



## news

233 N. Michigan Ave., 21st Fl.  
Chicago, IL 60601

phone >>(312) 233-1100  
fax >>(312) 233-1090  
web >>www.ahima.org

### For more information, please contact:

Lauren Kotarski  
Public Communications Inc.  
312-558-1770  
[lkotarski@pciipr.com](mailto:lkotarski@pciipr.com)

## Telemedicine Can Enhance Hospitals' Reputations in Rural Communities

*Summer issue of Perspectives, AHIMA's online research journal, features a study  
examining some of telemedicine's implications*

CHICAGO – July 13, 2016 – Improvements in technology have helped telemedicine emerge as one of the fastest growing and most discussed trends in healthcare.

Research in the summer issue of [\*Perspectives in Health Information Management\*](#), the online research journal of the [American Health Information Management Association](#) (AHIMA), studies "[Perceptions of the Benefits of Telemedicine in Rural Communities](#)."

The researchers for the telemedicine study collected data through a survey and interviews with clinicians and hospital administrators. Three major themes emerged from the interviews:

- Telemedicine enhances the reputation of the hospital in the community. One hospital CEO said: "(Telemedicine) created a huge turnaround for us with a 35 percent increase in volume attesting to that."
- Local care is better care, for patients and their families. One hospital CEO said: "We transfer less patients out because of tele-ICU. It's hard for their family members to uproot ... even if they're local, they have jobs and those kinds of things and we believe that having the core family around the patient is some of the best medicine you can give."
- The community's awareness of the hospital is increased because of stories related to telemedicine. One hospital CEO said: "I have had naysayers who have had bad relations with this hospital for 20 years, touting our (telemedicine) services and our abilities now at this hospital. ... One lady just says, 'It saved my husband's life, plain saved my husband's life.'"

The authors also noted: “Telemedicine may play a role in planning responses to the findings of a Community Health Needs Assessment, a requirement for not-for-profit hospitals. While the health needs of rural communities are diverse, an appropriately tailored telemedicine program may be one way to meet identified community needs.”

“This issue of *Perspectives* features a redesigned look but the same high quality of diverse research readers are accustomed to,” said AHIMA CEO Lynne Thomas Gordon, MBA, RHIA, CAE, FACHE, FAHIMA.

The summer issue also features the following articles:

- How should an organization prepare for unexpected downtime of an electronic health record (EHR) system? This question is explored in the article, [“Lessons Learned From an Electronic Health Record Downtime.”](#) On May 13, 2010, the EHR at the National Institutes of Health Clinical Center (NIH/CC) in Bethesda, Md., went down unexpectedly, posing a risk to patient safety and required care providers to manually report patient data. To promote downtime process improvement, a multidisciplinary committee was formed. One of the outcomes was the creation of a downtime toolkit to that is reviewed and updated on a biannual basis.
- The study, [“Hiring for Competency: Hiring to Not Fail vs. Hiring to Succeed,”](#) examines employers’ definitions of competency, instances of successful and unsuccessful hiring and importance placed on industry credentials/certifications versus education degrees. The findings suggest that “employers’ definitions of competency are not aligned with narrative stories of successful hires, that employers often aim to avoid failure rather than ensure success in hiring, and that hiring managers often believe that following a predefined and structured hiring process is most likely to lead to a successful hire.”
- AHIMA and Lord Fairfax Community College are partnering to develop a new type of online portal and education search engine as part of a US Department of Labor Trade Adjustment Assistance Community College and Career Training grant. The article, [“Leveraging Health Information Management Competency-Based Education with a New Type of Learning Portal,”](#) details how the portal provides online personalized learning plans tied to competencies using free or low-cost digital resources that allow students to earn credentials.”
- The study, [“Mapping Systematized Nomenclature of Medicine–Clinical Terms \(SNOMED CT\) to International Classification of Diseases, Tenth Revision, Clinical Modification \(ICD-10-CM\): Lessons Learned from Applying the National Library of Medicine’s Mappings,”](#) identifies the common challenges encountered when implementing these mappings within the electronic medical record system of a large integrated healthcare system.
- The findings of the study, [“Disease Groupings: What are They, How are They Used, and How Do They Compare Internationally?”](#) are discussed with regard to the implications for disease groupings that may result from the upcoming adoption of ICD-11. The authors write, “This article is especially relevant for those working in health services who are involved in multicountry collaborations and require an understanding of the different (diagnosis-related groups) used internationally, or who are preparing for the transition to ICD-11.”

- Clinical coding is a fundamental function in health information management. The article, "[Clinical Terminology and Clinical Classification Systems: A Critique Using AHIMA's Data Quality Management Model](#)," distinguishes between clinical terminologies and clinical classification systems. The author critiques both systems using SNOMED CT and ICD-10-CM/PCS as examples of clinical terminologies and clinical classification systems, respectively.

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### **About Perspectives**

[Perspectives in Health Information Management](#) is a scholarly, peer-reviewed journal, referred to by professors, professionals, public officials, industry leaders, and policy-makers. Since 2004, it has been one of the most credible and respected journals of the HIM industry and is referenced in notable indices such as PubMed Central (PMC), the Cumulative Index to Nursing and Allied Health (CINAHL), and Google Scholar. [Learn more](#) about the submission guidelines and the manuscript review process.

### **About AHIMA**

The American Health Information Management Association (AHIMA) represents more than 103,000 health information professionals in the United States and around the world. AHIMA is committed to promoting and advocating for high quality research, best practices and effective standards in health information and to actively contributing to the development and advancement of health information professionals worldwide. AHIMA's enduring goal is quality healthcare through quality information. [www.ahima.org](http://www.ahima.org)