GET THE MOST FROM AHIMA IN 2017!
You asked for it, you got it! AHIMA will roll out new exciting membership opportunities in 2017. Join the new Active Premier membership, providing even greater opportunity with savings on AHIMA products and services, unlimited credential maintenance fees, and free access to a variety of products worth 8 CEUs.
CERTIFICATION

CERTIFIED DOCUMENTATION IMPROVEMENT PRACTITIONER (CDIP®)
Product Code: CDIP
Professionals earning the CDIP credential will:
• Be distinguished as knowledgeable and competent in clinical documentation within patient health records
• Be positioned as leaders and role models in the health informatics and information management community
• Demonstrate competency in capturing documentation necessary to fully communicate patients’ health status and conditions
• Help provide a strong base of expertise in the industry
List Price: $329 | Member Price: $259

EXAM PREPARATION RESOURCES

Certified Documentation Improvement Practitioner (CDIP) Exam Preparation
Sharon Easterling, MHA, RHIA, CCS, CDIP, CPHM, FAHIMA
Product Code: AB300615
Before you get tested, get invested—in the most comprehensive CDIP exam preparation book on the market! Certified Documentation Improvement Practitioner (CDIP) Exam Preparation helps you sharpen your clinical documentation improvement and test-taking skills in preparation for the CDIP exam. The exam experience is simulated in the book with two full-length, 140-question practice exams, each containing questions that cover all six CDIP domains. In addition, an appendix of commonly found acronyms, abbreviations, and terms allows you to review your CDI terminology. Get ready to perform your best with this excellent resource.
List Price: $79.95 | Member Price: $64.95

SELF-PACED LEARNING: CERTIFIED DOCUMENTATION IMPROVEMENT PRACTITIONER (CDIP) EXAM PREP WEBINAR SERIES
CEUs: 8 (for all 6 webinars and one chat)
Chat Dates:
March 15, 2017
November 15, 2017
The Certified Documentation Improvement Practitioner (CDIP) certification is one of AHIMA’s most highly regarded credentials. To earn this certification, you must pass the CDIP exam. This series prepares you for the examination at a pace that works for you. Using webinars, it reviews the six domains covered in the exam to help you improve your performance. Best of all, this virtual series allows you to study for the CDIP exam without traveling, saving you valuable work and study time!
Webinar series includes:
DOMAIN 1: CLINICAL CODING PRACTICE
Product Code: AUDACDIP1 | CEUs: 2
DOMAIN 2: LEADERSHIP
Product Code: AUDACDIP2 | CEU: 1
DOMAIN 3: RECORD REVIEW & DOCUMENT CLARIFICATION
Product Code: AUDACDIP3 | CEUs: 2
DOMAIN 4: CDI METRICS & STATISTICS
Product Code: AUDACDIP4 | CEU: 1
DOMAIN 5: RESEARCH & EDUCATION
Product Code: AUDACDIP5 | CEU: 1
DOMAIN 6: COMPLIANCE
Product Code: AUDACDIP6 | CEU: 1
Can be purchased individually or as a bundle. Bundle includes:
• Six webinars and opportunity to participate in two (2) virtual chats to ask questions and receive test taking tips. (Chats are an additional 1 CEU each.)
• Certified Documentation Improvement Practitioner (CDIP) Exam Preparation book
• CDIP exam
List Price:
$119 (Individual Webinar)
$705 (All 6 Webinars + One Hour Chat with Instructors)
$985 (Webinars + Book + One Hour Chat with Instructor + Exam)
Member Price:
$99 (Individual Webinar)
$605 (All 6 Webinars + One Hour Chat with Instructors)
$825 (Webinars + Book + One Hour Chat with Instructor + Exam)

CERTIFIED DOCUMENTATION IMPROVEMENT PRACTITIONER (CDIP): ADVANCING THE PROFESSION ONLINE COURSE
COMING SOON!
Please go to: ahima.org/education/onlineed/Programs/examprep for the latest information.
Will you be ready for the CDIP exam? The CDIP Exam Prep online courses are designed to prepare the CDI professional to sit for the examination. The courses will review the six domains covered in the CDIP exam: Clinical & Coding Practice, Leadership, Record Review and Document Clarification, CDI Metrics and Statistics, Research and Education, and Compliance. Real-world examples and learning activities are incorporated into the training to facilitate learner retention. The courses also include more than 100 review questions to help prepare for the CDIP exam. Give yourself the advantage—register for these exclusive courses!
CERTIFIED DOCUMENTATION IMPROVEMENT PRACTITIONER (CDIP) PRACTICE EXAM IN ICD-10

Product Code: CDIPPRAC10
The CDIP online practice exam in ICD-10 tests your knowledge and skills to assess your readiness to sit for the CDIP exam. The 84 questions, covering all six domains of the CDIP exam, are written by AHIMA item writers who develop questions for the CDIP exam. The score report provided at the end of the exam shows areas of strength and areas where more studying is needed. Candidates can use that information to guide the next steps of their exam preparation process.
List Price: $59.99 | Member Price: $49.99

BOOKS

**Documentation for Health Records**
Cheryl Gregg Fahrenholz, RHIA, CCS-P; Ruthann Russo, PhD, JD, MPH, RHIT
Product Code: AB100710
What is your documentation IQ? Whether you are just starting out or you need a refresher, this book is for you. *Documentation for Health Records* addresses fundamental health record documentation requirements and practices for acute care as well as the nuances required by the ambulatory care, long-term care, home care and hospice, and behavioral care settings. It helps you identify basic healthcare documentation principles so you can effectively transition to electronic records. No matter what the setting—be ready to take on the ever-changing role of documentation in the patient record.
List Price: $94.95 | Member Price: $74.95

**Clinical Documentation Improvement: Principles and Practice**
Pamela Carroll Hess, MA, RHIA, CCS, CDIP, CPC
Product Code: AB121614
What’s the big deal with clinical documentation? As the foundation of every patient health record, it affects all future decisions regarding medical diagnosis, treatment and payment. To help you understand the fundamentals, this book defines CDI, explains its importance, and presents an objective and uniform set of principles that can be applied reliably in any healthcare organization’s clinical documentation improvement program. If you want to grow and refine an existing CDI program, start with this book. Not only will you grow your knowledge; you will be ready to give your organization a competitive advantage.
List Price: $89.95 | Member Price: $74.95

IN-PERSON MEETINGS

**CERTIFIED DOCUMENTATION IMPROVEMENT PRACTITIONER (CDIP) WORKSHOP: ADVANCING THE PRACTICE**
March 30–31, 2017 | Chicago, IL
August 2–3, 2017 | Washington, DC
Registration opens November 21, 2016.
CEUs: 16
The CDIP credential signifies a commitment to improving the quality of healthcare information. To earn the credential, you must pass the CDIP exam. In order to prepare you for the exam, AHIMA offers the CDIP Exam Prep Workshop. This two-day in-person meeting reviews the six domains covered in the exam and increases learning retention through real-world examples and learning activities. It also reviews the knowledge and skills necessary to function in the CDI profession. After successful completion of the workshop, attendees may apply to sit for the CDIP exam immediately (including one free exam retake). Attend this workshop and join this elite group of professionals!
List Price: $981 (workshop and exam) | Member Price: $891 (workshop and exam)
$685 (workshop only) | Member Price: $585 (workshop only)

**CDI ACADEMY**

January 25–27 | San Juan, PR
Product Code: 17CDIAC01 | CEUs: 26
May 3–5, 2017 | Chicago, IL
November 8–10 | Dallas, TX
Registration opens November 21, 2016.
The AHIMA CDI Academy is a comprehensive program designed to assist CDI professionals in implementing best practices at their organizations. Whether you are new to CDI or an experienced CDI professional ready to take your program to the next level, the Academy offers unique content you can apply to your situation. The program covers both inpatient and outpatient settings, creating an even larger return on investment for participants. During this three-day in-person meeting, you will learn about CDI best practices through real-life examples, exercises, and breakout sessions on specific clinical and coding topics. By encouraging discussion and active learning, this interactive event prepares you to return to your organization with new insights and energy. Includes an introductory webinar and the *Clinical Documentation Improvement: Principles and Practice* book.
List Price: $1295 | Member Price: $1195

**CDI SUMMIT**

July 31–August 1, 2017 | Washington, DC
Registration opens November 21, 2016.
The AHIMA CDI Summit is the premier industry event dedicated to advancing the documentation journey and exploring the challenges presented by today’s complex healthcare environment. With keynote addresses from nationally recognized industry experts, participants of this comprehensive conference will have access to a range of presentations on CDI best practices, innovation, implementation, and ICD-10-CM/PCS. The Summit consists of interactive sessions and real world examples providing critical insights into CDI programs as well as advanced networking opportunities. By attending this two-day meeting, you have the opportunity to access the most up-to-date information and apply it within your organization. Move your CDI program forward with the knowledge gained from the CDI Summit!
List Price: $560 | Member Price: $460

For discounted pricing on staff training, contact sales@ahima.org.
ONLINE LEARNING

CLINICAL DOCUMENTATION IMPROVEMENT (CDI) PROGRAM

This CDI program contains four self-paced online courses directed toward clinical documentation improvement (CDI) specialists or related roles in healthcare settings. The focus of these courses is on identifying high quality clinical documentation that supports accurate ICD code assignment. CDI professionals from both clinical and coding backgrounds will find these courses beneficial. Upon completion attendees will have advanced their knowledge in recognizing gaps within the clinical documentation, identifying quality measures impacted by clinical documentation, and understand the components of a successful CDI program.

The four courses in this program are:

- Clinical Documentation Improvement: Methods
  (6 lessons; 2 CEUs)
- Clinical Documentation Improvement: Program Success
  (6 lessons; 2 CEUs)
- Clinical Documentation Improvement: Issues
  (6 lessons; 2 CEUs)
- Clinical Documentation Improvement: Quality Measures and Documentation Standards (6 lessons, 2 CEUs)

The courses are, of course, valuable to your education individually—but deeper understanding and reinforcement of these complex concepts can be achieved when all four courses are completed.

CLINICAL DOCUMENTATION IMPROVEMENT: METHODS

Product Code: H0CDIIID10 | CEUs: 2

This 6-lesson course provides information on the terminology utilized in ICD-10-CM/PCS that impacts clinical documentation.

List Price: $96 | Member Price: $80

CLINICAL DOCUMENTATION IMPROVEMENT: PROGRAM SUCCESS

Product Code: H0CDIPS | CEUs: 2

This 6 lesson course will review overall aspects of managing a clinical documentation improvement (CDI) program. Planning and organizing the program is essential for success, as is monitoring and evaluation. The course also covers potential legal aspects involved with the query process, with the goal of querying for both reimbursement and data quality. Effective management involves hiring and retaining qualified staff, which is also addressed.

List Price: $96 | Member Price: $80

CLINICAL DOCUMENTATION IMPROVEMENT: ISSUES

Product Code: H0CDII | CEUs: 2

The intention of this 6 lesson course is to introduce HIM professionals to the exciting profession of clinical documentation specialist. Within this course, professionals will learn about important skills and areas of knowledge that will assist them in becoming successful clinical documentation specialists.

List Price: $96 | Member Price: $80

CLINICAL DOCUMENTATION IMPROVEMENT: QUALITY MEASURES AND DOCUMENTATION STANDARDS

Product Code: H0CDIQMDS | CEUs: 2

This 6 lesson course will review how clinical documentation improvement (CDI) programs relate to quality measures in addition to being in an electronic environment. As the industry requires an increase in reporting quality measures in addition to documentation standards, it is important for an HIM professional to understand the impact CDI programs may have on a facility’s data. This course will review how CDI will affect documentation necessary to meet industry standards, as well as report cards.

List Price: $96 | Member Price: $80

LIVE WEBINARS

IMPROVING QUALITY METRICS AND PATIENT OUTCOMES THROUGH CLINICAL DOCUMENTATION IMPROVEMENT

February 21, 2017
Joellyn Horowitz, MD, CCS, CCDS, AHIMA-approved ICD-10-CM/PCS Trainer

Product Code: AUDL022117 | CEUs: 2

Clinical documentation is the linchpin to high-quality healthcare experiences. To excel in patient outcomes, facility performance, and physician quality metrics, your organization must have an understanding of how clinical documentation improvement (CDI) impacts these areas. This webinar reviews the pertinent concepts and how they relate to each other and reimbursement. The speaker illustrates the actual impact on quality metrics and patient outcomes through a detailed case study. If your goal is to improve not only reimbursement for your facility, but also improve publicly reported quality metrics and patient outcomes to achieve better total performance in Value Based Purchasing, win more of the local market share, and improve compliance in coding and CDI practice, then this special session is for you.

List Price: $119 | Member Price: $99

ARE YOU CAPTURING ALL YOUR CCs/MCCs?

March 7, 2017
Kim Hardee, RHIT, CCS

Product Code: AUDL030717 | CEUs: 2

Secondary diagnoses are the most commonly overlooked elements in a case review for both CDI and coding professionals. So what are the best methods to not only uncover these secondary diagnoses but also educate your staff to facilitate an improved documentation and coding program? This webinar discusses secondary diagnoses guidelines to uncover those “hidden” diagnoses, assess situations when CCs/MCCs may be overlooked, examine the significance of pathology reports, and research opportunities for quality documentation in your facility. Viewers will have the option to participate in examples of conflicting/nonconflicting documentation. At the conclusion of the program, participants will have key information for an improved documentation program and identification of coding and documentation educational needs to facilitate accurate and complete DRG assignment/severity of illness reflection.

List Price: $119 | Member Price: $99
FROM SEVERITY TO MORTALITY: EVOLUTION OF QUALITY INITIATIVES IN CDI
May 11, 2017
Deanne Wilk, BSN, RN, CCDS, CCS
Product Code: AUDL051117 | CEUs: 2
High-quality outcomes data is the key to reimbursement, and clinical documentation improvement (CDI) initiatives are designed to improve the quality of outcomes data. Yet CDI specialists often experience bottlenecks with the implementation of initiatives, especially when it comes to severity of the illness and the risk of mortality. This webinar explores how providers, quality managers, and CDI professionals see these initiatives differently, and how to apply this knowledge when developing and accomplishing data quality processes. The speaker discusses how metrics of the information need to be inclusive to organizational goals, rather than an extrinsic source. If you face challenges in establishing or implementing CDI initiatives at your facility, then you will benefit from this session on how to move past these common roadblocks.
List Price: $119 | Member Price: $99

UNDERSTANDING QUALITY MEASURES FOR CDI
July 6, 2017
Linda Renee Brown, RN, MA, CCDS, CCS, CDIP
Product Code: AUDL070617 | CEUs: 2
The Centers for Medicare & Medicaid Services (CMS) establishes quality initiatives to improve patient care and provide reimbursements for hospitals that adhere to the requirements. In order for facilities to benefit, clinical documentation specialists (CDSs) need to understand the guidelines and how to participate. This webinar increases the specialists’ understanding of CMS quality initiatives, including value-based purchasing, inpatient quality reporting, the hospital-acquired condition reduction program, and bundled payments for care improvement. Attendees can expect to gain a more complete understanding of CMS requirements to elevate patient experiences and identify reimbursement opportunities. Join us for a thorough review of quality initiatives and their impacts on your organization.
List Price: $119 | Member Price: $99

July 13, 2017
Clement Agha, MD, CCS, CDIP
Product Code: AUDL071317 | CEUs: 2
The HIM profession of today is not the one of 15 years ago. We have clinical documentation improvement (CDI) to thank for it. CDI continues to directly influence how we record patient information, making it one of the fastest-growing job sectors in HIM. This webinar looks at the lucrative and flexible career opportunities available in CDI, supported by a review of its history, inner workings, and requirements. Attendees gain an understanding of the true motivation behind documentation standards and integrity, as well as an exciting view into the future of health information. Secure your seat at this inspirational session.
List Price: $119 | Member Price: $99

ON-DEMAND WEBINARS

CDI ACADEMY SELF-PACED LEARNING
Registration opens February 2017.
COMING SOON!

CDI OUTPATIENT ACADEMY
Registration opens January 2017.
The Outpatient CDI Academy provides a detailed analysis of the CDI opportunities in the outpatient setting. This academy uses evidence-based information to support the need of CDI programs in the outpatient environment, and provides education on the benefits of outpatient CDI, the drivers of outpatient documentation, and the structural and operational goals for outpatient CDI. If you are looking to expand or develop an outpatient CDI program, this training will prepare you.
List Price: $399 | Member Price: $299

CODING AND PHYSICIAN SELF-DEFENSE: A LIVE PRESENTATION TO THE MEDICAL STAFF
William Haik, MD, FCCP, CDIP
Product Code: AUDA011216 | CEUs: 2
Calling all coding staff and physicians! This live presentation will discuss physician profiling, payment, and patient care issues related to documentation of the inpatient health record. Subsequently, clinical examples will be presented and broken out by the components of a DRG. This helps physicians understand how improved documentation allows for the physician to realize their optimal performance profile and payment, and how the documentation process is enhanced by constructive communication with CDI personnel and the coding staff.
List Price: $119 | Member Price: $99

QUALITY MEASUREMENT: HIM’S CONNECTION TO VBP AND COMPLIANCE
Jeanne Babers, RHIA, CCS
Product Code: AUDA071416 | CEUs: 2
American policy-makers are focused on the triple aim of reducing healthcare costs, improving the patient experience, and improving the health outcomes of populations. In the future, hospitals will no longer be paid based on the volume of services provided. This is the concept behind value-based purchasing (“VBP”). Hospitals now must focus on both (a) coding for appropriate reimbursement; and (b) coding for accurate quality measurement. This requires providers to offer and document evidence-based, patient-centered treatment. In this webinar, all of these concepts are reviewed and explained in detail to show the connections between quality coding and quality outcomes.
List Price: $119 | Member Price: $99

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ENCOPHALOPATHY: WHEN ALTERED MENTAL STATUS DOESN’T MAKE SENSE!
James P. Fee, MD, CCS, CCDS
Product Code: AUDA072616 | CEUs: 2
Get your head around altered mental states! This session will discuss the clinical differences between altered mental status, confusion, delirium, and encephalopathy. The audience will understand the pathophysiology and etiology of each clinical process and be able to identify common clinical indicators related to each process. Examples of cases illustrating the clinical application of the different types of encephalopathy will be presented. In addition, this webinar shows structured physician queries to help attendees communicate more effectively with physicians regarding documentation of complex clinical issues. Additionally, the presenter will discuss the correct coding of encephalopathy in ICD-10-CM.
List Price: $119 | Member Price: $99

LEADING YOUR CDI PROGRAM TO BECOME A STRATEGIC FORCE WITHIN YOUR ORGANIZATION
Karen DiMeglio, RN, MS, CPC, CCDS
Product Code: AUDA080416 | CEUs: 2
Clinical Documentation Improvement (CDI) programs are uniquely positioned to be a driving force behind improved quality metrics, recognition for high quality hospital care, and accurate reimbursement. But this takes a focused approach to be primed for success. This presentation will provide critical information and strategies for building a high-performance team, translating data into actionable reports, taking a multifaceted approach to communication, identifying initiatives for improving hospital metrics, and seeking opportunities for collaboration.
List Price: $119 | Member Price: $99

AN AUDITOR’S VIEWPOINT: AN INSIDE LOOK AT AUDIT PROCESSES AND STRATEGIES
William (Bill) Malm, ND, RN, CMAS, CRCR and Sharon Easterling, MHA, RHIA, CCS
Product Code: AUDA082316 | CEUs: 2
With the increasing amount of audits, accurate documentation is no longer just about clinical care quality. It is also key for organizations to alleviate audit risk. The more organizations understand audit requirements, the better prepared they will be to avoid denials and proactively prepare for audit appeals This presentation will include an auditor’s viewpoint in the processes, key players and trends related to audits, and the impact for healthcare providers in 2016. The presenter will explore the audit landscape by identifying different types of audits and sharing best practices for an effective audit program to ensure compliant documentation, reduce audit risk, and achieve revenue and margin integrity for overall strong financial performance.
List Price: $119 | Member Price: $99

CDI AND CODER COLLABORATION: MAXIMIZING DOCUMENTATION QUALITY AND REVENUES
Andy Tolep, CCS, CCDS, CPC, HIM
Product Code: AUDA092016 | CEUs: 2
As the US healthcare system transitions to ICD-10, it will be critical for CDI specialists and coders to work collaboratively. ICD-10 is a new language for both providers and payers, and the two teams—CDI specialists and coders—will work most effectively by mastering ICD-10 documentation and coding rules together. Facilities that already have strong CDS-coder collaboration put themselves in a position to maximize clinical documentation quality and revenues in an ICD-10 environment. A thorough ICD-10 education will empower CDI staff to educate providers to ensure clinical documentation quality and appropriate reimbursements. This webinar explores the unique benefits of this collaboration as the two teams move forward.
List Price: $119 | Member Price: $99

CDI AND ICD-10 DOCUMENTATION TIPS
Gloryanne H. Bryant, BS, RHIA, CDIP, CCS, CCDS
Product Code: AUDA051215 | CEUs: 2
ICD-10-CM is a new and better code set, and thus there are enhancements to learn and prepare for implementation. This webinar provides a look at the documentation specifics within the ICD-10-CM code set. In addition, AHIMA has prepared a new ICD-10 Documentation Tips resource, which will be reviewed with the audience. Learning the improved documentation terminology will be key to your success for both CDI and coding.
List Price: $145 | Member Price: $125

CLINICAL DOCUMENTATION IMPROVEMENT STEPPING BEYOND FEE FOR SERVICE
Gloryanne H. Bryant, BS, RHIA, CDIP, CCS, CCDS
Product Code: AUDA022415 | CEUs: 2
CDI has traditionally been focusing on Fee for Service (FFS) payment methodology and patient population for program success. Capturing patient severity and acuity is critical to quality scores and outcomes measures. This webinar takes a look at other elements and systems like APR-DRGs and Risk Adjustment used to measure and consider for your CDI success.
List Price: $145 | Member Price: $125

CODING AND CLINICAL DOCUMENTATION IMPROVEMENT WITH A TECHNOLOGY BACKBONE
Katherine Lusk, MHSM, RHIA, and Launa Fackrell
Product Code: AUDA033115 | CEUs: 2
Here comes the technology! CDI specialists can dramatically enhance productivity by introducing technology to their CDI responsibilities. Using a multi-faceted and disciplined approach that includes leveraging data analytics, Natural Language Processing technology, electronic record optimization and EMR documentation guidelines, CDI Specialists can successfully impact physician documentation practices within the EHR in a staffing neutral environment.
List Price: $145 | Member Price: $125

FOR MORE INFORMATION ON TRAINING YOUR STAFF AND GROUP DISCOUNTS, PLEASE CONTACT SALES@AHIMA.ORG.
EVOLVING AND ADAPTING: THE CHANGING ROLE OF THE CDI PROFESSIONAL
Melanie Endicott, MBA/HCM, RHIA, CHDA, CDIP, CCS, CCS-P, FAHIMA
Product Code: AUDA061615 | CEUs: 2
Over the past decade the CDI profession has changed immensely and the CDI professional must find ways to keep up with this ever-changing industry. No longer is CDI only focused on finding MCCs/CCs on Medicare patients in the acute care inpatient setting. It is moving into other areas of healthcare and focusing on all payers and patient types. This webinar focuses on the adaptive role of the CDI professional.
List Price: $145 | Member Price: $125

PHYSICIAN ENGAGEMENT FOR CLINICAL DOCUMENTATION IMPROVEMENT
Deanne Wilk, BSN, RN, CCDS, CCS, AHIMA-approved ICD-10-CM/PCS Trainer
Product Code: AUDA070915 | CEUs: 2
One area that has seen the biggest change in ICD-10-CM is coding injuries and the external cause codes. This session will provide a review of the many guidelines in chapter 19 and 20 of ICD-10-CM. The correct use of seventh characters will be stressed. Many examples will be presented and discussed for application of the guidelines. Cases will be presented in this webinar to challenge the participant to take a closer look at the documentation and use critical thinking skills to select the appropriate code.
List Price: $145 | Member Price: $125

THE PRE-BILL REVIEW: DIRECTING THE WHEELS OF CHANGE
James Fee, MD, CCS, CCDS
Product Code: AUDA072315 | CEUs: 2
In healthcare environments where resources are limited, quality-driven initiatives are both critical and overwhelming. The importance of a customized program requiring careful study of physician documentation is imperative for success. This webinar bridges the gap between an effective pre-bill process, quality measures and quality documentation.
List Price: $145 | Member Price: $125

THE TOP 20 ICD-10 DOCUMENTATION ISSUES THAT CAUSE DRG CHANGES
Donna Smith, RHIA
Product Code: AUDA030315 | CEUs: 2
When you know about existing issues, you can be more proactive in dealing with them. This presentation outlines the top 20 ICD-10 documentation issues that cause DRG changes. First, the reasons for MS-DRG changes will be outlined, including changes in coding guidelines, increased and decreased specificity of ICD-10, changes in diagnostic description meaning, changes in MCC/CC designators, and changes attributable to ICD-9 or ICD-10 coding errors. Next, the presentation will examine each of the top 20 documentation issues in detail, providing the cause and mitigation for the shift, and the resulting outcome.
List Price: $145 | Member Price: $125

USING CDI PROGRAMS TO IMPROVE QUALITY REPORTING
Helen Chrouro, RHIT, CHDA, CSS
Product Code: AUDA031915 | CEUs: 2
A key focus of clinical documentation improvement (CDI) programs is to identify deficiencies in clinical documentation and develop methods to ensure the complete and accurate capture of a patient’s clinical encounter. Healthcare records that are inaccurate or incomplete will compromise clinical decision support, accurate reimbursement, and quality of care reporting. CDI programs have focused on improving the accuracy of coding and reimbursement. This webinar looks at the changing face of these programs and explains how to learn from the challenges and the successes.
List Price: $145 | Member Price: $125

TOOLKIT
CLINICAL DOCUMENTATION IMPROVEMENT TOOLKIT
CDI Taskforce
Product Code: ONB201016
Regardless of the many external factors influencing healthcare organizations and providers today, clinical documentation improvement (CDI) has become a survival tactic in a sea of regulations, fraud and abuse activities, and accurately assigning classification codes. CDI is the bridge that connects clinical care providers to both coding professionals and external bodies such as the Centers for Medicare and Medicaid (CMS) quality reports.
List Price: $99.95 | Member Price: Free
AHIMA is continuously monitoring the industry and the needs of our members, therefore schedules and programs are subject to change in accordance with changing industry priorities and member needs. Please refer to ahima.org for current programs and schedules.