
A reprimand is a written letter to a student for misconduct that is found to be more serious than the above, but is still felt to be isolated, promptly correctable, and does not violate a specific program, University policy or jurisdictional law. Reprimand may be issued by any faculty member through the Director. Reprimands are reported to the Dean of the College of Health Professions for informational purposes. A copy is placed in the student's record.

Probation
In a more serious breach of professional standards, a student may be placed on (professional) disciplinary probation. The Office of the Director will decide provisions included in probation, such as the duration and conditions of the probation on a case by case basis. Such provisions may include a requirement that the student obtain medical (including psychiatric) consultation and treatment, or other requirements that will remedy the misconduct and prevent its recurrence. Examples of such requirements may include community service or University service.

Students may or may not be allowed to continue classes while on probation, and may not be allowed to continue in the practicum. Student on professional disciplinary probation will be required to meet with the faculty member, advisor or HIMT administrative personnel as outlined in the probation contract. Failure to comply with any part of the probation contract, including regularly scheduled meetings, may result in the student being dismissed from the HIMT program. Likewise, repeated professional disciplinary probation can result in dismissal as described below.

Dismissal
Dismissal is a permanent separation from the program. Dismissal may be imposed with or without the right to reapply for admission to University of Detroit Mercy at a later date. A student may be immediately dismissed for a serious breach of conduct or: Two (2) successive or three (3) aggregate terms of professional probation. The dismissal from the program will be noted on the student's transcript.

Consultation
When medical or psychiatric consultation is required or recommended, all parties will respect patient/provider confidentiality. However, documentation of enrollment and/or completion may be required as a condition for reinstatement.

AHIMA Code of Ethics
HIMT students are also expected to adhere to the *AHIMA Code of Ethics* (Appendix A) the *AHIMA Code of Ethical Coding* (Appendix B) and *Ethical Standards for Clinical Documentation Improvement Professionals* (Appendix C).

Detroit Mercy Policies and Procedures

Academic Integrity Policy
http://www.udmercy.edu/life/policies/index.php
All students in the University assume an obligation to conduct themselves in a manner compatible with the rights and responsibilities outlined in University of Detroit Mercy *Student Handbook*.

Sanctions for violations of these policies are also outlined in the *Student Handbook*. Students are also subject to the policies, rules and regulations of the colleges/schools in which they are enrolled or taking classes. All academic grievances are handled by the Office of the Dean in the individual college/school.

Academic Dishonesty
As members of an academic community engaged in the pursuit of truth and with a special concern for values, students are expected to conform to high standards of honesty and integrity in their academic work. The fundamental assumption under which the University operates is that work submitted by a student is a product of his or her own efforts. Following are some examples of academic dishonesty:

- **Plagiarism.** Among the most serious academic offenses, plagiarism is submitting the words or style of another author or source without acknowledgement or formal documentation. Plagiarism is occurring when specific phrases or entire passages, whether a sentence, paragraph, or longer excerpt, are incorporated into one's own writing without quotation marks or documentation. One also plagiarizes by paraphrasing the work of another that is retaining another writer's ideas and structure without documentation. Students are advised to always set off another writer's exact words by quotation marks, with appropriate references. Students avoid plagiarism by concentrating on their own words and ideas and by fully crediting others' work and ideas when they find their way into the writing. Whenever in doubt, cite the source. Students who purchase essays from other students or agencies or who copy from one another or from prohibited sources commit the most serious type of academic dishonesty. The consequences of plagiarism, or any act of academic dishonesty, may range from failure in a course to dismissal from the University.

- **Cheating on examinations.** This includes using materials such as books and/or notes when not authorized by the instructor, copying from someone else's paper, helping someone else copy work, substituting another's work as one's own, theft of exam copies, or other forms of misconduct on exams.

- **Falsifying records** or providing misinformation in documentation of practicum hours and experiences or in one's credentials.

- **Unauthorized collaboration** on assignments and unauthorized access to and use of computer programs, including modifying computer files created by others and representing that work as one's own.

- **Presenting work completed for a course taken in the past**, or work currently being completed for another course may not be submitted for a current course unless permission is given to do so.

- **Theft** of another student's course material, notes or other data or the interference with another student's academic pursuits.

Disciplinary Sanctions

Suspected academic misconduct (e.g., plagiarism, cheating on exam, falsifying records, unauthorized collaboration, presenter, theft) is subject to disciplinary sanctions. Reports of such behavior may be initiated by faculty, staff, students or agency personnel and forwarded to the HIMT Program Director/Department Chair. No grade is given until reviewed by the HIMT Program Director/Department Chair and faculty. Review of academic misconduct violations will be conducted by the HIMT Program Director/Department Chair and faculty.

Step 1 The appropriate HIMT Program Director/Department Chair will meet with the person initiating the report of suspected academic misconduct. The faculty and the HIMT Program Director/Department Chair will investigate the allegation.

Step 2 The HIMT Program Director/Department Chair then will meet with the student to identify the problem or cause for concern and to review the policy in the *HIMT Student Handbook*.

Step 3 If this is a graded assignment, no grade shall be assigned.

Step 4 The student's work in question will be forwarded to the HIMT faculty not teaching the course with accompanying documentation from faculty who taught the course.

Step 5 Faculty teaching the course will meet with the other HIMT faculty to review the suspected violation.

Step 6 The student will meet with the faculty and/or HIMT Program Director/Department Chair.

Step 7 The recommendation from the faculty and HIMT Program Director/Department Chair will be correlated to meet the degree of the offense but could range from a "0" for the assignment, to failure in a course or to dismissal. Other recommendations could include community service, an additional paper, etc.

Students may repeat the course once and must earn a passing grade. A student may only appear before the HIMT Program Director/Department Chair and HIMT faculty one time for an offense of plagiarism. Any further allegation of such will lead to dismissal.

The consequences of plagiarism, or any act of academic dishonesty, depending on severity, may range from failure in a course to dismissal from the University.

If no violation is found, all records and documentation shall be destroyed and information regarding the matter may not be entered or placed in either the student or the respondent file. If a violation is found, all records and documentation shall be placed in the respective file.

Class Cancellation/University Closure

https://www.udmercy.edu/life/public-safety/closing.php
The decision to delay or cancel classes or close the University due to inclement weather or other threatening circumstances will be made by the President upon the recommendation and advice of the Associate Vice President for Facilities Management. This decision is based on road and parking conditions and the safety of students and employees. The Facilities Management AVP will consult with other sources for information as needed. In the President's absence, the decision to delay or cancel classes or close campuses will be made by the Vice President for Academic Affairs, or the Vice President for Business and Finance.

Emergency & Safety Alerts

Students are encouraged to sign up for RAVE at:
https://www.udmercy.edu/life/public-safety/rave.php

Evaluations – Course and Faculty

Detroit Mercy provides a secure, anonymous and easily accessible resource for submitting your faculty/course evaluations. Faculty/course evaluations are used to gather information, which aids faculty in improving courses and the curriculum. Evaluation of faculty and their courses is a part of the overall faculty evaluation and accreditation processes.

The tool is completely anonymous; there is no method by which the evaluation can be linked to the student.

To use the online evaluation tool, go to the course evaluation site at https://www.udmercy.edu/evaluate/. A student will sign into the system using their TitanPass login. CHP Faculty/Course evaluations for the standard 15-week course sections may be completed during the week before final exams to the end of final exam week (from Monday - 12:00 am – Sunday - 1:59 pm).

Family Educational Rights and Privacy Act Information (FERPA)

http://www.udmercy.edu/registrar/ferpa
Link will provide the full FERPA Policy Statement.

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99) is a Federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

At Detroit Mercy, the Registrar coordinates the inspection and review procedures for student records which include admissions, personal, academic and financial files as well as cooperative education and placement records.

No one outside the institution may have access to, nor will the institution disclose any information from, students' educational records without the written consent of the student, *except:* to personnel within the institution, to officials of other institutions in which the student seeks to enroll, to persons or organizations providing student financial aid, to accrediting agencies carrying out their accreditation function, to persons in compliance with a judicial order or subpoena; and to persons in an emergency in order to protect the health or safety of students or other persons.

Religious Observance Statement of University of Detroit Mercy

It is the policy of University of Detroit Mercy to respect the faith and religious obligations of each student. Students with exams and classes that conflict with their religious observances should ***notify their instructor at the beginning of the semester*** in order to work out a mutually agreeable alternative. Please note that, regardless of whether an absence is "excused" or "unexcused," the student is responsible for all missed course content and activities.

Graduation

Application

http://www.udmercy.edu/registrar/forms/pdf/Banner_app_for_graduation3.pdf

Early during the semester in which you plan to complete your degree requirements, you need to complete an Application for Graduation. Summer graduates need to complete the application in the semester before they graduate in order to be eligible to participate in Commencement. Due dates are published in the Schedule of Classes or the Academic Calendar.

The Application for Graduation is also available in your College/School office or the Office of the Registrar. This application must be approved before you are considered a candidate for graduation and is a requirement before your degree can be certified.

Applications received after the deadline may result in denial to participate in the Commencement ceremony and/or delay in the date of graduation.

Senior Residency Rule

Candidates for the bachelor's degree are to complete the last 30 credit hours of their program at University of Detroit Mercy. Any exception to this rule must be petitioned in writing to the Student Affairs Committee.

Quality Point Average

Candidates for a bachelor's degree must maintain a cumulative grade point average of 2.0 quality points.

Guest Application

Detroit-Mercy-Guest-Transfer-Credit-Request.pdf (udmercy.edu)

Students planning to enroll in courses at another college or university must complete a Detroit Mercy Student Request for Guest/Transfer Credit form to be approved by the HIMT Program Director/Department Chair or HIMT Academic Coordinator prior to enrollment. Guest Application approval will be granted to currently matriculated students under the following circumstances:

1) The course is not offered by the University of Detroit Mercy and/or the inability to take the course that term would interfere with the student's progress in the program.
2) The University of Detroit Mercy course is scheduled in conflict with an HIMT course offering.
3) The student is NOT in the last 30 hours of the program.

The application is to be submitted to the Academic Affairs Coordinator, HIMT Program Director/Department Chair or HIMT Academic Coordinator. **Students may not bring in a form and wait for a signature. Forms will be ready for pick up after 24 hours**.

Liability Insurance

https://www.udmercy.edu/life/health/insurance.php

Detroit Mercy supplies coverage which applies to all students.

Disability and Accessibility Support Services

https://www.udmercy.edu/current-students/support-services/disability.php

If you require an accommodation due to a disability, pregnancy, emergency medical condition or need special arrangements in case of a building evacuation, please contact:

Laura Bagdady
Assistant Director
Disability & Accessibility Support Services
Student Success Center, Room 319
McNichols Campus Library
Email: bagdadlm@udmercy.edu
313-993-1158

It is very important for students to be proactive with regard to requesting their disability accommodations **every semester**. While it is never required that you disclose your disability to your professors, all students at Detroit Mercy are encouraged to talk with their professors to discuss their needs and concerns. However, you must be registered with Disability & Accessibility Support Services, and your faculty must receive official notification from their office before they can make arrangements for your accommodations.

Title IX Office

https://www.udmercy.edu/academics/academic-affairs/titleix/

Detroit Mercy encourages any student experiencing potential sexual harassment, sex or gender-based discrimination or sexual misconduct to contact Interim Title IX Coordinator and Equity and Compliance Specialist at 313-993-1802 or titleix@udmercy.edu to obtain resource information and reporting options. Faculty are committed to supporting students and promoting a safe, respectful environment. Therefore, if a student shares information regarding potential sex or gender-based discrimination or misconduct with a faculty member, that faculty member will share this information with the Title IX Coordinator, so that you can be provided with comprehensive information regarding your rights, options, and available resources. When sharing information with a faculty member or other employee of the University, you may choose to withhold identifying information until you have spoken to a confidential resource at the University. With the exception of the Wellness Center or School of Dentistry Office of Health & Wellness, all employees at the University are mandatory reporters. For additional information about policies, resources and reporting options, please visit udmercy.edu/titleix.

Title IX protections include assistance with pregnant and related parenting accommodations. Requests for such accommodations should be submitted with appropriate medical documentation to the Interim Title IX Coordinator and Equity and Compliance Specialist, titleix@udmercy.edu. Questions or concerns regarding provision of medically necessary accommodations related to pregnancy or parenting may also be submitted to Title IX Coordinator and Equity and Compliance Specialist, at 313-993-1802 or titleix@udmercy.edu.

Social Media Policy

Social Media Policy :: New Students / University of Detroit Mercy Programs Online (udmercy.edu)

Social media tools, which facilitate both one-to-many communications and presumably private communications, have grown to become a significant part of how people interact via Internet. Because social media are widely used as promotional tools, personal postings on public media sites can sometimes blur the line between the individual and the institutional voice. This policy provides guidance for members of the University community to protect both their personal reputations and the public image of the institution.

There are substantial differences between individuals representing themselves on public social media sites, individuals representing the University on public social media sites, and individuals using University-hosted social media. This policy is not intended to regulate how individuals conduct themselves in their personal social media actions and interactions. However, it is clear that even a single instance of improper or ill-considered use can do long-term damage to one's reputation, career and to the University. Furthermore, although not intended, never forget as faculty, staff, or an administrator you may always be perceived as a representative of the University. It is therefore in the best interest of the University and all members of the University Community to provide its employees and students with a roadmap for safe, smart use of social media.

The University has a significant investment in University-owned public social media pages and personal sites on University-hosted services, as content on these pages and sites reflects directly on the institution and how it is seen by the general public. Therefore, this policy regarding posting content must be strictly adhered to in these contexts.

While this document will provide more specific guidelines to help navigate particular interactions, all these spring from a set of basic principles:

1. Be respectful.
2. Assume anything you post is public, regardless of privacy settings.
3. Assume anything you post is permanent.

Social Media Policy Guidelines

Detroit Mercy students and employees are personally responsible for any content they post on Twitter, blogs, wikis, or other social media venues. In light of this comment…

Be aware of liability

You are legally responsible for what you post. Take care not to infringe on copyright, defame or libel others, or otherwise violate the law when posting.

Respect copyright

The University supports and respects the intellectual property rights of copyright holders. Content posted on the internet must conform to copyright law. Contact the Detroit Mercy Libraries for help posting copyright-compliant content.

Respect confidentiality
Any number of laws and policies (such as HIPAA and FERPA) may affect the confidentiality of information. Be aware of and conform to these laws, as well as broader institutional policies regarding confidentiality of information and good ethical judgment, when posting to social media sites.

Respect privacy
Do not discuss situations involving named or identifiable individuals without their consent. Do not post images, audio, or video of individuals without their consent.

Be transparent
Detroit Mercy students and employees should feel free to identify themselves as such when posting to social media sites. The association of a University email address with a social media account does not imply University endorsement of content. An individual must make it clear when they are expressing the opinions of the institution. Add a disclaimer if comments *may appear* to be coming from the University. Employees should be in coordination with their supervisor prior to initiating a social media account on behalf of their origination (unit/college).

Be a valued member of the community
When participating in an online community, content of postings should benefit the community as a whole. Consider the nature of the community and the expectations of its members when contributing. Do not use membership purely as a means of promoting yourself or your organization. Do not use the name of the University to endorse products, causes, political parties, or candidates.

Do no harm
Postings, both in content and in substance, must not harm either the University network or the social networks themselves. Do not overload these networks with content that is repetitive, promotional, or will otherwise devalue the service for the rest of the community.

Be respectful of others
Keep a cool head when discussing and debating online. Be passionate on matters about which you are passionate, but always be constructive, exercise discretion, and be respectful of those with whom you disagree.

No stalking, flaming, or bullying
Abusive language, behavior, and content are not appropriate in any context. Do not insult, attack, threaten, or otherwise harass others. Remember that how a message is intended is less important than how it is perceived. If another individual indicates they find behavior threatening, cease this behavior immediately.

Think before posting
Nothing posted on the internet is truly private. Anything put online can easily be shared and re-shared, and archiving systems preserve even content that has been deleted. As a result, content posted privately now may appear in search results for many years to come. Post only content you are comfortable sharing with the general public, including current and future employers.

Maintain your social media pages
When a site or page provides space for the community to interact, usually through comments or other feedback systems, it is important to keep these spaces free of spam and abusive content. Postings in these spaces should be edited to ensure there are no liability issues (e.g., removing links to content that violates copyright or breaks confidentiality rules), but should not be edited because their content is disagreeable.

Detroit Mercy Logo and Marketing Materials

http://www.udmercy.edu/mpa/id-style/id_standards/index.htm
The use of the Detroit Mercy logo shall comply with the Brand Standards Guide published by Marketing & Communications office on its website.

The Detroit Mercy logo is the University's official public identifier. In the majority of Detroit Mercy communications, the logo should be used to ensure consistency of the University's image. The Detroit Mercy crest is to be used only on official, institutional documents issued from the Office of the President or the Vice President for Academic Affairs. Any other use of the crest is limited.

For detailed information on Detroit Mercy's Brand Standards Guide, visit the Marketing & Communications website. Be advised these standards are updated periodically and should be checked regularly to ensure compliance.

Student Complaint Policy & Resolution Center

http://udmercy.edu/about/consumer-info/complaint-policy.php
Link will provide the full Student Complaint Policy & Resolution Center information.

Consistent with its mission, **University of Detroit Mercy** (Detroit Mercy) welcomes feedback from students about our policies, programs and services in an effort to promote a successful learning environment. To that end, Detroit Mercy is committed to providing prompt and fair resolution of all student complaints. We are accountable to our students, constituents and accrediting agency to provide a process by which students may lodge complaints in a nonthreatening manner, free from retaliation of any kind whatsoever.

Student Health Insurance

https://www.udmercy.edu/life/health/insurance.php
Link will provide information about student insurance plan available for purchase.

It is strongly recommended that all students carry health insurance coverage for the duration of the program experience. Health insurance for students is available for purchase. Limited services are available through the Student Health Service. Students are responsible for any health care costs. The University assumes no responsibility for the medical care of a student.

STUDENTS ARE RESPONSIBLE FOR ALL HEALTH CARE COSTS (INCLUDING EMERGENCY CARE) THAT MAY BE INCURRED DURING THEIR ENROLLMENT IN THE HIMT PROGRAM.

Student Success Center

http://www.udmercy.edu/current-students/support-services/success-center
Student Success Center provides a variety of academic support services such as the following:

- Free tutoring for freshman level and some upper division courses
- Supplemental Instruction (SI) groups for math and science
- Placement testing
- Experiential learning assessment
- Study Table for Detroit Mercy athletes in the Learning Center
- Disability support services including, but not limited to, note-takers, enlarged text, test proctoring, alternative testing site, assistance with accessible facilities and readings on tape for students with special needs
- Reference materials including writing style guides, dictionaries, textbooks, etc.

313.993.1143
McNichols Campus Library, Third Floor
Monday – Thursday 8:30 am-8:30 pm, Friday – 8:30 am-5:00 pm
Saturday 10:00 am-3:00 pm, Sunday 12:30 pm – 3:00 pm

Tuition and Fees

The tuition and fee schedule for the University is distributed at registration and is available in the Student Accounting Office and through the College Office. Course fees vary per course. Included in course fees are liability insurance, equipment and technology services.

Tuition Adjustment Petition

https://www.udmercy.edu/current-students/accounting/index.php
The University permits a student to apply for a tuition refund in the event of unusual circumstances preventing timely withdrawal from a course. The student must initiate and complete the "Petition for Tuition Adjustment" form (https://www.udmercy.edu/current-students/accounting/files/petition_refund.pdf). It is the student's responsibility to provide any documentation needed. The student may request support from the Office of the Dean for the petition. The student will be notified of the decision for refund reimbursement after review by the Variance Committee.

Internet Access

Internet access is available at the University in several labs, including a lab in the basement of the CHP Building. The University provides student email accounts, listservers, web browsing, and a variety of productivity and other applications to all current students.

Library

Students are encouraged to utilize the library facilities at the University. A variety of text, journal, and online database references are available. See the Research Portal http://research.udmercy.edu for databases and instructions for accessing library and online resources.

Online Courses

Blackboard will be used for online courses. Students are expected to read all announcements, course information, assignments and documents posted on Blackboard. This can be accessed by the website: http://blackboard.udmercy.edu. You need to check Blackboard at least twice weekly for updates, announcements and any changes or corrections to assignments. You will be responsible for information posted on the website.

The Instructional Design Studio (IDS) provides the Detroit Mercy community with Blackboard training and self-service tutorials on Blackboard help. More information may be found at- https://www.blackboard.com/support

> The Instructional Design Studio may be contacted at-
> http://libraries.udmercy.edu/ids/
> 313-578-0580
> Please contact IDS with questions regarding the use of Blackboard

Student Affairs and Information

Commencement

Graduation is the point at which ALL degree requirements have been met and the degree is awarded. Degrees are awarded on the last day of each month. It is the responsibility of the College/School office to certify that all degree requirements have been met and the degree information is added to your official transcript in the Office of the Registrar. You can access more information on commencement activities at http://www.udmercy.edu/commencement/faqs/index.htm#when.

Counseling Services

Personal Counseling Services
http://www.udmercy.edu/life/health/counseling.php

Psychology Clinic
http://liberalarts.udmercy.edu/psychology-clinic/

Detroit Mercy Psychology Clinic is sponsored by University of Detroit Mercy. It has been providing psychological services to students, staff and community members for over 35 years. Children, adolescents and adults from the entire metropolitan area are eligible to receive services.

Call 313.578.0570 to make an appointment.

Student Handbook – Detroit Mercy
http://www.udmercy.edu/life/policies/index.php
The *Student Handbook* contains non-academic policies and procedures. If you have any questions or need clarification on any of the published policies, please contact the Student Affairs Office (McNichols, Student Center 101), 313.993.1028.

The following information and policies are published at this site:

- Sexual Misconduct Policy
- Information about campus
- The academic calendar
- An A-to-Z guide of Detroit Mercy services and programs
- Computing information
- Detroit Mercy's student policies
- A campus directory
- Information about attractions around town

The Institute for Leadership and Service
http://www.udmercy.edu/about/mission-vision/lead-serve/
Community service is viewed as an important activity at Detroit Mercy and can be accomplished in a variety of ways. The Institute for Leadership and Service works as an agent to get people, primarily students, involved in the University, as well as the surrounding community. Through community service, students see different ways of life due to economics, religions, culture, family values and traditions. They then learn to understand, accept, cherish, and respect these differences, to see similarities and how to work together in a global community.

University Honors Convocation
University Honors Convocation is an annual event that celebrates the academic excellence and leadership of University of Detroit Mercy students. Outstanding HIMT students are eligible for awards.

University Ministry

http://www.udmercy.edu/life/ministry/

University Ministry exists to enhance the spiritual, emotional and community life of the University. Services scheduled throughout the year are: retreats, prayer services, reflections and discussion sessions. University Ministry is available to counsel students in spiritual distress and offer a listening ear for student issues.

Student Center
Room 106
313.993.1560

University Student Organizations

http://www.udmercy.edu/life/groups/index.php

Students may compete in the classroom, but graduates are called upon to collaborate in their careers. Students seek the freedom of individuality, but try to avoid isolation through associations and relationships. At the University, student organizations are an important factor in the total educational process. Student organizations bring together people with similar interests and at the same time challenge them to accept each other's differences.

Organizations:

- Encourage members to expand friendships and develop new relationships
- Encourage students to spend more leisure time growing and learning
- Help students develop skills of leadership and collaboration
- Free students to have dreams larger than themselves, and to have a collective base of talents to bring some of those dreams into reality

Appendix A

AHIMA Code of Ethics

Preamble

The ethical obligations of the health information management (HIM) professional include the safeguarding of privacy and security of health information; appropriate disclosure of health information; development, use, and maintenance of health information systems and health information; and ensuring the accessibility and integrity of health information.

Healthcare consumers are increasingly concerned about security and the potential loss of privacy and the inability to control how their personal health information is used and disclosed. Core health information issues include what information should be collected, how the information should be managed, who should have access to the information, under what conditions the information should be disclosed, how the information is retained, when it is no longer needed, and how is it disposed of in a confidential manner. All of the core health information issues are addressed in compliance with state and federal regulations, and employer policies and procedures.

Ethical obligations are central to the professional's responsibility, regardless of the employment site or the method of collection, storage, and security of health information. In addition, sensitive information (e.g., genetic, adoption, substance use, sexual health, and behavioral information) requires special attention to prevent misuse. In the world of business and interactions with consumers, expertise in the protection of information is required.

Purpose of the AHIMA Code of Ethics

The HIM professional has an obligation to demonstrate actions that reflect values. The American Health Information Management Association (AHIMA) Code of Ethics sets forth these principles. (See also AHIMA Mission, Vision, Values) The code is relevant to all AHIMA members, non-members with the Commission on Certification for Health Informatics and Information Management (CCHIIM) certifications, and students enrolled in a formal certificate or degree granting program directly relevant to AHIMA's Purpose regardless of their professional functions, the settings in which they work, or the populations they serve. These purposes strengthen the HIM professional's efforts to improve overall quality of healthcare.

The AHIMA Code of Ethics serves six purposes

- Promotes high standards of HIM practice.
- Summarizes broad ethical principles that reflect the profession's core values.
- Establishes a set of ethical principles to be used to guide decision-making and actions.
- Establishes a framework for professional behavior and responsibilities when professional obligations conflict or ethical uncertainties arise.
- Provides ethical principles by which the general public can hold the HIM professional accountable.
- Mentors practitioners new to the field to HIM's mission, values, and ethical principles.

The code includes principles that are enforceable and aspirational. The extent to which each principle is enforceable is a matter of professional judgment to be exercised by those responsible for reviewing alleged violations of ethical principles.

Principles

The following principles are based on the core values of the American Health Information Management Association and apply to all AHIMA members, non-members CCHIIM certifications, and students.

1. Advocate, uphold, and defend the consumer's right to privacy and the doctrine of confidentiality in the use and disclosure of information.
2. Put service and the health and welfare of persons before self-interest and conduct oneself in the practice of the profession so as to bring honor to oneself, their peers, and to the health information management profession.
3. Preserve, protect, and secure personal health information in any form or medium and hold in the highest regard health information and other information of a confidential nature obtained in an official capacity, taking into account the applicable statutes and regulations.
4. Refuse to participate in or conceal unethical practices or procedures and report such practices.
5. Use technology, data, and information resources in the way they are intended to be used.
6. Advocate for appropriate uses of information resources across the healthcare ecosystem.
7. Recruit and mentor students, peers and colleagues to develop and strengthen professional workforce.
8. Represent the profession to the public in a positive manner.
9. Advance health information management knowledge and practice through continuing education, research, publications, and presentations.
10. Perform honorably health information management association responsibilities, either appointed or elected, and preserve the confidentiality of any privileged information made known in any official capacity.
11. State truthfully and accurately one’s credentials, professional education, and experiences.
12. Facilitate interdisciplinary collaboration in situations supporting ethical health information principles.
13. Respect the inherent dignity and worth of every person.

AHIMA Code of Ethics Guidelines

Violation of principles in the Code of Ethics does not automatically imply legal liability or violation of the law. Such determination can only be made in the context of legal and judicial proceedings. Alleged violations of the code are subject to a peer review process. Such processes are generally separate from legal or administrative procedures and insulated from legal review or proceedings to allow the profession to counsel and discipline its own members. Although in some situations, violations of the code would constitute unlawful conduct subject to legal process.

Guidelines for ethical and unethical behavior are provided to assist with the interpretation of the American Health Information Management Association (AHIMA) Code of Ethics. The terms "shall” and “shall not" are used as a basis for setting high standards for behavior. This does not imply that everyone "shall” or “shall not" do everything that is listed. This concept is true for the entire code. If someone engages in the stated activities, ethical behavior is the standard. The guidelines are not a comprehensive list. For example, the statement "safeguard all confidential consumer information to include, but not limited to, personal, health, financial, genetic and outcome information" can also be interpreted as "shall not fail to safeguard all confidential consumer information to include personal, health, financial, genetic, and outcome information."

A code of ethics cannot guarantee ethical behavior. Moreover, a code of ethics cannot resolve all ethical issues or disputes or capture the richness and complexity involved in striving to make responsible choices within a moral community. Rather, a code of ethics sets forth values and ethical principles to which a Health Information Management (HIM) professional can aspire and by which actions can be judged. Ethical behaviors result from a personal commitment to engage in ethical practice.

Professional responsibilities often require an individual to move beyond personal values. For example, an individual might demonstrate behaviors that are based on the values of honesty, providing service to others, or demonstrating loyalty. In addition, professional values may require promoting confidentiality, facilitating interdisciplinary collaboration, and refusing to participate or conceal unethical practices. Professional values could require a more comprehensive set of values than an individual's need to be an ethical agent in one's own personal life.

The AHIMA Code of Ethics is to be used by AHIMA members, non-members with the Commission on Certification for Health Informatics and Information Management (CCHIIM) certifications, students enrolled in a formal certificate or degree granting program directly relevant to AHIMA's Purposes, and consumers, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups) that choose to adopt it or use it as a frame of reference. The AHIMA Code of Ethics reflects the commitment of all to uphold the profession's values and to act ethically. Individuals of good character who discern moral questions and, in good faith, seek to make reliable ethical judgments, must apply ethical principles.

The code does not provide a set of rules that prescribe how to act in all situations. Specific applications of the code must consider the context in which it is being considered and the possibility of conflicts among the values and principles.

How to Interpret the Code of Ethics

Principles and Guidelines

The following ethical principles are based on the core values of the American Health Information Management Association and apply to all AHIMA members, non-members with CCHIIM certifications, and students enrolled in a formal certificate or degree granting program directly relevant to AHIMA's Purposes. Guidelines included for each ethical principle are a non-inclusive list of behaviors and situations that can help to clarify the principle. They are not meant to be a comprehensive list of all situations that can occur.

1. **Advocate, uphold, and defend the consumer's right to privacy and the doctrine of confidentiality in the use and disclosure of information.**

A health information management professional **shall**:

1.1. Safeguard all confidential consumer information to include, but not limited to, personal, health, financial, genetic, and outcome information.

1.2. Engage in social and political action that supports the protection of privacy and confidentiality and be aware of the impact of the political arena on the health information issues for the healthcare industry and the public.

1.3. Advocate for changes in policy and legislation to ensure protection of privacy and confidentiality, compliance, and other issues that surface as advocacy issues and facilitate informed participation by the public on these issues.

1.4. Protect the confidentiality of all information obtained in the course of professional service. Disclose only information that is directly relevant or necessary to achieve the purpose of disclosure. Release information only with valid authorization from a consumer or a person legally authorized to consent on behalf of a consumer or as authorized by federal or state regulations. The minimum necessary standard is essential when releasing health information for disclosure activities.

1.5. Promote the obligation to respect privacy by respecting confidential information shared among colleagues, while responding to requests from the legal profession, the media, or other non-healthcare related individuals, during presentations or teaching and in situations that could cause harm to persons.

1.6. Respond promptly and appropriately to consumer requests to exercise their privacy rights (e.g., access, amendments, restriction, confidential communication, etc.). Answer truthfully all consumers' questions concerning their rights to review and annotate their personal biomedical data and seek to facilitate consumers' legitimate right to exercise those rights.

2. Put service and the health and welfare of persons before self-interest and conduct oneself in the practice of the profession so as to bring honor to oneself, peers, and to the health information management profession.

A health information management professional **shall**:

2.1. Act with integrity, behave in a trustworthy manner, elevate service to others above self-interest, and promote high standards of practice in every setting.

2.2. Be aware of the profession's mission, values, and ethical principles, and practice in a manner consistent with them by acting honestly and responsibly.

2.3. Anticipate, clarify, and avoid any conflict of interest, to all parties concerned, when dealing with consumers, consulting with competitors, in providing services requiring potentially conflicting roles (for example, finding out information about one facility that would help a competitor), or serving the Association in a volunteer capacity. The conflicting roles or responsibilities must be clarified and appropriate action taken to minimize any conflict of interest.

2.4. Ensure that the working environment is consistent and encourages compliance with the AHIMA Code of Ethics, taking reasonable steps to eliminate any conditions in the organizations that violate, interfere with, or discourage compliance with the code.

2.5. Take responsibility and credit, including authorship credit, only for work one actually performs, or to which one contributed. Honestly acknowledge the work of and the contributions made by others verbally or written, such as in publication.

A health information management professional **shall not**:

2.6. Permit one's private conduct to interfere with the ability to fulfill one's professional responsibilities.

2.7. Take unfair advantage of any professional relationship or exploit others to further one's own personal, religious, political, or business interests.

3. Preserve, protect, and secure personal health information in any form or medium and hold in the highest regard health information and other information of a confidential nature obtained in an official capacity, taking into account the applicable statutes and regulations.

A health information management professional **shall**:

3.1. Safeguard the privacy and security of written and electronic health information and other sensitive information. Take reasonable steps to ensure that health information is stored securely and that consumers' data and information is not available to others who are not authorized to have access. Prevent inappropriate disclosure of individually identifiable information.

3.2. Take precautions to ensure and maintain the confidentiality of information transmitted, transferred, or disposed of in the event of termination, incapacitation, or death of a healthcare provider to other parties through the use of any media.

3.3. Inform recipients of the limitations and risks associated with providing services via electronic or social media (e.g., computer, telephone, fax, radio, and television).

4. Refuse to participate in or conceal unethical practices or procedures and report such practices.

A health information management professional **shall:**

4.1. Act in a professional and ethical manner at all times.

4.2. Take adequate measures to discourage, prevent, expose, and correct the unethical conduct of colleagues. If needed, utilize the AHIMA Policy and Procedures for Disciplinary Review and Appeal for potential ethics complaints.

4.3. Be knowledgeable about established policies and procedures for handling concerns about colleagues' unethical behavior. These include policies and procedures created by AHIMA, licensing and regulatory bodies, employers, supervisors, agencies, and other professional organizations.

4.4. Seek resolution if there is a belief that a colleague has acted unethically or if there is a belief of incompetence or impairment by discussing one's concerns with the colleague when feasible and when such discussion is likely to be productive.

4.5. Consult with a colleague when feasible and assist the colleague in taking remedial action when there is direct knowledge of a health information management colleague's incompetence or impairment.

4.6. Take action through appropriate formal channels, such as contacting an accreditation or regulatory body and/or the AHIMA Professional Ethics Committee if needed.

4.7. Cooperate with lawful authorities as appropriate.

A health information management professional **shall not**:

4.8. Participate in, condone, or be associated with dishonesty, fraud and abuse, or deception. A non-inclusive list of examples includes:

- Allowing patterns of optimizing or minimizing documentation and/or coding to impact payment
- Assigning codes without provider documentation
- Coding when documentation does not justify the diagnoses or procedures that have been billed
- Miscoding to avoid conflict with others
- Engaging in negligent coding practices
- Hiding or ignoring review outcomes, such as performance data
- Failing to report licensure status for a provider through the appropriate channels
- Recording inaccurate data for accreditation purposes
- Allowing inappropriate access to genetic, adoption, health, or behavioral health information
- Misusing sensitive information about a competitor
- Developing a "record set" that excludes meaningful consumer information to be shared with consumers to protect the health system or specific providers
- Violating the privacy of individuals

Refer to the AHIMA Standards of Ethical Coding (Appendix A) for additional guidance.

4.9. Engage in any relationships with a consumer where there is a risk of exploitation or potential harm to the consumer.

5. **Use technology, data, and information resources in the way they are intended to be used.**

A health information management professional **shall**:

5.1. Use healthcare employer technology resources within the confines of organizational policies.

5.2. Ensure all data and resulting information accessed and derived from healthcare technology resources are not used outside of the scope of the job.

A health information management professional **shall not**:

5.3. Compromise the integrity of healthcare data through any intentional acts or acts that are generally known to create risks to data integrity.

6. **Advocate for appropriate uses of information resources across the healthcare ecosystem.**

A health information management professional **shall**:

6.1. Verify requests for data and information are based on appropriate, verifiable needs and conditions and fall within the confines of organizational policies, regulations, and laws.

6.2. Educate stakeholders about the need to maintain data integrity and the potential impacts should data integrity not be maintained.

A health information management professional **shall not**:

6.3. Manipulate information systems to produce or display data and resulting information that is intentionally misleading

7. **Recruit and mentor students, staff, peers, and colleagues to develop and strengthen professional workforce.**

A health information management professional **shall**:

7.1. Provide directed practice opportunities for students.

7.2. Be a mentor for students, peers, and new health information management professionals to develop and strengthen skills.

7.3. Be responsible for setting clear, appropriate, and culturally sensitive boundaries for students, staff, peers, colleagues, and members within professional organizations.

7.4. Evaluate students' performance in a manner that is fair and respectful when functioning as educators or clinical practicum mentors.

7.5. Evaluate staff's performance in a manner that is fair and respectful when functioning in a supervisory capacity.

7.6. Serve an active role in developing HIMT faculty or actively recruiting HIM professionals.

A health information management professional **shall not**:

7.7. Engage in any relationships with a person (e.g. students, staff, peers, or colleagues) where there is a risk of exploitation or potential harm to that other person.

8. **Represent the profession to the public in a positive manner.**

A health information management professional **shall:**

8.1. Be an advocate for the profession in all settings and participate in activities that promote and explain the mission, values, and principles of the profession to the public.

9. **Advance health information management knowledge and practice through continuing education, research, publications, and presentations**.

A health information management professional **shall**:

9.1. Develop and enhance continually professional expertise, knowledge, and skills (including appropriate education, research, training, consultation, and supervision). Contribute to the knowledge base of health information management and share one's knowledge related to practice, research, and ethics.

9.2. Base practice decisions on recognized knowledge, including empirically based knowledge relevant to health information management and health information management ethics.

9.3. Contribute time and professional expertise to activities that promote respect for the value, integrity, and competence of the health information management profession. These activities may include teaching, research, consultation, service, legislative testimony, advocacy, presentations in the community, and participation in professional organizations.

9.4. Engage in evaluation and research that ensures the confidentiality of participants and of the data obtained from them by following guidelines developed for the participants in consultation with appropriate institutional review boards.

9.5. Report evaluation and research findings accurately and take steps to correct any errors later found in published data using standard publication methods.

9.6. Design or conduct evaluation or research that is in conformance with applicable federal or state laws.

9.7. Take reasonable steps to provide or arrange for continuing education and staff development, addressing current knowledge and emerging developments related to health information management practice and ethics.

10. **Perform honorably health information management association responsibilities, either appointed or elected, and preserve the confidentiality of any privileged information made known in any official capacity.**

A health information management professional **shall**:

10.1. Perform responsibly all duties as assigned by the professional association operating within the bylaws and policies and procedures of the association and any pertinent laws.

10.2. Uphold the decisions made by the association.

10.3. Speak on behalf of the health information management profession and association, only while serving in the role, accurately representing the official and authorized positions of the association.

10.4. Disclose any real or perceived conflicts of interest.

10.5. Relinquish association information upon ending appointed or elected responsibilities.

10.6. Resign from an association position if unable to perform the assigned responsibilities with competence.

10.7. Avoid lending the prestige of the association to advance or appear to advance the private interests of others by endorsing any product or service in return for remuneration. Avoid endorsing products or services of a third party, for-profit entity that competes with AHIMA products and services. Care should **also** be exercised in endorsing any other products and services.

11. **State truthfully and accurately one's credentials, professional education, and experiences.**

A health information management professional **shall**:

11.1. Make clear distinctions between statements made and actions engaged in as a private individual and as a representative of the health information management profession, a professional health information association, or one's employer.

11.2. Claim and ensure that representation to consumers, agencies, and the public of professional qualifications, credentials, education, competence, affiliations, services provided, training, certification, consultation received, supervised experience, and other relevant professional experience are accurate.

11.3. Claim only those relevant professional credentials actually possessed and correct any inaccuracies occurring regarding credentials.

11.4. Report only those continuing education units actually earned for the recertification cycle and correct any inaccuracies occurring regarding CEUs.

12. **Facilitate interdisciplinary collaboration in situations supporting ethical health information principles.**

A health information management professional **shall**:

12.1. Participate in and contribute to decisions that affect the well-being of consumers by drawing on the perspectives, values, and experiences of those involved in decisions related to consumers.

12.2. Establish clearly professional and ethical obligations of the interdisciplinary team as a whole and of its individual members.

12.3. Foster trust among group members and adjust behavior in order to establish relationships with teams.

13. **Respect the inherent dignity and worth of every person.**

A health information management professional **shall**:

13.1. Treat each person in a respectful fashion, being mindful of individual differences and cultural and ethnic diversity.

13.2. Promote the value of self-determination for each individual.

13.3. Value all kinds and classes of people equitably, deal effectively with all races, cultures, disabilities, ages and genders.

13.4. Ensure all voices are listened to and respected.

Appendix B

AHIMA Standards of Ethical Coding
[2016 version]

Introduction
Coding is recognized as one of the core health information management (HIM) functions within healthcare. Due to the complex regulatory requirements affecting the health information coding process, coding professionals are frequently faced with ethical coding and coding-related challenges. The Standards of Ethical Coding are **important** established guidelines for any coding professional and are based on the American Health Information Management Association's (AHIMA's) Code of Ethics. Both reflect expectations of professional conduct for coding professionals involved in diagnostic and/or procedural coding, data abstraction and related coding and/or data activities.

A Code of Ethics sets forth professional values and ethical principles. In addition, a code of ethics offers ethical guidelines to which professionals aspire and by which their actions can be expected and be judged. HIM and coding professionals are expected to demonstrate professional values by their actions to patients, employers, members of the healthcare team, the public, and the many stakeholders they serve. A Code of Ethics is important in helping guide the decision-making process and can be referenced by individuals, agencies, organizations, and bodies (such as licensing and regulatory boards, insurance providers, courts of law, government agencies, and other professional groups). The Code of Ethics[1] is relevant to all AHIMA members, students, and CCHIIM credentialed HIM and coding professionals, regardless of their professional functions, the settings in which they work, or the populations they serve. All core health information coding activities are performed in compliance with state and federal regulations, and employer policies and procedures.[2]

The AHIMA Standards of Ethical Coding are intended to assist and guide coding professionals whether credentialed or not; including but not limited to coding staff, coding auditors, coding educators, clinical documentation improvement (CDI) professionals, and managers responsible for decision-making processes and operations as well as HIM/coding students. The standards outline expectations for making ethical decisions in the workplace and demonstrate coding professionals' commitment to integrity during the coding process, regardless of the purpose for which the codes are being reported. They are relevant to all coding professionals, regardless of the healthcare setting (e.g., inpatient, outpatient, post-acute care, alternative care, etc.) in which they work or function.

These Standards of Ethical Coding have been revised in order to reflect the current healthcare environment and modern coding practices. This document is in two parts; part one includes the standards and part two contains the standards, guidelines, and examples. Additionally, definitions have been added for some key words and terms used throughout the document. The following definitions relate to and are used within the context of these Standards for consistency and continuity.

Definitions

The purpose of this definition section is to achieve clarity without needless repetition. These definitions are intended to reflect everyday meaning. It is not within the scope of this document to establish new definitions for the words.

Coding Professional: Individuals whether credentialed or not; including but not limited to coding staff, coding auditors, coding educators, clinical documentation improvement (CDI) professionals, and managers responsible for decision-making processes and operations as well as HIM/coding students.

Coding-related activities: The activities include selection, research, and completion of code assignment, querying, other health record data abstraction, data analytics and reporting with codes, coding audits, remote coding, and coding educational activities and functions.

Data: All healthcare data elements including clinical, demographic, and financial.

Documentation: Clinical documentation found in the health record (medical record) in any format.

Encounter: The term *encounter* is used for all settings, including hospital admissions. All healthcare settings include the following: hospitals (inpatient and outpatient), physician offices, post-acute care (e.g., long- and short-term care), and other non-acute care (e.g., home health, hospice).

Established practices: Refers to processes and methods that are recognized and generally accepted such as AHIMA practice briefs and accrediting body standards.

Healthcare professionals: Those who are educated and skilled in any aspect of healthcare including direct and indirect patient care.

Provider: The term *provider* is used throughout the guidelines to mean physician or any qualified healthcare practitioner who is legally accountable for establishing the patient's diagnosis.

Query: A clarification or question to the provider through written, verbal, or electronic means regarding or related to clinical documentation in the health record.

Requirements: ICD coding conventions, official coding and reporting guidelines approved by the Cooperating Parties, the CPT rules established by the American Medical Association, applicable state and federal regulations, and any other official coding rules and guidelines (e.g., AHA Coding Clinic ICD-10-CM/PCS; AHA Coding Clinic for HCPCS; AMA CPT Assistant; AMA CPT Code book) established for use with mandated standard code sets.

Standards of Ethical Coding

1. Apply accurate, complete, and consistent coding practices that yield quality data.
2. Gather and report all data required for internal and external reporting, in accordance with applicable requirements and data set definitions.
3. Assign and report, in any format, only the codes and data that are clearly and consistently supported by health record documentation in accordance with applicable code set and abstraction conventions, and requirements.
4. Query and/or consult as needed with the provider for clarification and additional documentation prior to final code assignment in accordance with acceptable healthcare industry practices.
5. Refuse to participate in, support, or change reported data and/or narrative titles, billing data, clinical documentation practices, or any coding related activities intended to skew or misrepresent data and their meaning that do not comply with requirements.

6. Facilitate, advocate, and collaborate with healthcare professionals in the pursuit of accurate, complete and reliable coded data and in situations that support ethical coding practices.
7. Advance coding knowledge and practice through continuing education, including but not limited to meeting continuing education requirements.
8. Maintain the confidentiality of protected health information in accordance with the Code of Ethics.[3]
9. Refuse to participate in the development of coding and coding related technology that is not designed in accordance with requirements.
10. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal coding practices, and fosters trust in professional activities.
11. Refuse to participate in and/or conceal unethical coding, data abstraction, query practices, or any inappropriate activities related to coding and address any perceived unethical coding related practices.

How to Interpret the Standards of Ethical Coding

Standards and Guidelines

The following ethical principles are based on the core values of the American Health Information Management Association in the AHIMA Code of Ethics and apply to all coding professionals. Guidelines for each ethical standard are a non-inclusive list of behaviors and situations that can help to clarify the standard. They are not meant to be a comprehensive list of all situations that can occur.

1. Apply accurate, complete, and consistent coding practices that yield quality data.

Coding professionals **shall**:

1.1. Support selection of appropriate diagnostic, procedure and other types of health service-related codes (e.g. present on admission indicator, discharge status).

1.2. Develop and comply with comprehensive internal coding policies and procedures that are consistent with requirements.

Example: Develop internal policies and procedures for the coding function such as Facility Coding Guidelines that do not conflict with the Requirements and use as a framework for the work process, and education and training is provided on their use.

1.3. Foster an environment that supports honest and ethical coding practices resulting in accurate and reliable data.

Example: Regularly discussing the standards of ethical coding at staff meetings.

Coding professionals **shall not**:

1.4. Distort or participate in improper preparation, alteration, or suppression of coded information.

Example: Assigning diagnosis and/or procedure codes based on clinical documentation not recognized in requirements (as defined above in the definitions).

1.5. Misrepresent the patient's medical conditions and/or treatment provided, are not supported by the health record documentation.

Example: Permitting coding practices that misrepresent the provider documentation for a given date of service or encounter such as using codes from a previous encounter on the current encounter (except with bundled payment models or other methodologies).

2. Gather and report all data required for internal and external reporting, in accordance with applicable requirements and data set definitions.

Coding professionals **shall**:

2.1. Adhere to the ICD coding conventions, official coding and reporting guidelines approved by the Cooperating Parties, the CPT rules established by the American Medical Association, and any other official coding rules and guidelines established for use with mandated standard code sets.

Example: Using current and/or appropriate resource tools that assist with proper sequencing and reporting to stay in compliance with existing reporting requirements.

2.2. Select and sequence diagnosis and procedure codes, present on admission, discharge status in accordance with the definitions of required data sets in all healthcare settings.

3. Assign and report, in any format, only the codes and data that are clearly and consistently supported by health record documentation in accordance with applicable code set and abstraction conventions, and requirements.

Coding professionals **shall**:

3.1. Apply skills, knowledge of currently mandated coding and classification systems, and official resources to select the appropriate diagnostic and procedural codes (including applicable modifiers), and other codes representing healthcare services (including substances, equipment, supplies, or other items used in the provision of healthcare services).

Example: Researching and/or confirming the appropriate code for a clinical condition when not indexed in the classification.

4. Query and/or consult as needed with the provider for clarification and additional documentation prior to final code assignment in accordance with acceptable healthcare industry practices.

Coding professionals **shall**:

4.1. Participate in the development of query policies that support documentation improvement and meet regulatory, legal, and ethical standards for coding and reporting.

Example: Guidelines for Achieving a Compliant Query Practice (2016 Update)[4]

4.2. Use queries as a communication tool to improve the accuracy of code assignment and the quality of health record documentation.

Example: Designing and adhering to policies regarding the circumstances when providers should be queried to promote complete and accurate coding and complete documentation, regardless of whether reimbursement will be affected.

Example: In some situations, a query to the provider will be initiated after the initial completion of the coding due to late documentation, etc., this should be conducted in a timely manner.

4.3. Query with established practice brief guidance when there is conflicting, incomplete, illegible, imprecise, or ambiguous information, (e.g., concurrent, pre-bill, and retrospective).

Coding professionals **shall not**:

4.4. Query the provider when there is no clinical information in the health record that necessitates a query.

Example: Querying the provider regarding the presence of gram-negative pneumonia on every pneumonia case/encounter.

4.5 Utilize health record documentation from or in other encounters to generate a provider query.

5. Refuse to participate in, support or change reported data and/or narrative titles, billing data, clinical documentation practices, or any coding related activities intended to skew or misrepresent data and their meaning that do not comply with requirements.

Coding professionals **shall**:

5.1. Select and sequence the codes such that the organization receives the optimal reimbursement to which the facility is legally entitled, remembering that it is unethical and illegal to increase reimbursement by means that contradict requirements.

5.2. Bring to the attention of the organization management any identified inappropriate coding practices that do not comply with requirements.

Example: Communicating with management and/or utilize organization's compliance hot line to report inappropriate coding practices.

Example: Bringing coding errors to the attention of the administration and/or coding leadership as soon as possible.

Coding professionals **shall not**:

5.3. Misrepresent the patient's clinical picture through intentional incorrect coding or omission of diagnosis or procedure codes, or the addition of diagnosis or procedure codes unsupported by health record documentation, to inappropriately increase reimbursement, justify medical necessity, improve publicly reported data, or qualify for insurance policy coverage benefits.

Example: Changing a code at the patient's and/or business office's request so that the service will be covered by the patient's insurance when not supported by the clinical documentation and /or requirements.

5.4. Exclude diagnosis or procedure codes inappropriately in order to misrepresent the quality of care provided.

Example: Omitting and/or altering a code to misrepresent the quality outcomes or metrics that is not supported by clinical documentation and requirements.

Example: Reporting codes for quality outcomes that inaccurately improve a healthcare organization's quality profile or pay-for-performance results (e.g. POA, risk adjustment methodologies).

6. Facilitate, advocate, and collaborate with healthcare professionals in the pursuit of accurate, complete and reliable coded data and in situations that support ethical coding practices.

Coding professionals **shall**:

6.1. Assist with and educate providers, clinicians, and others by advocating proper documentation practices and further specificity for both diagnoses and procedures when needed to more precisely reflect the acuity, severity, and the occurrence of events.

Example: Providing regular education sessions on new requirements or requirement changes.

Example: Reviewing and sharing requirements and Standards for Ethical Coding with providers, clinicians, and others.

7. Advance coding knowledge and practice through continuing education, including but not limited to meeting continuing education requirements.

Coding professionals **shall**:

7.1. Maintain and continually enhance coding competencies in order to stay abreast of changes in codes, documentation, and coding requirements.

Example: Participating in educational programs, reading required publications, and maintaining professional certifications.

8. Maintain the confidentiality of protected health information in accordance with the Code of Ethics.[3]

Coding professionals **shall**:

8.1. Protect all confidential information obtained in the course of professional service, including personal, health, financial, genetic, and outcome information.

8.2. Access only that information necessary to perform their duties.

8.3. Maintain a remote coding work area that protects confidential health information.

Example: Health information should be protected from public and/or family viewing.

9. Refuse to participate in the development of coding and coding related technology that is not designed in accordance with requirements.

Coding professionals **shall**:

9.1. Utilize all tools, both electronic and hard copy that are available to ensure accurate code assignment.

9.2. Recognize that computer assisted coding (CAC) and/or electronic encoders are only tools and are not a substitute for the coding professional's judgment.

9.3. Utilize electronic code and code title selection technology in a manner that is compliant with coding requirements.

10. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal coding practices, and fosters trust in professional activities.

Coding professionals **shall**:

10.1. Act in an honest manner and bring honor to self, peers, and the profession.

10.2. Represent truthfully and accurately their credentials, professional education, and experience.

10.3. Demonstrate ethical principles and professional values in their actions to patients, employers, other members of the healthcare team, consumers, and other stakeholders served by the healthcare data they collect and report.

11. Refuse to participate in and/or conceal unethical coding, data abstraction, query practices, or any inappropriate activities related to coding and address any perceived unethical coding related practices.

Coding professionals **shall**:

11.1. Act in a professional and ethical manner at all times.

11.2. Take adequate measures to discourage, prevent, expose, and correct the unethical conduct of colleagues.

11.3. Be knowledgeable about established policies and procedures for handling concerns about colleagues' unethical behavior. These include policies and procedures created by AHIMA, licensing and regulatory bodies, employers, supervisors, agencies, and other professional organizations.

11.4. Seek resolution if there is a belief that a colleague(s) has acted unethically or if there is a belief of incompetence or impairment by discussing concerns with the colleague(s) when feasible and when such discussion is likely to be productive.

Example: Taking action through appropriate formal channels (i.e., internal escalation process or compliance hot line, and/or contact an accreditation or regulatory body, and/or the AHIMA Professional Ethics Committee).

11.5. Consult with a colleague(s) when feasible and assist the colleague(s) in taking remedial action when there is direct knowledge of a health information management colleague's incompetence or impairment.

Coding professionals **shall not**:

11.6. Participate in, condone, or be associated with dishonesty, fraud and abuse, or deception. A non-exhaustive list of examples includes:

- Participating in or allowing inappropriate patterns of retrospective documentation to avoid suspension and/or increase reimbursement
- Coding an inappropriate level of service
- Miscoding to avoid conflict with others

- Adding, deleting, and altering health record documentation
- Coding from documentation that is Copied and pasted from another clinician's documentation without identification of the original author and date
- Engaging in and supporting negligent coding practices
- Participating in or allowing inappropriate retrospective provider querying
- Reporting a code for the sake of convenience or to affect reporting for a desired effect on the results

Revised and approved by the House of Delegates December 12, 2016.

Appendix C

Ethical Standards for Clinical Documentation Improvement (CDI) Professionals (2016)

Introduction

The Ethical Standards for Clinical Documentation Improvement (CDI) Professionals are based on the American Health Information Management Association's (AHIMA's) Code of Ethics and the Standards for Ethical Coding. A Code of Ethics sets forth professional values and ethical principles and offers ethical guidelines to which professionals aspire and by which their actions can be judged. A Code of Ethics is important in helping to guide the decision-making process and can be referenced by individuals, agencies, organizations, and bodies (such as licensing and regulatory boards , insurance providers, courts of law, government agencies, and other professional groups).

The AHIMA Code of Ethics is relevant to all AHIMA member and credentialed HIM professionals and students, regardless of their professional functions, the settings in which they work, or the populations they serve. The AHIMA Ethical Standards for Clinical Documentation Improvement Professionals are intended to assist in decision making processes and actions, outline expectations for making ethical decisions in the workplace, and demonstrate the professionals' commitment to integrity. They are relevant to all clinical documentation improvement professionals and to those who manage the clinical documentation improvement (CDI) function regardless of the healthcare setting in which they work, or whether they are AHIMA members or nonmembers.

Ethical Standards

1. Facilitate accurate, complete, and consistent clinical documentation within the health record to demonstrate quality care, support coding and reporting of high-quality healthcare data used for both individual patients and aggregate reporting.
2. Support the reporting of healthcare data elements (e.g. diagnoses and procedure codes, hospital acquired conditions, patient safely indicator s) required for external reporting purposes (e.g. reimbursement, value-based purchasing initiatives and other administrative uses, population health, quality and patient safety measurement, and research) completely and accurately, in accordance with regulatory and documentation standards and requirements, as well as all applicable official coding conventions, rules, and guidelines.
3. Query the provider (physician or other qualified healthcare practitioner), whether verbal or written, for clarification and/or additional documentation when there is conflicting, incomplete, or ambiguous information in the health record regarding a significant reportable condition or procedure or other reportable data element dependent on health record documentation (e.g. present on admission indicators). Query the provider if the documentation describes or is associated with clinical indicators without a definitive relationship to an underlying diagnosis, or provides a diagnosis without underlying clinical validation.
4. Never participate in or support documentation practices intended to inappropriately increase payment, to qualify for insurance policy coverage, to avoid quality reporting issues, or to skew data by means that do not comply with federal and state statutes, regulations and official rules and guidelines.

5. Facilitate interdisciplinary education and collaboration in situations supporting proper documentation, reporting and data collection practices throughout the facility.
6. Advance professional knowledge and practice through continuing education.
7. Never participate in, conceal unethical reporting practices or support documentation practices intended to inappropriately increase payment, qualify for insurance policy coverage, or distort data by means that do not comply with federal and state statutes, regulations and official coding rules and guide lines.
8. Protect the confidentiality of the health record at all times and refuse to access protected health information not required for job-related activities.
9. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal reporting practices, and fosters trust in professional activities.
10. Collaborate in a team environment with the coding, quality, and other professionals in the organization.
10. Report unethical, noncompliant, or unlawful activity to the organization's compliance officer or similar official responsible for monitoring such activities.

How to Interpret the Ethical Standards

Example 1: Acute Hypoxic Respiratory Failure is documented for a patient with COPD exacerbation and the patient's clinical documentation lacks supportive clinical indicators of Acute Respiratory Failure.

Example 2: Sepsis diagnosed without supporting clinical indicators or not meeting all of the facility's established Systemic Inflammatory Response Syndrome (SIRS) criteria and one or more of the criteria could be explained as due to another cause.

Example 3: Provider documentation within the record. 52-year-old female presents with chest pain/pressure. Pain is not sharp or dull in nature and does not radiate. Slight relief while sitting up. No past history of heart issues. Family history of CAD. Vital signs normal. ECG, chest x-ray, and routine blood test to include troponin T ordered. ECG and chest x-ray normal. *RIO* GERD. Diagnosis: CAD. Suggested action: A query should be sent to the provider as the documentation does not state whether GERD was ruled out; nor do the clinical indicators support the diagnosis of CAD.

Clinical documentation improvement professionals **shall:**

3.1. Participate in the development of query policies that support documentation improvement, and meet regulatory, legal, and ethical standards for coding and reporting.

See AHIMA Practice Brief, Guidelines for Achieving a Compliant Query Practice

Example 4: Query the provider for clarification: A patient is admitted with pneumonia. 73-year-old male presents with chest pain, dyspnea and productive cough. Physician exam reveals bradycardia and crackles. Admission diagnosis: Pneumonia.
Day 1 progress note: Chest pain, dyspnea, cough, crackles, and fever were present on admission. Antibiotics were ordered.
Day 2 progress note: Temperature 98.1 degrees; continue antibiotics; sputum culture positive for *Streptococcus pneumoniae:*
diagnosis bacterial pneumonia. Day 3 progress note: Discharge patient. Discharge diagnosis: Pneumonia.

The provider should be queried for greater specificity of pneumonia and if there is a link between the sputum culture results and the pneumonia.

3.2. Query the provider for clarification when documentation in the health record impact an externally reportable data element and is illegible, incomplete, uncle is, inconsistent, or imprecise. The clinical documentation must reflect an accurate and concise representation of the patient's clinical condition(s).

3.3. Query the provider for clarification when a diagnosis is not supported by the clinical indicators in the health record. These types of instances may require referral per the facility's internal escalation policy.

3.4. Use queries as a communication tool to improve the quality of health record documentation, not to inappropriately increase reimbursement or misrepresent quality of care.

Example 5: Policies regarding the circumstances when providers should be queried are designed to promote complete documentation, regardless of whether reimbursement will be affected.

Clinical documentation improvement professionals **shall not:**

3.5. Query the provider when there is no clinical information in the health record prompting the need for a query.

Example 6: Query the provider regarding the presence of gram-negative pneumonia on every pneumonia case, regardless of whether there are any clinical indicators (including treatment) of gram-negative pneumonia documented in the record.

Example 7: Query the provider for sepsis when the clinical indicators are only suggestive of urinary tract infection, such as low-grade fever, increased WBCs, and there were no blood cultures obtained.

4. Never participate in or support documentation practices intended to inappropriately increase payment, to qualify for insurance policy coverage, to avoid quality reporting issues, or to skew data by means that do not comply with federal and state statutes, regulations and official rules and guidelines.

Clinical documentation improvement professionals **shall**:

4.1 Facilitate clear, accurate and complete documentation that supports reporting of diagnoses and procedures such that the organization receives proper reimbursement to which the facility is legally entitled, remembering that it is unethical and permanent part of the medical record.

- Copying and pasting another clinician's documentation without identification of the original author and date
- Supporting documentation practices that knowingly result in reporting incorrect present on admission indicator(s)
- Engaging in the utilization of leading provider queries

5. Protect the confidentiality of the health record at all times and refuse to access protected health information not required for job-related activities.

Clinical documentation improvement professionals **shall:**

5.1 Protect all confidential information obtained in the course of professional service, including personal, health, financial, genetic, and outcome information.

5.2 Access only that information necessary to perform their duties.

6. Demonstrate behavior that reflects integrity, shows a commitment to ethical and legal reporting practices, and fosters trust in professional activities.

Clinical documentation improvement professionals **shall:**

6.1 Act in an honest manner and bring honor to self, peers, and the profession.

6.2 Truthfully and accurately represent their credentials, professional education, and experience.

6.3 Demonstrate ethical principles and professional values in their actions to patients, employers, other members of the healthcare team, consumers, and other stakeholders served by the healthcare data they collect and report.

7. Collaborate in a team environment with the coding, quality, and other professionals in the organization.

Clinical documentation improvement professionals **shall:**

7.1. Work in a collaborative team effort with coding professionals. Participate in regularly scheduled team meetings with the coding professionals. Respectfully address differences in opinion regarding the coding of diagnoses and procedures.

8. Report unethical, noncompliant, or harmful activity to the organization's compliance officer or similar official responsible for monitoring such activities.

Clinical documentation improvement professionals **shall:**

8.1. Follow the organizations procedures for reporting unethical, noncompliant, or unlawful activities.

Resources

ACDIS Code of Ethics

AHIMA Code of Ethics

AHIMA Standards of Ethical Coding

AHIMA' s Data Quality Model (Updated)

AHTMA's position statement on Statement on Data Stewardship

AHTMA Practice Brief "Guidelines for Achieving a Compliant Query Practice:"

ICD-10-CM Official Guidelines

ICD-10-PCS Official Guideline

Appendix D

HIMT Advisory Board Membership 2021-2022

Name	Title	Company
Dr. Janet Baiardi	Interim Dean College of Health Professions & McAuley School of Nursing	University of Detroit Mercy
Dr. Shadi Bani Ta'an	Director and Associate Professor	University of Detroit Mercy
Peggy Chapo	HIT Coordinator/Instructor	Schoolcraft College
Rebecca Ciaverilla	Consultant	Medical Advantage Group
Dr. Pat DeVoy	HIMT Program Director / Department Chair	University of Detroit Mercy
Kristen Dunmore	Program Coordinator HIT	Macomb Community College
Shirley Grafenreed	RHIA, CHIT-IS Practice Manager	The Wellness Plan Gateway Medical Center
Kim Hom	Director, HIM	DMC Harper/Hutzel & DRH
Lundrell Johnson	Current Student	University of Detroit Mercy
Denese Kelsey	Manager, Clinical Documentation & Inpatient Coding Medical Records	St. Mary Mercy Livonia
Dr. Greg Laidlaw	Lecturer, Chair, Cybersecurity & Information Systems	University of Detroit Mercy
Wil Limp	Program Manager HIMT	University of Wisconsin
Cathy Longo	Director Health Care Value Performance Management	Blue Cross Blue Shield of Michigan
Fred Maher	HIT Consultant	United Physicians, Inc.
Elizabeth Mullen	Graduate	Systems Analyst I Blue Cross/Blue Shield of Michigan
Dr. Maia Platt	Chair, Associate Professor	University of Detroit Mercy
Ken Rates	Administrative Manager	University of Michigan Medicine Taubman Center Urology Ambulatory Care Unit
Amy Robbins	HIT Program Director	Baker College
Jody Scheller	Former Dept Chair Schoolcraft College	
Dr. Linda Sorensen	Department Chair Health Information Management and Allied Health	Davenport University
Paula Strussione	Academic Coordinator HIMT & McAuley School of Nursing"	University of Detroit Mercy
Dr. Nutrena Tate	Associate Dean, College of Health Professions & McAuley School of Nursing	University of Detroit Mercy
Susan Tylutki	Director, HIM Operations	Beaumont Health

Appendix E

Health Information Management and Technology
2018 Baccalaureate Degree
Curriculum Competencies

Supporting Body of Knowledge (Prerequisite or Evidence of Knowledge)
Pathophysiology and Pharmacology
Anatomy and Physiology
Medical Terminology
Computer Concepts and Applications
Math Statistics

Domain I. Data Structure, Content, and Information Governance	
Competency	**Bloom's Level**
I.1. Compare diverse stakeholder perspectives through the delivery of health care services.	5
I.2. Analyze strategies for the management of information.	4
I.3. Evaluate policies and strategies to achieve data integrity.	5
I.4. Recommend compliance of health record content across the health system.	5
I.5. Utilize classification systems, clinical vocabularies, and nomenclatures.	3
I.6. Evaluate data dictionaries and data sets for compliance with governance standards.	5

Domain II. Information Protection: Access, Use, Disclosure, Privacy, and Security	
Competency	**Bloom's Level**
II.1. Recommend privacy strategies for health information.	5
II.2. Recommend security strategies for health information.	5
II.3. Analyze compliance requirements throughout the health information life cycle.	4

Domain III. Informatics, Analytics, and Data Use	
Competency	**Bloom's Level**
III.1 Examine health informatics concepts for the management of health information.	4
III.2. Analyze technologies for health information management.	4
III.3. Interpret statistics for health services.	5
III.4 Examine health care findings with data visualizations.	4
III.5. Compare research methodologies pertaining to health care.	5
III.6. Manage data within a database management system.	5
III.7 Identify standards for exchange of health information.	3

Domain IV. Revenue Cycle Management	
Competency	**Bloom's Level**
IV.1. Evaluate assignment of diagnostic and procedural codes and groupings in accordance with official guidelines.	5
IV.2. Manage components of the revenue cycle.	5
IV.3. Evaluate compliance with regulatory requirements and reimbursement methodologies.	5

Domain V. Health Law & Compliance	
Competency	**Bloom's Level**
V.1. Comply with legal processes impacting health information.	5
V.2. Evaluate compliance with external forces.	5
V.3. Analyze components of risk management as related to a health organization.	4
V.4. Analyze the impact of policy on health care.	4

Domain VI. Organizational Management & Leadership	
Competency	**Bloom's Level**
VI.1. Facilitate fundamental leadership skills.	4
VI.2. Assess the impact of organizational change.	5
VI.3. Analyze human resource strategies for organizational best practices.	4
VI.4. Leverage data-driven performance improvement techniques for decision making.	5
VI.5. Verify financial management processes.	4
VI.6. Examine behaviors that embrace cultural diversity.	4
VI.7. Assess ethical standards of practice.	5
VI.8. Facilitate consumer engagement activities.	4
VI.9. Facilitate training needs for a healthcare organization.	4
VI.10. Compare project management methodologies to meet intended outcomes.	5

Appendix F

CHP Student Honor Policy
HIMT

Student name _____ **T0_____**

Admission Date _____ **BS, Minor, Post-Bac**

Academic Integrity

It is the responsibility of a student in the College of Health Professions to complete all coursework and fulfill all course objectives ethically and appropriately. Students in the College of Health Professions will maintain the highest standards of integrity and academic honesty, adhering not only to the Honor Code but also to any other professional requirements and provisions of their respective programs. Refer to the *University of Detroit Mercy Academic Conduct Policy* and your department handbook for further discussion and definition of academic misconduct and integrity.

Cheating by acts of commission or omission is not acceptable behavior for a student in the College of Health Professions. Misrepresentation in academic work includes but is not limited to:

- Submitting the same paper in more than one course without the explicit permission of the appropriate Professor.
- Any form of plagiarism, especially failure to acknowledge ideas or language taken from others, and submitting work prepared by others.
- Submitting scientific research that misrepresents the way in which the work was completed.
- Collaborating with others on projects expressly intended to be completed individually.
- Copying, transmitting or sharing examination materials without authorization of the instructor.
- Acquiring any materials that may provide an unfair advantage over fellow students.

Professional Integrity

Behavior and performance are essential aspects of the educational process for students in the College of Health Professions. It is the student's responsibility to complete clinical and practicum assignments and meet coursework objectives ethically and appropriately. Students must place the welfare of patients and others as their highest priority in the healthcare educational setting while maintaining the highest level of integrity and professional demeanor.
Unprofessional behavior in practicum settings includes but is not limited to:

- Using practicum site facilities or resources in an unauthorized way, including the theft of materials obtained from such sites.
- Violating the confidentiality of patients and their families.
- Jeopardizing the health and safety of the practicum site staff, students or patients by acts of omission or commission.
- Participating in behaviors that may obstruct, disrupt or interfere with student learning or clinical care.
- Failure to arrive for practicum placements on time or arrival at such sites unprepared either mentally or physically.
- Falsifying or fabricating results, research, or findings for personal gain.
- Misrepresentations of oneself as anyone other than a student.
- Engaging in any form of harassment.

Personal Integrity

Students in the College of Health Professions are responsible for behaving ethically and appropriately with tolerance and compassion and to be personally accountable for their behaviors on campus, at practicum sites, on-line, and in any other related setting.

Unacceptable personal behavior includes but is not limited to the following:

- Engaging in any form of harassment;
- Discriminating against others for reasons of race, ethnicity, religion, socio-economic status, gender or sexual orientation;
- Using illicit drugs or alcohol during school or clinical hours, or in a manner that would impair performance at the university or clinical site;
- Failure to report violations of the honor code;
- Knowingly bringing false complaints against fellow students to the Honor Council;
- Intentionally causing damage to university or clinical site property or resources;
- Tampering with documents, falsifying records or misrepresentation of critical data to university or practicum site personnel.

Having read the above statement of the College of Health Professions Honor Code, I affirm that I have understood and agree with its provisions and will conduct myself in a manner that upholds the highest values of this institution and my intended profession. I pledge to be responsible for fostering a climate of academic trustworthiness and integrity. I will behave in an ethical, honest and accountable manner and will report any violations of the Honor Code that come to my attention.

_____ _____

Student (Print Name) Date

_____

Student Signature