

JEFFERSON COLLEGE

INSTITUTIONAL COURSE GUIDE

HIT100

INTRODUCTION TO HEALTH INFORMATION TECHNOLOGY

3 Credit Hours

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HIT100 Introduction to Health Information Technology

I. CATALOGUE DESCRIPTION

- A. Pre/ Co-requisite: BIT122
Pre requisite: Reading proficiency
- B. Credit hour award: 3
- C. Description: Introduction to Health Information Technology provides an introduction to this field and the organization of healthcare delivery in the acute care setting. Analysis of health records in paper, hybrid, and electronic formats will form the basis of classroom discussion. Emphasis is on the documentation requirements for licensure, accreditation, and certification. Other topics include data sets, storage and retrieval, and the use and structure of healthcare data, record assembly and analysis, chart location, master patient index, physician documentation, and release of information. (F,S,O)

II. A. EXPECTED LEARNING OUTCOMES/CORRESPONDING ASSESSMENT MEASURES

Expected Learning Outcomes	Assessment Measures
Define key Health Information Technology words and abbreviations.	Discussion Board/Assignment/ Summative Examination
Describe the development of the Health Information Technology profession.	Discussion Board/Assignment/ Summative Examination
Identify the requirements for initial and continuing certification within the Health Information Technology profession.	Discussion Board/Assignment/ Summative Examination
Describe the various functions of a Health Record Department.	Discussion Board/Assignment/ Summative Examination
Describe the impact of technology on the Health Information Technology profession.	Discussion Board/Assignment/ Summative Examination
Describe some of the existing and emerging roles in the Health Information Technology profession.	Discussion Board/Assignment/ Summative Examination
Locate various resources for Health Information Technology professional development, including, but not limited to, the Journal of American Health Information Management Association (AHIMA), publications of AHIMA, the Internet web site of AHIMA, and other related web sites.	Discussion Board/Assignment/ Summative Examination
Outline the flow of data into a patient record by various methods and entities in a health care organization.	Discussion Board/Assignment/ Summative Examination
Describe how health data/information is used by various individuals and groups.	Discussion Board/Assignment/ Summative Examination

Discuss concerns related to protection of patient data to preserve confidentiality.	Discussion Board/Assignment/ Summative Examination
Identify key organizations external to the health care facility that influence data collection.	Discussion Board/Assignment/ Summative Examination
Compare the following record formats: source-oriented, problem-oriented, or integrated.	Discussion Board/Assignment/ Summative Examination
Review the evolution of the CPR (computerized patient record).	Discussion Board/Assignment/ Summative Examination
Compare the three types of documentation analysis: quantitative, qualitative, and statistical.	Discussion Board/Assignment/ Summative Examination
Describe systems for handling incomplete health records.	Discussion Board/Assignment/ Summative Examination
Outline the path a patient record takes through a health record department from dismissal to permanent file.	Discussion Board/Assignment/ Summative Examination
Identify various numbering and filing systems for storage of patient records.	Discussion Board/Assignment/ Summative Examination
Compare manual and automated record-tracking systems.	Discussion Board/Assignment/ Summative Examination
Summarize the value of the master patient index (MPI) in accessing patient records.	Discussion Board/Assignment/ Summative Examination
List ways to safeguard patient information.	Discussion Board/Assignment/ Summative Examination

III. OUTLINE OF TOPICS

- A. Health Information Management (HIM) profession
 - 1. Early history of HIM
 - 2. Evolution of Practice
 - 3. Today's Professional Organization
 - 4. HIM Specialty Professional Organizations

- B. Healthcare Delivery Systems
 - 1. Standardization of Medical Care
 - 2. Modern Healthcare Delivery in the United States
 - 3. Other types of Healthcare Services
 - 4. Policy Making and Healthcare Delivery

- C. Purpose and Function of the Health Record
 - 1. Purposes of the Health Record

2. Formats of the Health Record
 3. Users of the Health Record
 4. HIM Functions
 5. MPI
 6. Identification Systems
 7. HIM Functions in an Electronic Environment
 8. Hybrid Record
 9. Medical Transcription
 10. Release of Information
 11. Clinical Coding
 12. HIM Interdepartmental Relationships
 13. HIM Software
- D. Health Record Content and Documentation
1. Documentation standards
 2. General Documentation Guidelines
 3. Documentation by Setting
 4. Health Information Media
 5. Role of Healthcare Professionals in Documentation
- E. Clinical Terminologies, Classifications, and Code Systems
1. Clinical Terminologies
 2. Classifications
 3. Code Systems
 4. Clinical Terminologies, Classifications, and Code Systems Found in Health Data and Information Sets
 5. Database of Clinical Terminologies, Classifications, and Code Systems
- F. Data Management
1. Data Sources
 2. Data Management
 3. Data Governance
 4. Data Quality
 5. Data Management and Bylaws
- G. Secondary Data Sources
1. Differences between Primary and Secondary Data Sources
 2. Purposes and Users of Secondary Data Sources
 3. Types of Secondary Data Sources
 4. Healthcare Databases
- H. Health Law
1. Basic Legal Concepts
 2. Patient Rights Regarding Healthcare Decisions
 3. Overview of Legal Issues in HIM
 4. Legal Health Record
- I. Data Privacy and Confidentiality
1. Use and Disclosure
 2. State Laws-Privacy

3. HIPAA Privacy Rule and ARRA
 4. HIPAA Privacy Rule Documents
 5. Uses and Disclosures of Health Information
 6. Breach Notification
 7. Requirements Related to Marketing, Sale of Information, and Fundraising
 8. HIPAA Privacy Rule Administrative Requirements
 9. Enforcement of Federal Privacy Legislation and Rules
 10. ROI
 11. Medical Identity Theft
 12. Patient Verification
 13. Patient Advocacy
 14. Compliance
- J. Data Security
1. Protecting the Privacy of Data
 2. Ensuring the Integrity of Data
 3. Data Security Threats
 4. Components of a Security Program
 5. Coordinated Security Program
 6. HIPAA Security Provisions
 7. ARRA of 2009 Provisions
 8. Forensics
- K. Health Information Technologies
1. Health IT
 2. Systems Development Life Cycle
- L. Healthcare Information
1. Role of Data Analytics in Healthcare Information
 2. Strategic Uses of Healthcare Information
 3. Consumers and Healthcare Information
 4. HIE
- M. Research and Data Analysis
1. Presentation of Statistical Data
 2. Descriptive Statistics
 3. Normal Distribution
 4. How to Analyze Information
 5. Research Methodologies
 6. IRB
 7. Healthcare Research Organizations
- N. Healthcare Statistics
1. Discrete vs. Continuous Data
 2. Common Statistical Measures Used in Healthcare
 3. Acute-Care Statistical Data
 4. Patient Care and Clinical Statistical Data
 5. Ambulatory Care Statistical Data
 6. Public Health Statistics and Epidemiological Information

- O. Revenue Management and Reimbursement
 - 1. Healthcare Insurance
 - 2. Revenue Cycle Management
 - 3. Healthcare Insurers
 - 4. New Trends
 - 5. Utilization Management
 - 6. Case Management
 - 7. Healthcare Reimbursement Methodologies

- P. Fraud and Abuse Compliance
 - 1. Federal Regulations and Initiatives
 - 2. Compliance Program
 - 3. Coding and Fraud and Abuse
 - 4. Clinical Documentation Improvement

- Q. Leadership
 - 1. Leadership Theories
 - 2. Leadership Styles
 - 3. Change Management
 - 4. Critical Thinking Skills
 - 5. C-Suite
 - 6. Team Leadership
 - 7. Team Meetings
 - 8. Business-Related Partnerships
 - 9. Leadership Roles

- R. Performance Improvement
 - 1. Performance Measurement and Quality Improvement
 - 2. Quality Dimensions of Performance Improvement
 - 3. Fundamental Principles of Continuous Performance Improvement
 - 4. Formal Performance Improvement Activities
 - 5. Team-Based Performance Improvement
 - 6. Managing Quality and Performance Improvement
 - 7. Clinical Quality Management Initiatives
 - 8. Shared Governance

- S. Management
 - 1. Management
 - 2. Organizational Behavior
 - 3. Organization Structure
 - 4. Strategic and Operational Planning
 - 5. Work Analysis, Change Management, and Project Management
 - 6. Project Management
 - 7. Financial Management
 - 8. Management of Resources and Allocation
 - 9. Management of Vendors and Contracts
 - 10. Enterprise Information Management
 - 11. Management of Mergers
 - 12. Management of Corporate Compliance and Patient Safety

- T. Human Resources Management and Professional Development
 - 1. Employment Law, Ethics, and Labor Relations
 - 2. Labor Relations
 - 3. Human Resources Management Roles and Responsibilities
 - 4. Training and Development

- U. Ethical Issues in HIM
 - 1. Moral Values and Ethical Principles
 - 2. Cultural Competence in the Healthcare Environment
 - 3. Ethical foundations of HIM
 - 4. Ethical Issues Related to Medical Identity Theft
 - 5. Ethical Decision Making
 - 6. Breach of Healthcare Ethics
 - 7. Important Health Information Ethical Problems

IV. METHOD(S) OF INSTRUCTION

- A. Lecture (if applicable)
- B. Readings from textbook
- C. Supplemental handouts
- D. Discussion Boards

V. REQUIRED TEXTBOOK(S)

- A. Sayles, N. and Gordon, L., (current edition). *Health Information Technology: An Applied Approach*. Chicago, IL: AHIMA Press.

VI. REQUIRED MATERIALS

- A. Textbook(s)
- B. A computer with internet access (available through the Jefferson College Labs)

VII. SUPPLEMENTAL REFERENCES

- A. Class handouts
- B. Current internet resources
 - 1. Online reference materials
 - 2. American Health Information Management Association (AHIMA) website. www.ahima.org

VIII. METHOD OF EVALUATION

- A. Assignments (21 @ 25 points each)
- B. Discussion Board (16 @ 16 points each)
- C. Vocab Quizzes (21 @ 10 points each)
- D. Summative Written Examinations (21 @ 25 points each)
- E. Written Project (1 @ 60 points)
- F. HIT Careers Assignment (1 @ 20 points)
- G. Professionalism Contract/HIT Handbook/SmarterMeasure (3 @ 15 points each)
- H. Final Exam (1 @ 50 points)
- I. Grading Scale:
 - A = 90-100%
 - B = 80-89.9%
 - C = 70-79.9%
 - D = 60-69.9%
 - F = 0-59.9%

The HIT Program runs a strict point system and does not calculate weighted grades.

The instructor reserves the right to make changes to the syllabus at any time.

IX. ADA AA STATEMENT

Any student requiring special accommodations should inform the instructor and the Coordinator of Disability Support Services (Library: phone 636-797-3000, ext. 3169).

X. ACADEMIC HONESTY STATEMENT

All students are responsible for complying with campus policies as stated in the Student Handbook. Any student who cheats or plagiarizes will be subject to dismissal from the Health Information Technology program and will be referred to the college for disciplinary action. (See College website www.jeffco.edu/HIT)

XI. ATTENDANCE STATEMENT

Students earn their financial aid by regularly attending and actively participating in their coursework. If a student does not actively participate, he/she may have to return financial aid funds. Consult the College Catalog or a Student Financial Services representative for more details.

XII. OUTSIDE OF CLASS ACADEMICALLY RELATED ACTIVITIES

The U.S. Department of Education mandates that students be made aware of expectations regarding coursework to be completed outside the classroom. Students are expected to spend substantial time outside of class meetings engaging in academically related

activities such as reading, studying, and completing assignments. Specifically, time spent on academically related activities outside of class combined with time spent in class meetings is expected to be a minimum of 37.5 hours over the duration of the term for each credit hour.

XIII. DIVERSITY STATEMENT

Jefferson College is a community leader dedicated to supporting and promoting diversity through opportunities and experiences that foster a culture of respect, inclusiveness, and understanding for everyone in the campus community to engage in a diverse world.