



SEM HIMA

“Health Information Management Vendor Forum”

Saturday, July 26, 2008

7:30 am-Registration & Refreshments

8:00 am – 12:00 pm Program presentation

Oakwood Hospital & Medical Center

Kalman Auditorium – 18101 Oakwood Blvd., Dearborn, MI 48124

***For CFO’s, COO’s, HIM Directors, Revenue Specialists, Coders, & other HIM Professionals**

Agenda Summary

How Michigan Healthcare Improvement (MHI) Can Help HIM Improve Outcomes and Revenue

Dawn Hall and Barbara O’Connell – MHI Partners

An explanation of how HIM can help a hospital improve outcomes and revenue and how MHI methods can help achieve them. Presentation includes a basic step by step guide of the MHI process for finding opportunities, data gathering, analysis, fact finding tools, comparison, integration, and recommendations.

Auto HIM - TeamNotes/TeamQuery - Todd Johnson, President of Salar, Inc. and Gwen Hitt, Managing Director of CSG Health Solutions, LLC

“TeamQuery provides the opportunity to review documentation in real time and send queries to physicians about the quality of the documentation. Studies show a 12% improvement to the case mix index by using TeamQuery and TeamNotes”

Going Paperless? Lessons learned and what you need to know. – Charlie Robinson, RHIT, CCS-P iDoc Implementation Manager for Care Tech Solutions, Inc.

Charlie will share his experience and those of his colleagues in helping HIM department’s transition from a paper based department to paperless

Return on Investment for Electronic Health Records - Rose M. Harr, CEO of BlueWare Inc.

Electronic Health Records have several intangible elements. It is imperative that we quantify ROI at each and every level; commissioning care, care provision and patient experience. Hear a real world and tactical approach to improving the bottom line, and improving the healthcare of large communities and countries.

Cost: \$20.00 Member \$25.00 Non-member \$8.00 Student CE’s: 4 CE credits

Pre-registration by mail: Mary Mills
P.O. Box 634
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Contact number: 734-838-0234
MillsM@DocSolutionsLLC.com
www.SEMHIMA.org

Attendee Registration: **Please make checks payable to: SEMHIMA**

Check all that apply: SEMHIMA Member Non-member Student

Name: _____

Address: _____

Phone # Home: _____ Work: _____

E-mail Address: _____

Method of payment:

Check # _____

Amount: \$ _____

(your cancelled check will be your receipt)

Cash \$ _____

Cash receipt required?

Yes No