

Health Information Technology Advisory Committee Meeting

Friday, November 6, 2020 at 1:00 p.m., webex

Present: Mari Petrik, Debbie Morley, Beth Romanzow, Christina Melnytschuk, Erica Trejo, Mary Paraskis, Jennifer Martin, Linda Howard-Lawson, Karen Their, Maureen Burmeister, Lissette Alvarado, Jan Drews, Diane Cronin, Julie Barroni, Cathy Smyth, Barbara Budz, Eileen, Evera Ivory, Chris Wheat, Karen Block, and Paul Alleruzzo

Topic	Discussion
Call to order	The meeting was called to order at 1:06 p.m.
Approval of minutes from March 1, 2019	Last year's meeting minutes were approved.
Program transitions	Donna Schnepf retired in May 2019. Mari Petrik is now the Health Information Technologies Programs Coordinator. New program faculty member, Chris Wheat, joined our program in August 2019.
<p>Health Information Technology</p> <ul style="list-style-type: none"> a. Exam Results-2019 b. Graduate survey c. CAHIIM Accreditation Cycle-2021-2022 d. APAR Report-2019 e. 2018 Standards & Curriculum Changes-effective by 9/1/2021 <ul style="list-style-type: none"> i. Pre-requisite Changes ii. MTH 109 f. Clinical Practicum Placement/COVID g. MVCC Huffman Award Recipients h. HIM Reimagined/Specialization Update-Decision on Tracks <ul style="list-style-type: none"> i. Revenue Management ii. Data Management 	<p>The Health Information Technology (HIT) program is Moraine Valley's associate's degree program that is a 72-credit hour program. Our Coding Specialist program is a 41-credit hour certificate program that is for the most part the first year of Health Information Technology, and our Medical Billing program is a 15-credit hour certificate program. These programs were created to be stackable so that students could step into the medical billing program or the coding program and decide if they wanted to go on to the next certificate or degree.</p> <p>Our HIT associate's degree program graduated 10 students in May 2020. The number of graduates vary from year to year. On average, about 15.6 graduates a year.</p> <p>Exam results – 2019: nineteen students sat for the 2019 exam, 18 students passed the exam and one failed. The student who failed the exam had twice taken the exam and then passed the exam on the retest. Moraine and all other schools that are accredited are assessed under domains which are designated as D1, D2, D3, D4, D5, and D6. Our Domain one score was 103%, Domain two was 99%, Domain three 104%, Domain four 104%, Domain five 103%, and Domain six was 96%, which was better than average overall.</p> <p>Graduate Survey</p> <p>One of the requirements of our accrediting agency is that we conduct a Health Information Technology graduate survey regarding our programs after students graduate. Our program sent the survey to all graduates, and 15 of 16 completed the</p>

survey. The first question on a scale of one to five, with five being the highest score, asked how satisfied graduates were with the Moraine Valley HIT program? Eight students said our program was excellent, six students said that we were very good, and one student said we were good. Our program had no scores of fair, no scores of poor. The next question on the survey asked graduates if they were currently employed. Sixteen people responded to that question, 75% of them were employed at the time of the survey, 25% were not employed at that time. The survey is usually sent about eight months after graduation. Subsequent surveys will ask graduates whether or not they are currently seeking employment. The next question on the survey asked if graduates were pursuing further education. We had four graduates, 25% of them say that they were, and 12 graduates said they were not seeking to further their education, which was higher than the usual one graduate.

HIT accreditation – Commission on Accreditation for Health Informatics and Information Management (CAHIIM) notified us that a review of our program was scheduled. While our program is reviewed annually, we were scheduled to have an onsite survey in 2019, the same year that Donna Schnepf retired. Since there was a change in our program management along with the addition of a new faculty member, CAHIIM allowed us the opportunity to postpone our onsite visit by a year, and still keep us in good standing. The postponement allowed us to better prepare for the accreditation cycle that is now scheduled for 2021-2022. It is unknown at this time, because of COVID, whether or not the CAHIIM visit will be in person or virtual. CAHIIM used to perform site visits every 10 years but they decided that 10 years was too long a period of time, so beginning Spring 2020, the accreditation cycle is every seven years.

Annual Program Assessment Report (APAR) – CAHIIM granted us a consistent due date on the annual APAR report which is now due every spring; the report used to be due at various times of the year, so we are pleased with that decision. The past two years, APAR was submitted in the spring, so when our advisory meeting was held last year, even though we had submitted the 2019 report, we had not yet received acceptance of it until May 2019. Our 2020 report was submitted in Spring 2020, and our program received acceptance July 2020; that meant our program continued to be accredited in HIT for annual activities. Each year, CAHIIM asks us to set goals for our program, and these goals have been set in the past with input from you all who attend our

advisory meetings. Some of those goals are as follows: the first goal is to make sure that we teach 100% of the content, which CAHIIM calls domains and competencies at the minimum level required in order to meet the entry-level competencies. Now, when we assess this goal in spring, all of our entry-level competencies were incorporated into the curriculum. Our next goal is faculty development. CAHIIM wants us to have a goal to develop our faculty. Our goal was that 100% of our faculty would participate in at least one continuing education activity annually that is pertinent to either the delivery or the content of the material that they teach. Our results show that all program faculty participated in at least one continuing education activity for 2019, and we will be looking at that same goal again for 2020. Our next goal has to do with students and graduates and its pertinence to our national exam. Our program set an exam pass rate goal of 85% of Moraine Valley graduates who sit for the exam on their first attempt. The 2019 results indicate that 18 of 19 Moraine Valley graduates or 95% successfully passed the RHIT exam on their first attempt. The graduate who did not pass the exam on the first attempt took five years to complete our program. Our hope is that nobody should take longer than about four years to complete the program. Since the curriculum is modified significantly about every five years, and if a student is in the program for that long, not only could they forget the earlier learned material, the student could also face challenges since there are material changes to courses over time. Our next goal was the advisory goal. One of the goals that we had set is that our advisory committee meet annually, review the status of our program, review our curriculum, review our exam scores and review our graduate and employer surveys in our professional practice activities, and then guide us in the current practice of HIM. Our program goal is that we incorporate the recommended curriculum changes that you all make at these advisory meetings. One example of this is the 2018 math statistics requirement change by CAHIIM. You all had asked that we look at the difference between Math 139, which is a course that we do not require, and Math 109, which is a course that we do require. After meeting with the Math Department, comparing the syllabi in each course, and a review of the course textbooks, it was determined that Math 109 was already teaching both math and HIM statistics, and math statistics was also reviewed in MRT 211. During a meeting that our program hosted in fall 2019, CAHIIM surveyors evaluated our Math 109 syllabus; they determined that our Math 109 course met the new math statistics requirement of HIM statistics, and that our Math 109 course would be acceptable to the reviewers, and therefore did not need to boost our math requirement to Math 139. Mari asked if it was okay if Math 109 was an acceptable curriculum

	<p>requirement with those attending the advisory meeting, and the consensus was that it was okay.</p> <p>2018 Standards and Curriculum – an additional reason that our program asked for a review extension was that there was a change of standards that took place so that our program would have been surveyed underneath the last year of standards, even though the onsite review would have taken place in the 2019-2020 year. The year after that they were going to start surveying under what they call the 2018 standards; 2018 because that is when they put them out to the group, not because that is when they were due to be used. It made more sense to prepare for new standards rather than perform work to get ready for old standards. Changes-effective by 9/1/2021</p> <p>Pre-requisite Changes</p> <p>MTH 109</p> <p>The new standards, known as 2018 standards, are actually effective for September 2021. New standards mandate three criteria: number one, biology course completed before any coding courses; this was a challenge, since in our suggested schedule, we had those courses side-by-side in the same semester. Number two, pharmacology be taught as a co-requisite to the coding courses. Co-requisite is side-by-side teaching to make sure that if the students were learning about a body system, like the digestive body system, that they were also learning about the coding at that time, or afterwards. In other words, they wanted both courses taught side-by-side to make sure you were not teaching coding about a body system that students had not yet learned about in the pathology or Pharmacology Course. Number three, Math Statistics is to be taught in addition to HIM Statistics. Our program is okay there because of the level at which our Math 109 course is taught. In compliance with the new standards, our program had to re-sequence and re-develop the pre- and co-requisite courses because the biology course had to be completed before students could take any coding courses. The Moraine Valley curriculum review team made those changes effective in fall of 2020.</p> <p>Clinical Practicum Placement/COVID</p> <p>COVIDs initial impact on students who were ready to go to clinicals - everything started shutting that Thursday, Friday, the week prior to when our students were scheduled to work at clinical sites. It was challenging as emails were received,</p>
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understandably, by clinical sites that they could not accept students inside their clinics; attempts were made to get students placed in other clinicals, and Debbie Morley was able to place students into other clinical sites, however, that Monday, which was the day prior to the students being scheduled to begin, there was an official shutdown made that did not allow any of our students in any health science program to visit any clinical sites because of the pandemic.

Debbie was able to pull together an internal PV experience for students since they had already attended clinicals the previous summer, and therefore had met the criteria of completing at least one clinical rotation onsite. Students were given a remote coding opportunity using electronic health records, they coded the inpatient charts electronically and electronic health records from home. Students also had discussion boards available to discuss the charts among each other, that gave them a realistic as possible experience of what it is like to be a remote coder. Students were not able to graduate on time, but, because they went to previous summer codes, they had to complete at least 40 hours, and then they graduated. Our group that was due to attend clinicals last Summer, which would have been the first-year group, Debbie provided them the exact same experience. They also coded electronic health records, since they had already had their coding classes. The students did not attend clinicals in the fall, but they are due to attend clinicals this spring, and to graduate in May. Debbie asked the advisory meeting attendees whether or not there were opportunities available in HIM or any other onsite educational experience, and whether or not employees are returning to work onsite, in preparation for the next group of students expected to graduate in May. One attendee mentioned that because of the rise in COVID cases, Advocate has visitor restrictions in place again, and therefore are not allowing people on their campuses right now. The attendee reported that some projects are managed remotely, projects at the Aurora site in Wisconsin; there have been many projects that involve students such as comparing job descriptions, figuring out PowerPoints, compiling procedures for workflows or updating those. One attendee suggested an opportunity that could be done remotely in which there are virtual meetings, that the teaching site could set up where they can help get the students off and running on a project involving coding. At Advocate Aurora, coding and HIM processes are being done remotely through June of 2021. Another meeting participant said she did not think she could provide student onsite work experience because students cannot get access to Epic but that she would seek to determine if students could be granted temporary access to Epic. Jennifer said that three

HIM departments are closed, and that students and visitors are not allowed inside the facility. A participant from Riverside said that most coders work from home, and that no one would be onsite to mentor students, and also that Riverside would have the same issue with Epic access as the other facilities for students in that it would be very difficult to get access to a system set up for students remotely. It was also reported that Silver Cross Hospital is in the administrative mode of no students.

When Diane was asked of the possibility of remote coding learning experience for students, she said that her facility is in the midst of a reorganization, and right now, she did not think there be a learning opportunity for students but that she would speak with the director about the possibility of training students. Although Palos announced a visitor restriction, there has not yet been word on whether or not students would be able to attend onsite clinicals. Palos is expecting a hospital merger in January, and that projects might be a possibility. To graduate, students need 40 hours per week of a clinical project, it does not need to be onsite. Students are ready for clinical placement in March 2021. It is thought that more than one student can work on a project; the goal would be to make sure that the work is individual, and that it is shared work.

MVCC Huffman Award Recipients

The Illinois Health Information Management Association (ILHIMA) allows every school to choose their Huffman Award Recipient, the award criteria are: leadership, academic and personal achievement, volunteerism, and personal qualities. This year, unlike past years, ILHIMA gave us an opportunity to choose two students. This year's recipients were Dawn Debrowski and Lindsay Markiewicz, who both graduated May 2020.

HIM Reimagined/Specialization Update-Decision on Tracks Revenue Management Data Management

Other information that needed attendee feedback was HIM Reimagined which was sort of converted to specialization update.

The associate's degree program has 32 associate degree competencies, but our key HIM has also made requirements that we have to choose at least one track. In addition to those 32 associate degree competencies, now the trend can be revenue management, which would give us three additional competencies and/or data management. Revenue

	<p>management is coding and revenue cycle based, which is a special key of our program. Mari sought to learn from the attendees on whether they saw value in incorporating the data management competencies, and also, of what value to students and graduate job seekers.</p> <p>Mari explained the three additional competencies for each track revenue management in data management. Revenue management are diagnoses and procedural codes and groupings, according to official guidelines. Even though the program already does that, these tracks take it to a higher level. It is written in a Bloom's five taxonomy level, that tells us how deep you have to get into this competency. There are six levels in Bloom's, and this is a five, it is an evaluation level. They have to present and defend opinions by making judgments about information, validity of ideas or quality of work. Number two is evaluation of revenue cycle processes, which is a middle level five. The third one under revenue management is evaluation compliance with regulatory requirements and reimbursement methodologies, written in a level five. Mari asked the attendees regarding data management, if they saw value in developing competencies for students to meet these. In other words, will they lead to jobs outside of Moraine? The very first data management standard reads evaluate data dictionaries and data sets for compliance with governance standards. It is written at an evaluation Bloom's five of six. To meet this competency, if we choose this data management track, are things like data, reliability and validity, general data, characteristics, data, quality management characteristics that ensure data quality, and data analysis techniques for a certificate, death certificates, patient case abstraction, and computer generated aggregate reports. Our students already do this at a level two or three, but by taking the data management track, our program would need to take these projects to a higher level. Mari explained Bloom's Levels to the attendees; at a level one, students are asked to remember things, at a level two, students are expected to understand them, level three is applied, level four is to analyze, at a level five, evaluate, and a level six is to create. Mari reviewed level one through six, reminding attendees, that this is managed data within a database system, saying that they are looking for a system's management at a level five, a data entry and display at a level five, and database language like SQL at that level of five art students do get introduced to all of this, but not at that level five that they are actually evaluating the systems. The last of the three is data management, identify standards for exchange of health information. One that is written at a level three is Interoperability, office of the national coordinator, standards development, international organizations for standards of uses for metadata, and quality</p>
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	<p>and performance through things like core measures, president emission indicator, reporting national committee of quality and health statistics. Mari said that our program has to do one track, and she asked attendees for feedback. Our program is taught revenue management, that is the validity or jobs, or increased opportunities for students, if we have to incorporate these three data management standards at that very high Bloom's level of a five. The requirement is that we only have a minimum of one track; our program meets the intent of the standards by having revenue. The question to the meeting attendees was whether it would be a benefit to student employment opportunities if our program did a high level of data management or should our program stay with revenue cycle. Kathy opined that data management does help because 'everything in this data management track feels very relevant to me.' Mari reminded everyone that it is not that data management is not taught, but they would have to be taught at a higher level such as advocate, appraise, assess, compare, comply, contrast, determine, differentiate, engage, ensure, evaluate, interpret, leverage, mitigate, or recommend these things at that level. Another attendee, Jennifer suggested focusing on revenue cycle management since it is the emphasis of her organization right now. According to Diane, her organization has a data management specialist with whom they work completing tracking and trending with denials which is a valuable contribution. Diane also added that she cannot disagree that revenue cycle management is significant, but she also opined that data management is the up and coming thing, and that more and more students will want to engage in that. Kathy opined the following: I know that we touch on those things in school and I know that they are not to the level of what you are trying to get to for data management, it took years before she got to that point. Kathy does not think that one would come out from the RHIT and go right into a job to those, since it took her years to go into that high level of what is being proposed in data management, and, she added, that high curriculum level would be bachelor or even graduate level education. Another attendee agreed that data management is important. Karen also agreed that data management is important, and added that 'this is the way the industry is moving.' Karen also said that she doubted that a graduate right out of school would be able to get a job in data management since current employees are already moving in that direction as established employees. Mari summarized the consensus by indicating that the program would continue to work towards these, but that the program would not pick up the data management track at this time, but she recognized that is the future goal.</p>
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<p>Coding Specialist</p> <ul style="list-style-type: none"> a. Exam Results-2019 b. Graduate Survey c. PCAP Approval d. Annual Attestation Report-2019 e. 2018 PCAP Coding Competencies and Curriculum Changes-effective by 9/1/2021 <ul style="list-style-type: none"> i. Pre-requisite Changes f. ECBI-Fall 2020 	<p>Coding Specialist Program. This is our 41-credit hour certificate program, and for the most part, it is almost the first year of the Health Information Technology program.</p> <p>Exam Results - our graduate exam results are given since 2012, number of graduates have ranged from 32 to 18; in 2019, we had 23 graduates. What was also important is the number of students who took the CCA, the CCSP, or the CCS exams. In the past, Mari had been able to view the AHIMA website, the names of students who passed the exams. AHIMA does not report exam score to schools as they report them for HIT. Mari said there is a lot of variability because if our students took the exam and did not pass, Mari would not necessarily know that, but there was a big change. Since 2019, Mari could get the credentialed numbers from this report on AHIMA, in the past, some of the students self-reported, and Mari could verify whether they passed the exam or not but in 2019, AHIMA removed that database search engine so that she is no longer able to search if our graduates successfully sat for any of the coding exams. Therefore, the 39% that is shown is very much lower than it had been in the past, but the problem is that it is self-reported; Mari expressed concerns to AHIMA about that. Because there is no way to verify test results in the AHIMA database, there are no results for the 2020 HIT program either.</p> <p>Graduate survey - Our program is also required to survey our coding specialist graduates. Asked a similar question that we ask our HIT students on a scale of one to five, with five being the highest, 'how satisfied were you with our coding specialist program?' Our program had 14 people respond. There was only a 48% response rate, 71% said, excellent and 28% said, very good. None of the respondents said good, they are all said excellent or very good. The next question on the survey asked, 'what is your present employment status?' There were 14 people who responded to that question, 50% of them said they were working full-time, which we defined as 30 or more hours a week, 77% of them said they were working part-time, 29 or fewer hours a week. 0% indicated not employed and seeking employment, and 35% indicated not employed but actively seeking employment. Of those not employed, we asked respondents to please comment but only one person did comment, but the problem is some of our Coding Specialist graduates do not take a National exam, so without passing the National exam, CCA, CCS, CCSP, the likelihood of them getting a job in the field is not good. Because AHIMA has removed that database search engine, it would be extremely difficult to give attendees any more</p>
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information on this than Mari has. How hard are they working? Where are they looking to find jobs? Do they have a National exam? We did ask them at a previous survey this question and asked graduates if they had passed the National exam but the challenge is, if they took and passed the National exam, two questions, did you take and did you pass? The challenge is that a lot of graduates avoid the question so Mari is not getting the data, even though she surveyed for it. The anonymous surveys are done by SurveyMonkey, and our program uses graduate's personal email accounts. Students are told of the survey prior to graduation, and follow-up emails are sent to those who have not responded, and some phone calls are also made to encourage graduates to complete the survey. The next question asked on the survey, 'did you take any of the following National exams since you completed the program?' One graduate did not take any exam, 46% of them took the CCS, which is high, 61% took the CCSP, and no one took the CCA. Thirteen people responded to that question. When graduates were asked if they took and passed the exam, some people avoided the question. It was decided that our program would ask graduates if they at least sat for the exam, so what we know of our respondents, the majority did sit for some type of exam.

2018 PCAP Coding Competencies and Curriculum Changes-effective by 9/1/2021

Professional Certificate Approval Program (PCAP), the accreditation agency for our Coding Specialist Program is the AHIMA PCAP program. Our program completed a survey and we received a three-year approval which took effect February 28, 2019. Every year our program has to fill out an ADA station to prove that we are continuing to meet the standards since they do not wait once every three years, it is an annual process. In February of 2020, they had received our information, looked at our information and it was accepted; our program is remaining PCAP approved. Our program will complete that every year throughout a three-year cycle to maintain that three-year accreditation.

Pre-requisite Program Changes

Coding Specialists had some curriculum changes. The coding standards for AHIMA, is the subset of HIT standards; in other words, the standards are the same. They have to be taught at the same level as that first year of HIT as a stackable program. The new competencies which were talked about in the HIT Program is that the biology course be completed before any coding courses and the pathology and

	<p>pharmacology course be taught as career core, so those changes have been made. Courses were re-sequenced, and it was approved by the curriculum committee. However, one area of interest is that in conversations with one of the faculty who works in IMS, the computer division of the college, and in a couple of student open houses before COVID hit, people did not understand what the Coding Specialist Certificate was. What Mari discovered is that people in the marketplace think that a Coding Specialist Certificate is a certificate in a computer program so a program name change form was completed and our program, beginning next fall is going to be known as a Medical Coding Specialist Certificate to differentiate our program from the computer programs.</p> <p>ECBI-Fall 2020</p> <p>Our Education Center at Blue Island (ECBI), has been in Blue Island several years; the college was given grant money to bring a number of Health Science programs to the Blue Island Center. Coding Specialist was a program that we brought to ECBI, and our program started there in fall of 2020. There is an evening cohort there as students are moving through the Coding Specialist Program. Right now though, because of COVID, it is mostly taught online. When the pandemic is over, classes will meet in person. Right now, students are studying MRT-111 and MRT-125, and this spring they will all move forward in a cohort to study MRT-131 and MRT- 119. In fall of 2021, they will study MRT-123 and 132. In spring of 2020, students will study MRT-133 and 212. This cohort is scheduled to graduate in summer of 2020. Our college still offers the day cohort at Moraine Valley's main campus.</p>
<p>Medical Billing</p> <p>a. Program Statistics</p>	<p>Medical Billing program is a 15-credit hour certificate program. Medical Billing Certificate allows students to explore whether they are interested enough in the field to continue further study in Coding and HIT. The Medical Billing program is not an accredited program as there is no accreditation for Medical Billing, but it is a certificate program. The number of graduates that we have had over the last six years is somewhere between 25 and 30 but a lot of those graduates are students who go into our Coding Program and eventually go into our HIT Program, and that was the reason the certificate program was created.</p>
<p>Other</p> <p>a. Employer survey</p>	<p>Employer survey</p> <p>A survey will probably be sent our next week. Our</p>

	<p>accreditation agency requires that our program survey people that tend to hire our graduates. The SurveyMonkey survey will require two answers. Your participation is appreciated. Mari thanked the attendees for their continued support. Mari asked if there was anything else that anyone would like to share with us. Karen asked what suggestions CAHIIM made to make a worthwhile clinical experience for the students. Mari said one of the suggestions made was policy and procedure writing, PowerPoint presentations, coding education, and taking data. Another suggestion was COVID contact tracer. Mari also asked attendees if they had any project-based ideas for students completing clinicals. Karen said she had been working with students every week and organizing Zoom meetings with an individual, and that she is working with an inpatient coder to code records virtually. Karen added that she is working with someone on data analytics assignments at a higher Bloom's level with someone who does data management. Karen's other suggestions included researching Kurt Productivity Standards for Coding Professionals as they have come up with a proposal interview, and ask some of the coders what they do in their regular day, besides coding. Perhaps even have students do some research on how to be a successful leader in a remote work environment. Another attendee asked if any field trips were made, but because of COVID, students had not gone on any field trips. There was some speculation as to whether HIT departments within an office setting would even exist anymore since many HIT employees are working remotely. Debbie asked attendees that once things begin to open up, if there was anyone willing to host a field trip so that students can experience being inside an HIT Department, and it would even cover one of their days of PPE. An attendee from Silver Cross offered to host a field trip, pending the pandemic situation. Mari thanked all attendees.</p>
Adjournment	The meeting was adjourned at 2:45 p.m.