

## HOUSE OF DELEGATE ISSUES

While the AHIMA House of Delegates is active year round, there are two important issues to be discussed and voted on face-to-face in Seattle, Washington this October. Below are summaries of these two issues. Please take a few minutes to read each one carefully. Please post any questions or comments on the PHIMA Geographic CoP.

Also, a delegate is scheduled to visit each regional association during their first fall meeting in September. You will have the opportunity at that time to ask questions and/or provide input.

### **New Credential**

Council on Certification (COC) was charged in 2007 with determining the need for a new credential in the area of Health Data Analytics. A job analysis study suggested the emergence of a “data analytics” domain that would increase in both importance and prevalence through the next 5 to 7 years. The COC was to develop & deploy a certification that validates the competence in data analytics.

A separate survey was conducted by AHIMA’s Business Development staff, targeting individuals in health care management from a needs perspective. Results demonstrated 1) the growing importance of healthcare data analytics both by role and setting, 2) supported the need for persons with the corresponding skills and knowledge, 3) demonstrated value for the validation of these skills & knowledge, and 4) supported a new certification in healthcare data analytics.

Focus groups were conducted in early 2008 and a job analysis task force was convened to define a target audience statement and identify the domains, tasks and knowledge important to the work performed by a Certified Health Data Analyst (working title) who would provide expertise to acquire, manage, analyze, interpret, and transform data into accurate, consistent, and timely information. Job competencies were identified as: data management, data analysis, data reporting,

For certification, candidates must meet one of the following eligibility requirements:

- 1) Baccalaureate degree or higher and a minimum of five (5) years of health care data experience; or
- 2) Healthcare Information Administration credential (RHIA) and a minimum of 1 (1) year of healthcare data experience.

Maintenance of the certification would be the same as for any credential set at the baccalaureate degree level, that is:

- 30 CEUs per baccalaureate credential per 2 year cycle with 80% CEUs earned within the HIM Domain; and

- For each additional baccalaureate-based credential, 10 CEUs must be completed during the 2 year cycle with 80% CEUs earned within the HIM Domain.

### **Third Party Accreditation**

The Council On Certification (COC) creates and maintains credentialing and re-credentialing processes in order to assure that individuals certified by AHIMA are indeed competent to deliver health information management. The COC is seeking 3<sup>rd</sup>-party accreditation by the National Commission for Certifying Agencies (NCCA) and the American National Standards Institute (ANSI) in order to demonstrate autonomy in decision-making and protection from undue influence with respect to essential certification elements. These elements include both the initial standards for certification and the accompanying standards for certification maintenance for all AHIMA credentials.

Third-party accreditation is a voluntary process by which an independent and nongovernmental agency formally grants a time-limited recognition to an institution, organization, business, or other entity after verifying that it has met predetermined and standardized criteria, usually in the areas of competency, authority, or credibility. Two common examples include CHEA recognition of commissions on accreditation and JCAHO recognition of hospitals. Third-party accreditation is important for validation of programs, processes, policies, and procedures, and to optimize the value of AHIMA credentials within and beyond our industry, both domestically and internationally.

Third-party accreditation will:

- Demonstrate a competitive advantage by being “first-to-market” in undergoing voluntary evaluation
- Encourage domestic and international marketplace confidence in our certification programs
- Positively influence practitioner and employer satisfaction
- Sustain continuous improvement for our certification programs
- Promote consistency and equivalency of multiple exam forms
- Demonstrate that AHIMA certifications have met stringent 3<sup>rd</sup>-party standards
- Optimize accountability and transparency of processes thereby reducing liability for individuals and organizations

Risks without 3<sup>rd</sup>-party accreditation:

- Compromised AHIMA credential especially in an industry accustomed to 3<sup>rd</sup>-party accreditation of certifications, academic programs, and facilities
- Differentiation in the marketplace as 3<sup>rd</sup>-party accreditation is achieved by other certification organizations.

Please Note: Should this item pass at the House of Delegates, corresponding bylaw amendments will be required.