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Upcoming Events

Invest in your Future:

[Join or Renew your NYHIMA Membership](#)

[The 2015 LTC Coding Guidelines are Available](#)

Call for Perspectives Articles:

NYHIMA is currently accepting articles for the April 2016 issue of Perspectives. Please send any articles for consideration to: [Darlene McKendrick](#) by 3/15/16.

From the President



Hello fellow NYHIMA Members:

I can't believe it's February already - where is the time going! I'm sure we are all anxiously awaiting spring (22 more days!). There is so much going on in the HIM world and I hope you can all participate in one way or another.

We had the NYHIMA Town Hall webinar on February 19, 2016.

Participation was good and we look forward to continuing these types of calls twice a year. We want to make sure we keep our membership updated and want to hear back on how we are doing. If you were unable to participate, [the recording can be found by clicking here](#). We also discussed increasing communication on our website using the social media platform Circles. [Information for using Circles can be found here](#).

One item discussed on the Town Hall was reminding everyone of our Annual meeting June 5-8th at the Hilton Long Island hotel in Huntington, NY. We have awesome social activities planned including a beach party Sunday night at the Hilton and Monday night will be a boat cruise on the [Lauren Kristy](#)! It should be a lot of fun and we really hope you will try to attend. Besides the fun social events, we do have many great speakers presenting information on important issues and concerns for current day HIM and related areas.

Last but certainly not least, AHIMA is launching the My HealthI.D. This initiative promotes the development of a national health identifier for all patients. With the complexity of EHRs, HIE, and etc., having a national identifier can be critical for patient matching and proper continuation of treatments. In 1990 HIPAA was going to address such issues but in 1999 it was decided creating a national patient identifier would be too much like big government. AHIMA has developed toolkits, information and many items for all of us to communicate this to our communities and everyone. AHIMA is getting a petition together and needs at least 100,000 signatures to get this possibly addressed in legislature again. The petition will be available from 3/20/16 - 4/19/16. We need all of us to educate all we know (it affects all in our lives being a patient or receiving health care) on this really important issue and sign the petition available at <https://petitions.whitehouse.gov> during the time frame mentioned. For any additional information on this topic please visit www.ahima.org/myhealthid. I hope that our NY membership will be one of its biggest supporters and we have a great presence of signatures on the petition. I will be attending Hill day with AHIMA on April 4th and 5th. Stay tuned for more information on this and many other topics.

Stay warm and PLEASE PLEASE look at the information on AHIMA's website regarding My Health I.D. and sign the petition.

Take care,

Michele Bohley, NYHIMA President

Submitted by: Michele Bohley, RHIA, CCS

ICD-10-CM/PCS

[Reporting the Use of an Adhesion Barrier](#)

The Third Quarter issue of the *American Hospital Association: Coding Clinic for ICD-10-CM and ICD-10-PCS* discussed the coding of an adhesion barrier, specifically Seprafilm® for a procedure correcting a right obturator nerve entrapment with sciatic neuropathy. The writer wanted to know what the correct approach value for placement of Seprafilm® on the nerve and muscle surfaces is.

When placed between traumatized tissue surfaces, adhesion barriers act as a physical barrier preventing the formation of adhesions between opposing tissues while the natural process of tissue wound healing takes place. The barrier turns into a gel that is eventually reabsorbed into the body.

The AHA's advice suggested that when an adhesiolytic agent is placed during surgery on dissected nerve and muscle surfaces to prevent adhesion formation, is not coded separately. The placement of the barrier is not reported because it is a surgical supply, and integral to the definitive procedure. For tracking purposes, if a facility wants to track the use of adhesion barrier during surgical procedures, the codes are located in table 3E0 and are applied to a *limited selection of anatomical regions*.

[Click here to read the full article.](#)

Submitted by: Sandra Macica, MS, RHIA, CCS, Past President Director

[Zika Virus: Is There a Code for That?](#)

Most of you have likely been following the media with stories about the Zika virus. According to the Centers for Disease Control and Prevention (CDC), the Zika virus is spread to people primarily through mosquito bites. The most common symptoms of Zika virus disease are fever, rash, joint pain, and conjunctivitis (red eyes). The illness is usually mild with symptoms lasting from several days to a week. Severe disease requiring hospitalization is uncommon. There is no vaccine to prevent infection or medicine to treat Zika. About 1 in 5 people infected with the virus become ill. An outbreak in Brazil led to reports of Guillain-Barré syndrome and pregnant women giving birth to babies with birth defects such as microcephaly and poor pregnancy outcomes. No locally transmitted Zika cases have been reported in the continental United States, but cases have been reported in returning travelers.

In more recent U.S. news, Zika is now also believed to be spread through blood transfusion and sexual contact. A case of the virus in Dallas, Texas it was spread from the Zika-infected individual is believed to have returned to the US already infected by the disease. The second infected person was a sexual partner of the traveler, but did not travel themselves.

[Click here to read the full article.](#)

Submitted by: Sandra Macica, MS, RHIA, CCS, Past President Director

NYHIMA News Notes

[NYHIMA Announces Election Results!](#)

The results of NYHIMA's election for the 2016-17 membership year are here!

NYHIMA congratulates its newly elected leaders and thanks all of the candidates who participated in the process. The NYHIMA Board of Directors would also like to thank the 2015-16 Nominations Committee chaired by Past President, Sandra Macica for putting together a great ballot comprised of many qualified candidates.

Please join NYHIMA in congratulating its newly elected leaders and committee members below.

- **President-Elect:**
Kim Charland, RHIT, CCS, BA
- **Communications Director:**
Shea M. Coleman, RHIT
- **Legislative Director:**

Mary Kay Taylor, RHIA, MBA

- **Delegate to AHIMA:**
Diane Fabian, RHIA, MBA, MS
- **Awards Committee:**
Donna Bishop, RHIT
Lynda Carlson, RHIT, Ph.D., MPH, MS
Susan Goldson, RHIT, CCS, CCS-P, MS
Virginia Neuman, RHIT
Deborah Symonds, RHIT

Submitted by: NYHIMA Central Office

[Take Advantage of NYHIMA's 2016 Annual Conference Sponsor & Vendor Opportunities!](#)

Take advantage of the opportunity to promote your goods and services to a niche and engaged audience at NYHIMA's 2016 Annual Conference! [Click here to view the many sponsor and exhibit opportunities NYHIMA has to offer.](#)

Sponsorship opportunities are also available for purchase online and can be accessed [by clicking here.](#)

Submitted by: NYHIMA Central Office

[NYHIMA Award and Scholarship Opportunities are Available](#)

NYHIMA is currently accepting applications for the following award categories:

- **[Joel Schwartz Recognition:](#)** up to three awards of \$100 each annually to individuals demonstrating outstanding dedication in the field of medical transcription.
- **[Distinguished Member:](#)** honors an individual who has made significant contributions at the local, state, and national level in support of the HIM profession.
- **[New Professional:](#)** honors an individual who has been in the HIM profession for five years or less and has made significant contributions during this time.
- **[Author's Award:](#)** honors an individual who has published an HIM article, within the past two calendar years, that instructs or guides members with new theoretical concepts or further develops concepts previously presented in another publication.
- **[Mentor Award:](#)** honors an individual with a record of fostering enthusiasm for the HIM profession, encouraging people to enter the field, and providing ongoing career guidance to new professionals.

NYHIMA is also pleased to offer the following scholarships in support of HIM education for the 2015-16 Membership Year:

- The **[Mary M. Zannis Scholarship](#)** - one award of \$1,000 annually to a student enrolled part-time or full-time in a New York State CAHIIM Accredited Associate or Baccalaureate Program.
- The **[NYHIMA Book Fund Scholarship](#)** - two awards of \$300 annually to part-time or full-time students enrolled in a New York State CAHIIM Accredited Associate or Baccalaureate Program.
- The NYHIMA Returning Student Scholarship - one award of \$1,000 annually to a student returning to school to advance or transition their career to a new path

within the Health Information Management field and enrolled part-time or full-time in a New York State CAHIIM Accredited Associate or Baccalaureate Program.

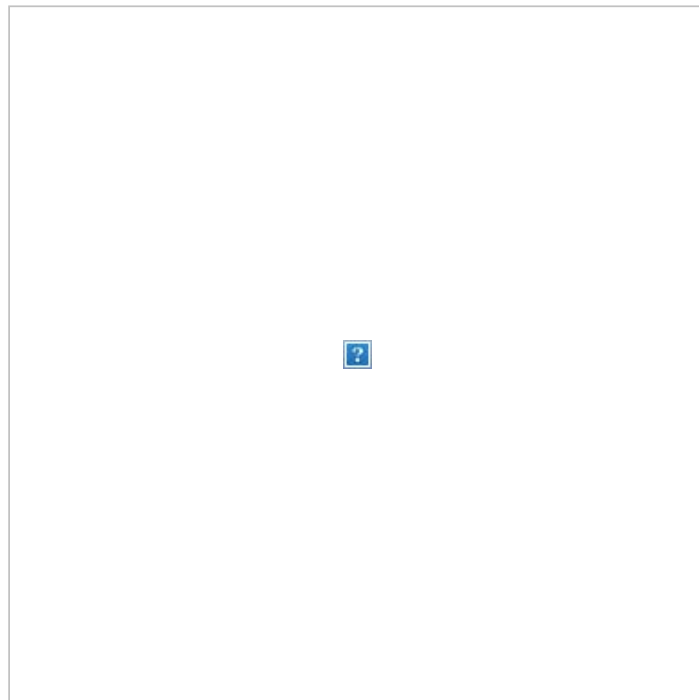
Applications for 2015-16 awards are due in the Central Office by the close of business on Tuesday, March 31, 2016.

Submitted by: NYHIMA Central Office

[Upcoming NYHIMA Programs & Events](#)

Don't miss out on NYHIMA's upcoming educational offerings. Click on the links below to find out more and to register.

- **March 16, 2016**
[DSRIP: Medicaid Reform in New York State Webinar](#)



Submitted by: NYHIMA Central Office

[Don't Miss Out on 2016 Annual Conference Registration Discounts: Renew your NYHIMA Membership Today!](#)

With the 2016 Annual Conference just around the corner, be sure to renew your NYHIMA membership to enjoy the significantly discounted membership registration rate!

NYHIMA membership will more than pay for itself in Annual Conference savings and provides attendees access to cutting edge speakers presenting on relevant topics as well as networking opportunities to help advance your career.

With a full program covering topics such as data analytics, electronic health records, value based payments, ICD-10, information governance and regulatory issues, this is an event that you won't want to miss!

[The 2016 Annual Conference program can be viewed here](#) and registration will be open online by 3/4/16. In the meantime be sure to [reserve your overnight room at the Long Island Hilton by clicking here.](#)

[Click here for more membership information and to renew or join NYHIMA today!](#)

Submitted by: NYHIMA Central Office

Local Association News

AdHIMA

AdHIMA has been very busy over the past few months. We've had an educational session every month from September through February and are readying ourselves for the April session. We will be using March to plan for our annual meeting which will be held on May 3rd at The Vista at the Italian American Community Center in Albany. We are planning a full day of speakers, business meeting as well as swearing in our new Board members. We will also be presenting the AdHIMA year in review which will contain an update on what we have accomplished toward our goals as well as what individual members have achieved (i.e. new job, marriage, birth, new certification, etc).

We had a late start to our year due to the delay in our ballot but, once we had our full board we were able to set out goals and plan our year

The Board felt strongly that we should work to involve members who expressed interest in volunteering. We have been successful in this goal and volunteers have been instrumental in the success of our educational programs, speaker surveys, and are helping to plan our annual conference.

An important goal was to continue our excellent educational programs and get sessions planned and locations confirmed as far in advance as possible. Jean Russell, 2nd year education direction and Leighann Libertucci, 1st year education director have done an excellent job meeting this goal. One technique that helped was increased communication prior to the session to make sure that all tasks required for a successful event were delegated.

We also established a goal to reduce the number of board members. The position with responsibilities that we determined could be delegated to another position or be designated to an appointee was our Public Relations Director position. This required an amendment to the AdHIMA Bylaws. While amending the bylaws for this purpose we also revised the bylaws to meet the requirements of NYHIMA and AdHIMA. Sandy Macica volunteered to make these revisions and presented them at our 2/18/16 business meeting. The changes were unanimously adopted.

A goal was set to become more electronic in some of our functions. We transitioned from paper speaker evaluations to Survey Monkey. We also have begun sending out CE credits electronically. We are working with NYHIMA to establish a centralized location to save our association's documents.

We have convened our Nominating Committee to get a head start filling our ballot for the next years open board positions. This is always a challenge but hopefully we will have a great selection of HIM professionals for our members to vote for!

Submitted by: Eva Gregorek, RHIT, CCS

CNYHIMA

CNYHIMA is planning some exciting educational programs this spring, in addition to our great Annual Meeting which is at a new venue. The following are the dates of our educational programs.

March 18th: Onondaga Community College ICD10 This program is for members that are still in need of ICD10 CEU's to meet their AHIMA Certification Requirements or for wanting more education.

March 22nd SUNY Broome

April: TBD- We are looking to do program on CDI

May 6th Annual Meeting. This year to be held at The Genesee Grande Hotel in Syracuse. We are really looking forward to this year's conference at the new venue.

CNYHIMA will have two open positions available on the Executive Board for 2016-2017. The positions available are President Elect and Communication Director.

Submitted by: Virginia Neumann, RHIT

HIMAWNY

Upcoming Education Sessions:

- March 8, 2016 from 2:00PM to 4:00PM at DeGraff Community Center: 139 Division St, North Tonawanda, NY 14120
- April 14, 2016 from 12:00PM to 4:00PM at DeGraff Community Center: 139 Division St, North Tonawanda, NY 14120
- June 16, 2016 full day Education Session with installation of 2016-2017 officers included.

Submitted by Karen Lippold, RHIT
President, HIMAWNY

In the Spotlight

[Ellen Shakespeare Karl, MBA, RHIA, CHDA, FAHIMA](#)

If you don't know her already, let us introduce you to Ellen Shakespeare Karl. Ellen was recently elected to the American Health Information Management Association (AHIMA) 2016-2018 Board of Directors. She is the Academic Director for the **Health Information Management Program at the City University of New York's (CUNY) School of Professional Studies**. Ellen has over 35 years of experience working as a Health Information Management professional. The majority of her experience lies in the acute care sector having worked as an HIM director and consultant at hospitals in Florida, New York and New Jersey.

Shakespeare Karl serves as a panel reviewer for Commission on Accreditation of Health Informatics and Information Management (CAHIIM), as past president of the New Jersey Health Information Management Association (NJHIMA), and a member of AHIMA Health Information Exchange Practice Council. She received her MBA with concentration in Health Administration from the University of Miami, and a BS in Health Information Management from the University of Central Florida.

Congratulations and best wishes to Ellen as she begins her 3 year term on the AHIMA board!

Submitted by: Sandra Macica, MS, RHIA, CCS, Past President Director

AHIMA News Notes

[AHIMA Introduces New IGHealthRate Maturity Assessment](#)

AHIMA has launched a new subscription-based information governance (IG) maturity assessment, IG HealthRate®, which measures an organization's IG maturity. IG creates integration between information technology governance, data governance, and records and information management processes to allow organizations to harness all of its data and information for decision support. IG "maturity" refers to an organization's current IG capabilities as a basis for measuring and planning for improvement. IGHealthRate offers analysis, education, comparison against similar organizations, as well as coaching, based on some 75 markers of maturity taken from AHIMA's Information Governance Adoption Model (IGAM).

The new tool is a more in-depth version of the free [PulseRate®](#) assessment.

Submitted by: NYHIMA Central Office

[Onsite & Virtual Student Open House](#)

Are you completing your degree shortly and want to know what your future holds?

Then clear your calendar now for the AHIMA & AHIMA Foundation on-site and virtual Student Open House. Topics you will learn more about include: apprenticeship, academic affairs, resources, membership, volunteering, certification, scholarship and more. A students need only

participate in the annual student open house once during their degree program. Student will have the option of participating in person or virtually, and may attend one of two sessions:

- Session 1: 9:00 AM - 12:00 PM (CT)
- Session 2: 1:00 PM - 4:00 PM (CT)
- [Register](#)

Submitted by: NYHIMA Central Office

Professional Development

[Keeping up With New Medications](#)

In 2015, the FDA approved over 100 new drugs for a vast array of medical conditions. With heart disease being the leading cause of death in the United States and with more than 600,000 Americans dying of heart disease each year¹, the FDA expedited approval for some of the cardiology and vascular disease medications and medical devices. A list of newly approved cardiology and vascular disease drugs appears at the end of this article. Here are four of the drugs approved for cardiology and vascular diseases: Corlanor (ivabradine), Entresto (sacubitril and valsartan), Prestalia (perindopril arginine and amlodipine besylate), and Savaysa (edoxaban):

- Corlanor (ivabradine) is approved for use in certain people who have long-lasting (chronic) heart failure caused by the lower-left part of their heart not contracting well. The drug is indicated for patients who have symptoms of heart failure that are stable, a normal heartbeat with a resting heart rate of at least 70 beats per minute and are also taking beta blockers at the highest dose they can tolerate. It is a film-coated tablet usually taken twice a day.
- Entresto (sacubitril and valsartan) is a combination of sacubitril, a neprilysin inhibitor, and valsartan, an angiotensin II receptor blocker. Entresto has been shown to reduce the rate of cardiovascular death and hospitalization related to heart failure. It is a film-coated tablet provided in different dosages.
- Prestalia (perindopril arginine and amlodipine besylate) is a combination of perindopril, an angiotensin converting enzyme (ACE) inhibitor, and amlodipine, a dihydropyridine calcium channel blocker. Prestalia is specifically indicated for the treatment of hypertension, to lower blood pressure in patients not adequately controlled with monotherapy and as initial therapy in patients likely to need multiple drugs to achieve their blood pressure goals. Prestalia is supplied as a tablet for oral administration.
- Savaysa (edoxaban) is prescribed to reduce the risk of stroke and dangerous blood clots (systemic embolism) in patients with atrial fibrillation that is not caused by a heart valve problem. Savaysa also has been approved to treat deep vein thrombosis (DVT) and pulmonary embolism (PE) in patients who have already been treated with an anti-clotting drug administered by injection or infusion (parenterally), for five to ten days.

[Click here to read the full article.](#)

Submitted by Jane Conway, RHIA, CPhT,
Product Specialist, Revenue Cycle, Coding and Compliance Clinical Solutions, Elsevier, Inc

[Updates on Self-Disclosure Settlements: Check the OIGs Exclusion List](#)

A recent review of the Office of Inspector General (OIG) website provided a list of provider self-disclosure settlements. In several cases the OIG alleged that facilities employed an individual that it knew or should have known was excluded from participation in Federal health care programs. Curious to see what this was about, it turns out that before hiring an employee (or rehiring a former employee) or contracting with any sort of vendor or supplier (services or goods) you are supposed to check the Office of Inspector General's List of Excluded Individuals and Entities. When the OIG excludes an individual or entity from federal health care programs, that individual is essentially banned from working for any health care provider who receives federal health care program funds (Medicaid, Medicare, TriStar or any other type of federal health care program) in any role related to program beneficiaries or program goods or services.

Posted on 01-11-2016, after it self-disclosed conduct to OIG, an upstate New York hospital,

agreed to pay \$23,483.39 for allegedly violating the Civil Monetary Penalties Law. OIG alleged that CHMC employed an individual that it knew or should have known was excluded from participation in Federal health care programs.

[Click here to read the full article.](#)

Submitted by: Sandra Macica, MS, RHIA, CCS, Past President Director

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