Bridging HIM's Disconnect with IT: Build Relationships First, Tackle Differences Later

By Mary Beth Haugen, MS, RHIA, and Amy Richardson, RHIA, CHDA

Consider the following fictional, and perhaps all-too-familiar, conversation between health information management (HIM) department staff and health information technology (IT) staff:

Chief Information Officer (CIO) to HIM Director: “Were you aware that last month we implemented a documentation system for the cardiologists?”

IT Analyst to HIM Director: “This clinical application was not designed to print documents.”

HIM Director to CIO: “The requirements for electronic signature are stated in the CMS regulations, the medical bylaws, and hospital policies and procedures.”

Data Integrity Analyst to IT Analyst: “ICD-10 codes flow to eight different systems. Any incorrect code will need to be updated in all eight systems. How do I fix it?”

HIM professionals know it and CIOs confirm it—there are multiple communication disconnects between HIM and IT departments. HIM directors sometimes struggle to understand the CIO’s perspective, and vice versa, resulting in tactical misfires where nothing is resolved or clarified. Furthermore, important healthcare initiatives such as population health, accountable care, and information governance (IG) continue to blur the lines of responsibility between HIM and IT.

Some facilities make the mistake of assuming new projects will automatically bring HIM and IT together. However, savvy leaders know that focusing on the relationship itself is the first step to cleaner communication and a stronger alliance. By taking the time to build relationships with CIOs and their teams, HIM professionals build natural pathways for collaboration.

Exploring and understanding the most common barriers between HIM and IT is an important step in bringing HIM and IT closer together. Five CIOs from hospitals across the country anonymously share their insights and provide guidance to help HIM professionals bridge the gap.

Is There a Healthy Relationship Between HIM and IT?

Not every organization experiences a chasm between HIM and IT. However, it’s relatively easy to determine whether your facility falls into this category. Consider the following questions:

1. Is HIM invited to participate in strategic decision making—such as an electronic health record (EHR) system implementation, system upgrades, data integrity, and HIPAA compliance—in your organization?
2. Does your IT department regularly solicit advice and input from HIM?
Does IT understand basic HIM principles and challenges?

If you answered “no” to any or all of these questions, there’s a good chance you might need to spend more time cultivating a relationship with IT. Once developed, this relationship serves as the foundation for current and future technology implementations and can help ensure that HIM’s voice is heard.

**Debunking Common HIM Myths**

Breaking down silos between HIM and IT requires open and honest communication. Start a conversation with the CIO by dispelling these common HIM myths:

- HIM speaks a different language (i.e., system slowness versus downtime, storage needs versus space, and data governance versus information governance).
- HIM views data differently (bits and bytes versus information).
- HIM represents payers, auditors, or the government (Truth: HIM represents the organization, patients, and providers).
- The organization has transitioned to an EHR, so there is no more need to print, scan, or define a legal health record. (Truth: Organizations still need the ability to print and scan information. The legal medical record must be defined and retention laws met).
- When converting historical data, the organization doesn’t need it all. (Truth: There is key data that is required to be retained).
- HIM professionals are low-tech. (Truth: The HIM profession is becoming incredibly tech-savvy through increased use of data analytics and more use of health IT systems).

**Why Setbacks Occur**

As in any relationship, misconceptions and assumptions are barriers to progress. The goal is to address these barriers through increased communication and knowledge sharing. The first step is to debunk common myths.

For example, HIM professionals often believe IT departments have no desire to understand HIM’s role within the organization and would prefer to take over HIM’s role completely. The authors of this article uncovered similar misconceptions of HIM through their series of interviews with CIOs, including:

- HIM is complacent and resistant to change.
- HIM lacks “big picture” views.
- HIM doesn’t understand good data practices and cleanup.
- HIM is predisposed to operational rather than strategic thinking.

In addition to false assumptions, individuals’ personalities often serve as barriers to success. Without taking the time to get to know someone’s individual communication style and learning preferences, efforts toward collaboration may be futile. For example, CIOs who tend to be more hands-on and detail-oriented may prefer to read narrative descriptions and have lengthier conversations with HIM staff. If a CIO is less hands-on, consider communicating briefly with only bullet point highlights.

**Put Your Best Intentions Forward**
To build a bridge between HIM and IT, both disciplines must be willing to put their best intentions forward. For a CIO, this means being willing to remain open to HIM’s expertise. HIM directors of today are more than custodians of health records. They are strategic thinkers ready to help change processes and provide valuable input for strategic decisions.

HIM and IT relationships flourish when CIOs share their knowledge about IT challenges and principles with HIM counterparts. IT’s ability to support HIM during times of physician resistance to technology is another must-have for stronger IT-HIM collaboration. Finally, successful CIOs always remain flexible and non-adversarial with departmental directors, including HIM.

Likewise, HIM must be willing to remain open to IT’s expertise, share knowledge, help interpret information during data analysis, and think strategically when planning for new technology.

To strengthen relationships across the organization, HIM professionals should also be prepared to express thoughts and opinions even when opposition is strong, remain current on key healthcare industry topics and trends, and support IT’s efforts to establish budgets—including what will be necessary from a technical/system standpoint.

**Straight from the CIO**

Several CIOs told the authors that above all else, HIM must be present and knowledgeable. Consider the following advice provided during these interviews:

- “Speak up about topics that are relevant, such as meaningful use [MU]. Help articulate the meaning of the data and how it affects other areas of the organization. For example, how can we qualify for MU? What should we use as numerators and denominators? With HIM’s help, I was able to identify the need for a meaningful use coordinator position in our organization. This person reports to HI.”
- “Insert yourself without barging in.”
- “Use your knowledge so we can create more accurate reports. HIM is better equipped to answer data questions, status questions, and coding questions.”
- “Be reliable, flexible, and willing to do whatever it takes to achieve strategic goals.”
- “Get involved at the legal level to help us identify compliance risks.”
- “Define your role going forward. There is a role for HIM, but it may be more focused than what it is today.”
- “Be responsible for your own destiny. HIM needs to morph into something more than its current role.”

These final two bullets reiterate a common HIM mantra—where will HIM departments be tomorrow? What is HIM’s role in this new world of IG?

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IG Could Bring HIM, IT Closer Together

As a profession, HIM must continually evolve and its professionals must articulate their value. IG provides many opportunities to showcase HIM professionals’ expertise. The Information Governance Principles for Healthcare™—transparency, protection, compliance, accountability, integrity, availability, retention, and disposition—are the same principles on which HIM is built; only the verbiage and job titles have changed.

Savvy HIM professionals are shifting into roles and titles such as IG executive, IG program director, data governance analyst, master data management analyst, chief health information officer, chief data officer, and others. While IT generally oversees the systems management process of keeping data clean, HIM’s knowledge is required for the people/process aspects of information integrity—ensuring quality is maintained from data creation through its entire life cycle.

Begin to establish a united front with IT by focusing on these three steps:

1. Clearly define HIM and IT roles.
2. Distinguish between information governance and data governance.
3. Ensure end users—including patients, providers, payers, and auditors—have proper access to data and can rely on its interpretation.

As HIM professionals move forward and face new opportunities for IT collaboration, always remember the value HIM brings to any organization. If an HIM professional finds themselves in the unfortunate position of having to defend their seat at the decision making table, simply raise a hand and say, “I am an HIM professional. This impacts my world, and I will participate.”

Mary Beth Haugen (Marybeth@thehaugengroup.com) is president and CEO and Amy Richardson (Arichardson@thehaugengroup.com) is vice-president at Haugen Consulting Group.

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