

2017 PRIOR APPROVAL GUIDE

(Updated April 2017)



American Health Information Management Association (AHIMA)

Prior Approval Guide

SECTION 1: PURPOSE OF THE PRIOR APPROVAL PROGRAM

The purpose of the American Health Information Management Association's (AHIMA's) Prior Approval Program is to recognize external organizations as continuing education unit (CEU) providers that have met the Association's standards. This guide provides information on the benefits, standards, and requirements of the Prior Approval Program. It also lists AHIMA's procedures for monitoring approved programs and provides application information.

AHIMA's prior approval process is voluntary and is initiated by the program sponsor requesting approval. Prior approval status does not constitute endorsement of a program sponsor or its materials. The program sponsor is responsible for maintaining the content and quality of any program that has received prior approval. Program sponsors may request prior approval of CEUs for program attendees holding any of the following credentials:

- Registered Health Information Administrator (RHIA)
- Registered Health Information Technician (RHIT)
- Certified Coding Associate (CCA)
- Certified Coding Specialist (CCS)
- Certified Coding Specialist—Physician-based (CCS-P)
- Certified in Healthcare Privacy and Security (CHPS)
- Certified Health Data Analyst (CHDA)
- Certified Documentation Improvement Practitioner (CDIP)
- Certified Professional in Health Informatics (CPHI)
- Certified in Healthcare Privacy (CHP)¹
- Certified in Healthcare Security (CHS)¹
- Certified Healthcare Technology Specialist (CHTS)
- AHIMA Approved ICD-10 Trainer

AHIMA does not grant prior approval for review courses, study seminars, or similar offerings.

SECTION 2: EDUCATIONAL OBJECTIVES AND OBLIGATIONS

Program sponsors should:

- Provide AHIMA credential holders with quality programs in which attendees can report and receive AHIMA CEUs.
- Provide clearly stated and measurable learning objectives. The number of objectives will be appropriate for the type and length of the CEU activity.
- Provide qualified personnel who meet AHIMA's faculty and personnel requirements.
- Ensure that content and instructional methods are appropriate for the learning outcomes.

SECTION 3: BENEFITS OF PRIOR APPROVAL PROGRAM

Recognition

- Prior approved programs are recognized by AHIMA, HIM professionals, coders, and employers as programs that have met AHIMA's requirements for continuing education.

Marketing Opportunities

- Sponsoring organizations will communicate the value of the approved program to more than 101,000 health information professionals
- Use of AHIMA's Prior Approval Program logo (according to AHIMA specification), which may be added to marketing and other activities promoting your approved program.
- Confirmed numbers of CEUs
- Ease of submission of CEUs for attendees

SECTION 4: THE GENERAL APPLICATION PROCESS²

To apply for prior approval, applicants should:

1. Read through the entire Prior Approval Guide,
2. Fill out the prior approval application online through the Web-enabled prior approval portal if paying by credit card,
3. Include all required supporting documentation and fees.

Only organizations who have been previously registered as a Prior Approval organization will be able to utilize the online program submission portal. External organizations submitting a Prior Approval application for the first time will need to have a company AHIMA ID created and pay the initial annual fee in order to be registered as a Prior Approval organization. Please contact PriorApproval@AHIMA.org to have an AHIMA ID created and to receive further information on initial annual fee payment.

AHIMA Prior Approval website: www.ahima.org/certification/priorapprovals

Incomplete applications will not be processed and will be returned to the program sponsor. Retroactive prior approval must include the date the CEU certificate is issued to participants. This date must be after the program has received approval.

Anticipate a four-week turnaround time from the date the prior approval application and supporting documentation is received.

After the application is approved, the sponsoring organization will receive a final decision letter containing either an explanation for program denial or confirmation of approval containing the number of CEUs the program has been approved for and the dates through which the program is valid.

¹ Although AHIMA no longer offers these credentials, individuals holding these credentials continue to maintain their CEUs with AHIMA.

² Component state associations (CSAs) are not required to apply for prior approval and may use AHIMA's approved advertising statement for CSA-sponsored programs. Prior approval is mandatory for the following types of programs: Internet educational offerings, independent and home study programs, self-assessment activities, and distance education programs (including non-live audio seminars).

An application is required for each individual program which offers CEUs. If a program is comprised of multiple modules/lessons/sessions, only one application is required so long as they are not offered individually.

Applications with payment by check can be mailed or faxed:

Attn: Prior Approval/Tameka Tanner
AHIMA
Dept. 77-2735
Chicago, IL 60678-2735
Fax: (312) 233-1413

You may also call (312) 233-1082, or e-mail:
PriorApproval@AHIMA.org with any questions.

SECTION 5: AHIMA'S EVALUATION PROCESS

AHIMA will evaluate the proposed program for its content, quality, and the appropriateness of the following key characteristics:

- Title
- Instructor qualifications
- Agenda
- Core content area
- Course overview and delivery
- Target audience
- Total number of CEUs

AHIMA will deny approval to programs that fail to meet AHIMA requirements and expectations. If additional documentation is requested, the materials must be submitted within three weeks of the date requested to PriorApproval@AHIMA.org. Programs that fail to submit the requested documentation within the three week time frame will be automatically denied. No refunds will be issued for denied programs.

Any changes to the program pertaining to additional program dates and locations, faculty, program title, program content, or program length will be subject to a \$50 revision fee.

SECTION 6: TEACHING METHODS

The program **must meet one or more of the teaching methodologies** as presented below:

- Face-to-face seminar or workshop
- Face-to-face lecture or facilitated discussion
- Audio seminar
- Independent study or self-assessment
- Synchronous web-based instruction
- Asynchronous web-based instruction

SECTION 7: REQUIRED SUPPORTING DOCUMENTATION

In addition to the application, AHIMA requires the following documents to be submitted as applicable:

1. Marketing materials
2. Program agenda including timeline
3. Evaluation
4. Outcome assessment or self-assessment
5. Speaker/faculty/developer requirements
6. Online course requirements

1. **Marketing Materials**

The program sponsors must send a copy of the marketing brochure or flyer, certificate of participation, or a draft of the texts at the time in which the initial application is submitted for prior approval to AHIMA's Certification Department

Once approved, the program may be advertised by using the following statement: "This program has been approved for continuing education units (CEUs) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its program sponsor."

AHIMA does not provide pending approval for programs that have not completed the approval process. No advertising or documentation in this regard will be allowed.

Prior approved programs can use AHIMA's prior approval program logo. Providers will be sent more information upon program approval.



2. **Program Agenda Including Timeline**

The program agenda should include, at minimum, an hour-by-hour content outline. Detailed PowerPoint slides or transcripts may take the place of the program agenda.

3. **Evaluation**

Attendees must be given the opportunity to evaluate the content and overall educational experience of the program. A sample copy of the evaluation should be included.

Please note, evaluations should not be sent to AHIMA. Evaluations are for program sponsor use only.

4. **Outcome Assessment or Self-Assessment**

An outcome assessment must be performed for Internet educational activities and independent study programs to ensure learning objectives were achieved.

The self-assessment activity must be a diagnostic tool that: (1) identifies areas of strength and weakness in relation to current HIM practice (2) provides suggested resources for follow-up and (3) provides evidence of completion.

Please submit the self-assessment activity in its entirety.

5. **Speaker/Faculty/Developer Requirements**

Please submit instructor resume, including credentials. Faculty and personnel should: (1) be competent in the subject matter, (2) present materials based on current information, (3) be knowledgeable and skilled in instructional methods appropriate for adults, and (4) utilize instructional methods appropriate to meet educational objectives and learning outcomes. **For content related to clinical coding, program faculty must possess an AHIMA credential or be an active AHIMA Approved ICD-10 Trainer.** Please note: any changes to the program or its faculty after approval has been granted must be reported to AHIMA.

6. **Online Course Requirements**

Online programs must provide AHIMA with temporary access instructions to review and verify the CEU amount requested on application is consistent with AHIMA's CEU calculation requirements. To view CEU calculation guidelines, please refer to Section 8: Calculating the Number of CEUs.

Certificate

Program sponsors are encouraged to provide attendees with certificates or statements verifying attendance. The certificate or verification statement should include: name of the attendee; title of the program conducted; date of the program; number of hours approved; and the signature of the program chairperson. The title of the program, which will be presented on the certificate, must match the program title submitted on the Prior Approval application.

The certificate should not list AHIMA as the education provider or provide AHIMA's contact information. The appropriate text on certificates should read as follows:

“This program has been approved by AHIMA for X CEUs.”

SECTION 8: CALCULATING THE NUMBER OF CEUs

Total Number of Continuing Education Units (CEUs) Requested:

CEUs are awarded as follows:

- Calculation of CEU hours is based upon educational contact hours. 0.5 CEUs are given for every thirty (30) minutes of attendance or participation that is fixed in length. A session lasting 30 to 44 minutes will be accepted for 0.5 CEU credits; a session lasting less than 30 minutes will not be accepted for CEU credit. CEU credit should be calculated according to the following method:

Session Length	CEU Credit
0–29 minutes (0-0.49 hrs)	0 CEUs
30–44 minutes (0.50-0.74 hrs)	0.5 CEUs
45–89 minutes (0.75-1.49 hrs)	1 CEU
90–104 minutes (1.50-1.74 hrs)	1.5 CEUs
105–149 minutes (1.75-2.49 hrs)	2 CEUs
150–164 minutes (2.50-2.74 hrs)	2.5 CEUs
165–209 minutes (2.75-3.49 hrs)	3 CEUs

- All educational sessions occurring within one program should be tallied up in total. Exclude any ineligible portions listed below.
- CEU hours are awarded for the number of contact hours actually attended. For example, an individual who attends two hours of a five hour program is eligible for only two continuing education hours.
- For educational activities that are not fixed in length, the program sponsors must employ an empirical process for calculating the number of equivalent clock hours for the activity. For example, the program sponsor could have a sample of individuals similar to the target audience complete the educational activity and outcomes evaluation. Then average the number of hours it took the individuals to complete the activity.
- Any program exceeding 30 CEUs will require additional in-house review by AHIMA.

- Online programs must provide temporary access instructions for programs(s) review. PowerPoint presentation(s) CEU calculation is 1 slide = 2 minutes. Article(s) CEU calculation is 1 page = 5 minutes (articles are only to be included in CEU calculation if it is the sole instructional method used and an outcome assessment or self-assessment is provided upon completion of the program).
- Conferences which provide concurrent program instruction must include each session in CEU calculation.
- Time taken within course for registration, greetings or welcome, breaks, meals, quizzes, tests, exams, homework, or other events unrelated to the educational agenda must not be included when calculating CEU hours.

SECTION 9: FEES AND CONTRACT

Program sponsors are required to pay two fees in order to receive prior approval. These fees consist of an “annual” component that is required once a year, and a “per CEU” component based on the number of CEUs submitted.

Annual Fee

Nonprofit organizations: \$250

For-profit organizations: \$500

The annual fee is valid for 365 days.

It is the responsibility of the program sponsor to submit the annual fee. AHIMA will not notify program sponsors regarding expiration of their annual fees, nor will program sponsors be billed by AHIMA in this regard.

Program Fee

Program fees are paid on an annual basis and are valid for 365 days after the approval date of the program application or 365 days from program start date if within 30 days of approval.

Nonprofit Charge: All programs are charged a minimum of \$125 per program regardless of whether or not the program sponsor is applying for less than 5 CEUs. Each additional CEU over 5 CEUs is charged at a rate of \$25 per CEU. Partial CEUs will round up to the price of the nearest full CEU. For example, a program approved for 6.5 will be charged a total of \$175.

For-profit Charge: All programs are charged a minimum of \$250 per program regardless of whether or not the program sponsor is applying for less than 5 CEUs. Each additional CEU over 5 CEUs is charged at a rate of \$50 per CEU. Partial CEUs will round up to the price of the nearest full CEU. For example, a program approved for 6.5 will be charged a total of \$350.

Programs submitted less than four weeks prior to the program start date must be expedited in order to guarantee program confirmation of the program before that date. To expedite the reviewing time for a program, complete and return the paper application, including the \$75 expediting option, by e-mail to PriorApproval@AHIMA.org or fax to (312) 233-1413. Expediting a program will reduce the turnaround time to one to two weeks. To expedite an application that was previously submitted online, e-mail or fax the company name, submitted program title, and expediting payment to the contact information above.

Contract for Prior Approval:

Carefully read the contract for Prior Approval of Continuing

Education Program before signing. Applications received without a printed name, title, signature, and date will be returned.

Web applications without an acknowledgement of the terms of use will not be processed.

SECTION 10: PROGRAM VALID DATES, EXPIRATION, REVISIONS, AND CANCELLATION

Each program is valid beginning with the date the program is first made available as an approved program. Programs expire upon the passing of 365 days. After 365 days, sponsoring organizations may renew a program's approval by resubmitting a new application and payment.

Approval is only valid for the dates and locations originally applied for. Programs which are cancelled within 14 days of receiving the program review confirmation will incur a \$75 processing fee, and the remaining amount will be refunded in the same fashion in which payment was made. Programs which are cancelled after 14 days of receiving the program review confirmation will not be refunded.

Online programs that are continually available throughout the year may include the start/end date as the full time frame the program is available (e.g. June 1, 2014 to June 1, 2015) beginning on the program start date. Face-to-face programs must include all dates and locations in the application.

SECTION 11: AHIMA'S MONITORING AND FOLLOW-UP PROCESS

AHIMA will monitor approved programs on an ongoing basis to ensure the requirements are consistently met. Some of the ways program sponsors are monitored are as follows:

- Attendees at approved programs are encouraged to contact AHIMA if they feel a program sponsor is not meeting the requirements for prior approval.
- AHIMA may periodically request program attendance information to gather feedback from attendees on the program sponsor's performance in covering the requirements for prior approval.
- AHIMA may also request program materials or copies of certificates of attendance, or may attend activities to audit the efficacy of each program.

Complaints or Concerns

If AHIMA receives a complaint, or identifies through monitoring that a program sponsor may not be in compliance with the requirements for prior approval, AHIMA will contact the program sponsor in writing to request documentation for its investigation and request a response to the complaint or concern within thirty (30) days.

AHIMA reserves the right to conduct an audit of the learning event or of the organizational facility. If an audit is conducted, the organization agrees to cover all costs associated with conducting the audit.

Probation

If the program sponsor fails to submit the documentation and a response to AHIMA within 30 days, the program sponsor will immediately be notified in writing and placed on probation for a

ninety (90) day period.

Outcome of Probation

If a program sponsor sends AHIMA the appropriate documentation and response, and the investigation reveals that the complaint or concern does not support noncompliance, AHIMA will notify the program sponsor and remove the probationary status.

If a program sponsor does not comply with AHIMA's request for investigatory documentation or the documentation does not support compliance with the requirements for prior approval, the program sponsor will be notified via secure mail, of revocation of prior approval status at the end of the 90-day probation period. The annual fee will not be refunded.

SECTION 12: HIIM DOMAINS

HIIM Professional Domain Definition: HIIM improves the quality of healthcare by ensuring the most timely and accurate information is available to make any healthcare decision. HIIM professionals manage healthcare data and information resources. The profession encompasses services in planning, collecting, aggregating, analyzing, and disseminating individual patient and aggregate clinical data. It serves the following healthcare stakeholders: patients, providers, patient care organizations, research and policy agencies, payers, and other healthcare-related entities.

1. Technology

Application of existing and emerging technologies for the collection of clinical data, the transformation of clinical data to useful health information, and the communication and protection of information on analog (for example, paper or analog photographic film) or digital media (for example, magnetic tape, optical disk, CD, or DVD).

Topics include, but are not limited to:

- Electronic health records (EHRs)
- HIIM software applications (encoders, patient information management systems, and chart management, CDI systems, and electronic queries.)
- Personal health record (PHR)
- Health information exchange (HIE)
- Speech recognition

2. Management Development

Application of organizational management theory and practices in addition to human resource management techniques to improve departmental adaptability, innovation, service quality, and operational efficiency.

Topics include but are not limited to:

- Project management
- Training and development
- Work design
- Employee hiring and retention
- Effective communication

3. Clinical Data Management

Applications and analysis of quality and clinical resources ap-

appropriate to the clinical setting. Includes database management, clinical documentation improvement, and coding compliance using CPT, ICD-10-CM, or other specialized coding systems within the prospective or payment system to ensure quality and cost effectiveness of the rendered services (for example, data integrity, quality of documentation, and clinical efficiency).

Topics include, but are not limited to:

- ICD-10-CM/CPT/HCPCS
- Prospective payment systems (for example, DRG and APC)
- Registries
- RAC

4. Performance Improvement

Development and application of quality processes to ensure quality data is generating consistent, timely quality information. Developing systems that are flexible and adaptable in a constantly changing healthcare environment (for example, e-HIM®, regulatory changes, and new technology.)

Topics include, but are not limited to:

- Outcomes data management
- Revenue cycle management
- Clinical practice guidelines
- Remote coding or computer-assisted coding

5. External Forces

Study of regulatory requirements and the development of appropriate compliance initiatives for policies, procedures, protocols, and technology for hospitals, specialty facilities, and other healthcare providers. Includes the development of systems (for example, e-HIM®) to implement required practices for the Joint Commission and other accrediting bodies and federal and state rules and regulations (for example, The Centers for Medicare and Medicaid Services, and HIPAA).

Topics include, but are not limited to:

- OIG work plan

- HIPAA
- Compliance
- Legal or regulatory update
- EHR certification and incentive programs

6. Clinical Foundations

Understanding of human anatomy and physiology; the nature of disease processes; and the protocols of diagnosis and treatment of major diseases to include common drugs and laboratory and other tests used for the diagnosis and treatment of disease. Practice the ability to apply this knowledge to the reading, coding, and abstracting of medical information to support quality patient care and associated databases.

Topics include, but are not limited to:

- Pathophysiology
- Pharmacology
- Clinical intervention
- Diagnostic and laboratory testing
- Telemedicine

7. Privacy and Security

Understanding and application of current healthcare regulations that promote protection of medical information and the electronic transmission of health information. Acting as the patients' advocate, helping them understand their rights in regard to protected health information on any applicable analog or digital medium.

Topics include, but are not limited to:

- Release of information
- Confidentiality
- Personal health information
- Security risk assessment
- Security audit
- Privacy risk assessment



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