



CAHIIM[®]

**ACCREDITATION
MANUAL**

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Council for Higher Education Accreditation (CHEA) Recognition of CAHIIM

The Council for Higher Education and Accreditation (CHEA), a national advocate and institutional voice for self-regulation of academic quality through accreditation, is an association of 3,000 degree-granting colleges and universities and recognizes 60 institutional and programmatic-accrediting organizations.

For more information about CHEA, go to chea.org.

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Purpose

Accreditation is a tool for continuous program planning and evaluation. The accreditation process is designed to provide a framework for the ongoing collection of data, periodic review, evaluation, and reporting of results.

The purpose of this manual is to provide a definitive reference for managing the accreditation process. It describes the process requirements, policies and procedures for programmatic accreditation of the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM).

I. CAHIIM Accreditation

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This section provides an overview of CAHIIM Accreditation and discusses the value of accreditation along with the mission, vision, and values of CAHIIM.

Overview

CAHIIM strives to provide the public with effective and consistent quality monitoring of academic programs in Health Information Management (HIM) and Health Informatics (HI) through the maintenance of accreditation policies and processes. It provides tools for assessing continuous quality improvement through partnerships with colleges and universities, a voluntary peer review process, and annual program monitoring. These various means help to continuously improve the quality of HIM and HI education to meet healthcare workforce needs.

As a 501(c)(3) not-for-profit organization, CAHIIM accredits associate and baccalaureate degree programs in HIM and master's degree programs in the HI and HIM professions in the United States.

When a program is accredited by CAHIIM, it means that it has voluntarily undergone a rigorous review process and has been determined to meet or exceed the Standards set by the CAHIIM Board of Directors.

Value of Accreditation

The value of accreditation is the assurance to the public, to the profession, and to the student that a program provides an education that prepares a student to join the HI and HIM workforces. (See [Appendix](#))

Mission

CAHIIM's Mission is to provide innovative leadership that drives enhanced workforce competence by ensuring educational excellence.

Vision

Our Vision is a new era in innovation and educational excellence that supports public trust and workforce competence.

Values

CAHIIM's core Values are

- Commitment
- Innovation
- Integrity
- Respect

These values are ingrained in our accreditation program.

II. Governance

Last Revision: 10-16-2020

CAHIIM's accreditation practice is governed by the Board of Directors who is responsible for awarding program accreditation status. The Board reviews and approves Accreditation Standards, Policies, and Procedures. CAHIIM has two Member partner professional organizations to ensure curriculum Standards contain the content and competencies required by that profession.

Two Accreditation Councils, one for Health Information Management (HIMAC) and one for Health Informatics (HIAC), conduct quality reviews of academic programs, including visits, and make program accreditation recommendations to the Board.

CAHIIM Board of Directors

The CAHIIM Board of Directors consists of ten Directors and two public members. Ex-officio members consist of a Chair from each Accreditation Council and the CAHIIM CEO. The Board ensures effective management of CAHIIM's operations; provides fiduciary/legal responsibility for the corporation; appoints Accreditation Council members in accordance with established criteria; abides by the core values and code of conduct for CAHIIM decision-makers; and appoints Board officers annually.

The Board reviews and acts on all accreditation recommendations from the Accreditation Councils. The Board supports research, training, and publications related to accreditation achievements and the maintenance and improvement of the quality and outcomes of academic programs through the accreditation process. The Board of Directors meets at least quarterly, with its CAHIIM annual meeting held in the fourth quarter of each year.

CAHIIM Accreditation Councils

The Accreditation Councils make recommendations based on program reviews through established processes. They review and revise the Accreditation Standards (at least every five years) in coordination with the Board of Directors. They abide by the core values and code of conduct for CAHIIM decision-makers and contribute to the CAHIIM year-end summary. The Councils oversee the Peer Reviewers by establishing and maintaining a set of qualifications for Peer Reviewers, approving appointment of new Peer Reviewers, and reviewing site visit reports.

CAHIIM Staff and Consultation

The CAHIIM accreditation staff provide programmatic support to program directors, academic faculties, and administrators. They assist programs by answering questions and providing consultation regarding Accreditation Standards and the accreditation process for programs seeking initial accreditation and continuing program accreditation. They counsel prospective and CAHIIM-accredited programs on issues related to curriculum and accreditation expectations. CAHIIM staff oversee and administer the processes of applying for accreditation and serve as the point of contact in all matters related to accreditation of individual programs.

III. Public Disclosures

Last Revision: 10-16-2020

This section identifies the information that CAHIIM and the accredited programs will provide to the public.

CAHIIM

CAHIIM provides the official listing and summary information of accredited programs in the U.S. The public may also review the details of an accredited program's last accreditation review and status at the following URL <https://www.cahiim.org/programs/program-directory>.

Accredited Programs

CAHIIM Accreditation Standards require that all accredited programs make available to the public the following program information. The CAHIIM office will notify the program if any statements are found to be misleading or inaccurate, and the program may be placed on Administrative Probationary Accreditation if the misleading or inaccurate statements are not corrected. Required information must be published and accessible to all applicants and enrolled students.

The program and its sponsoring educational institution must accurately represent

- Their location and accreditation status.
- Admissions policies and procedures.
- Policies on advanced placement, transfer of credits, and credits for experiential learning.
- Number of credits required for completion of the program.
- Tuition/fees and other costs required to complete the program.
- Policies and procedures for withdrawal and for refunds of tuition/fees.
- Academic calendar.
- Student grievance procedure.
- Criteria for successful completion of each segment of the curriculum and graduation.

Programs accredited by CAHIIM must use the prescribed CAHIIM Accreditation Statement in all materials and online resources that refer to the program's accreditation status:

The (HEALTH INFORMATION MANAGEMENT/HEALTH INFORMATICS) accreditor of [COLLEGE NAME] is the Commission on Accreditation for Health Informatics and Information Management Education (CAHIIM). The College's accreditation for [ASSOCIATE/BACCALAUREATE/MASTER] degree in (HEALTH INFORMATION MANAGEMENT/HEALTH INFORMATICS) has been reaffirmed through [YEAR OF NEXT ACCREDITATION CYCLE]. All inquiries about the program's accreditation status should be directed by mail to CAHIIM, 200 East Randolph Street, Suite 5100, Chicago, IL, 60601; by phone at (312) 235-3255; or by email at info@cahiim.org. The Accreditation Statement must also include the CAHIIM Seal graphic in the form provided by CAHIIM.

The CAHIIM Seal is registered in the U.S. Patent and Trademark Office. The Seal is for accredited program use only and is to be used for announcements and published statements of accredited status. Use by programs in Candidacy status or non-accredited status is prohibited. It must be used in its entirety and not modified other than in size. Use of any other CAHIIM logo is prohibited. Use of the seal

must be in conjunction with the required Accreditation Statement for Maintaining Accreditation. Accredited programs must document the specific recognized campus in all published media. The Seal is available for all accredited programs in the “Resources” tab of the Annual Program Assessment Report (APAR) system. The login permission for the program director in the system allows the Program Directors to access the information. For CAHIIM-accredited programs, the Seal is available in the following formats: png, tif, eps, jpg.

Information about student/graduate achievement must be published on a program’s website. This information must include, but is not limited to, the outcomes, program completion rate and student satisfaction rating. This guideline applies to both accredited programs and programs in Candidacy status.

Advertising and Student Recruitment

All accredited programs must exhibit honesty and accuracy when advertising for the program’s recruitment process. Published outcomes data must be in aggregate, accessible by the consumer, defined and explained for any cohort for which the program wishes to advertise. The context and timeline of data being presented must be explained. Any additional assessment data the program measures beyond those required by CAHIIM must be clearly explained.

The program must inform the general public if any educational site/location, campus or educational teaching experiences are not accredited by CAHIIM.

IV. Accreditation Standards

Last Revision: 10-16-2020

CAHIIM develops and adopts Accreditation Standards that are the basis for programmatic review and evaluation of degree granting programs in HI and HIM. The Standards provide the expectations and requirements to establish a well-developed quality program. The CAHIIM Standards revision process is initiated every five years for updates and includes public stakeholder and community input. Within the CAHIIM accreditation process, the Standards provide a basis for program self-evaluation and peer review. Information collected from a program includes evaluation of program outcomes and resources in relation to the program's established goals and objectives. The CAHIIM processes and Standards encourage continuous program planning, improvements and innovation. The following Standards are in effect:

CAHIIM Health Information Management (HIM) Baccalaureate, Associate and Master's Standards:

- [2018 Accreditation Standards for HIM Baccalaureate Degree Programs](#)
- [2018 Accreditation Standards for HIM Associate Degree Programs](#)
- [2008 Graduate HIM Standards](#)

CAHIIM Health Informatics (HI) Master's Standards:

- [2017 Health Informatics Accreditation Standards – Master's Degree](#)

V. Accredited Program Reporting Requirements

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This section discusses the Annual Program Assessment Report (APAR) and other reporting resources.

Annual Program Assessment Report (APAR)

CAHIIM routinely monitors program performance, outcomes and changes for continuous quality improvement. To maintain Accreditation status, CAHIIM-accredited programs are required to provide the annual report using the APAR online system. Completing the APAR is required for maintaining Continuing Accreditation and provides fundamental data useful to program administration, students and the public.

APAR will open each year on January 15 to collect data from each CAHIIM accredited HI and HIM program. The APAR encompasses a reporting cycle that begins August 1 and ends July 31 and is always one year behind to give programs ample time to collect data for the report. (For example, APAR 2020 will cover data collected for the academic year cycle that starts August 1, 2018 and ends July 31, 2019.) If your program is an accredited program in the Comprehensive Program Review Process, you must complete an Annual Report. All programs must complete and update the "Directory Profile" Tab of the report.

Accredited programs do not submit an Annual Report if any of the following apply:

- If the program was not accredited during the APAR reporting timeframe beginning August 1, through the following July 31.
- If the program is approved and under Inactive Status.

In either of these circumstances, accredited programs do not submit an Annual Report.

Login

The APAR system emails an APAR user ID and password to all Program Directors. Contact CAHIIM staff at APAR@cahiim.org if

- You have never participated in the APAR reporting process.
- You have misplaced your user ID or password information.
- You have any APAR questions. Response is usually within 24 hours.

If any of the above statements apply, contact CAHIIM at APAR@cahiim.org.

Program Director Change During Reporting Period

If there is a new Program Director appointed after the system has opened, the program must complete the [Program Director Change Form](#) and be approved prior to accessing the system. The process must be completed before the established APAR deadline.

Reporting AHIMA Certification Examination Scores (HIM Programs only)

The AHIMA Commission on Certification for Health Informatics and Information Management (CCHIIM) provides each CAHIIM-accredited undergraduate and graduate HIM program access to the Certification Score Summary Reports system. CAHIIM provides program contact information to AHIMA for this purpose only.

If there are any errors in the report or questions related to the certification exams, contact CCHIIM directly at [AHIMA Certification](#).

APAR Resources and Help

CAHIIM emphasizes the importance of reviewing the instructions and collecting all data and materials using the APAR Data Element Checklist that is sent to all programs. The checklist describes data to be collected and identifies data fields that are new for each APAR.

[APAR User's Guide, Section I](#): "Getting Started" describes how to access and navigate through the system sections and functionality. Other user guide sections can be found in the APAR system, in the "Resources" [tab](#).

APAR Review

Information provided in the APAR that bears directly on a program's compliance with the standards/elements will be reviewed by staff and, when appropriate, placed on the agenda of the next regularly scheduled relevant Accreditation Council (HI or HIM) meeting. All programs must report by the established due date, except initial programs. Programs with initial accreditation must report within one year after their status was conferred.

CAHIIM may also ask programs to provide additional information in APAR.

If a program is found to be in non-compliance with one or more of the Accreditation Standard(s), a status of Probationary Accreditation may be conferred.

VI. Accreditation Process

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A primary goal of the accreditation process is the development of a thorough understanding by institutions of their existing programs and the needs of the communities of interest, including potential students and employers. The accreditation process consists of two components, one that includes the process for programs who are applying for initial accreditation and one that includes the process for reconfirming the quality of currently accredited programs.

Applying for Initial Accreditation

This process applies to all programs not currently accredited by CAHIIM. Prior to the application process, a sponsoring institution must develop a program that meets the professional curriculum content and quality as measured by the Accreditation Standards. Program administrators must ensure the program is sustainable per its resource and needs assessment. The program must be developed to ensure stability professionally and financially. New programs must be accepted into Candidacy Status by CAHIIM in order to participate in the program review process required for accreditation.

Step 1: Accreditation Pre-Application Requirements for HIM and HI Programs

The minimum application requirements and application documents vary depending on the type of program applying for accreditation.

Health Information Management (HIM) Programs

This section refers to the pre-application requirements and required documentation for Health Information Management (HIM) programs.

Minimum Requirements for Application

The following four (4) requirements must be met or completed during this stage in development and when submitting an application. An application will be denied if these conditions are not implemented.

1. **Timing:** Program assesses readiness for application for accreditation.
2. **Program Director:** A permanent Program Director has been hired that meets the minimum qualifications in the Standards for a Program Director. The position must be full time throughout the application process.
3. **Full-Time Faculty Member:** A second full-time faculty member must be hired and report to the qualified Program Director or department head as appropriate.
4. **Applicant Program Campus:** The program and campus applying for accreditation must award the degree, which includes online applicant campuses. Either a) the sponsoring institution is accredited by a regional or national accrediting institutional organization recognized by the U.S. Department of Education (USDE) to offer a degree, or b) the sponsoring institution accredited by a national accreditor with USDE provisions their Grant for Accreditation for establishing eligibility to participate in Title IV programs. Upon request, the applying campus program must provide the OPEID number assigned by the USDE as proof of participation for financial aid. State Board of Education approvals must also be completed.

A program that meets the requirements for application must submit the following seven (7) documents to CAHIIM:

1. Letter of Intent
2. Synopsis of Curriculum
3. Syllabus
4. Curriculum Requirements
5. Curriculum Vitae for the Program Director
6. Curriculum Vitae for the Full-Time Faculty Member
7. Profile Page

Programs should email all seven (7) documents to CAHIIM at the following email address: HIMApplicationSubmission@cahiim.org. Each document is discussed in detail below.

Letter of Intent

Programs that meet the requirements for application must submit a Letter of Intent from the institution's President/Chief Executive Officer that describes the readiness of the program to pursue Initial Accreditation.

Content Description

The Letter of Intent should contain the following information:

- Describe support for the program.
- State reasons for the program inception or program need.
- Confirm state and institutional authority to provide the degree granting program.
- Indicate the month and year of the program launch.
- Indicate projected month and year of first graduation class.

This letter can be sent prior to the Candidacy application.

Synopsis of Curriculum

In the synopsis, list all required courses in the curriculum (general education and the professional course) for each specific quarter/trimester/semester within the total curriculum sequence.

Syllabus

Select and submit a Sample Syllabus for a core Health Information Management course from the final phase of the program.

Curriculum Requirements

Complete and upload the CAHIIM Competencies Report Curriculum Requirements document, which can be found on the CAHIIM website, <https://www.cahiim.org/accreditation/forms-fees-and-documents/cahiim-process-forms>. Ensure program courses are mapped to the curriculum content.

Curriculum Vitae for the Program Director

Submit a Curriculum Vitae for the Program Director. Current employment must be up to date.

Curriculum Vitae for the Full-Time Faculty Member

Submit a Curriculum Vitae for the Full-Time Faculty Member. Faculty member must be teaching in the program. Current employment must be up to date.

Profile Page

The profile page is a PDF document which provides CAHIIM with all contact information for the program.

The blank, fill-able PDF can be downloaded from the CAHIIM website under **Accreditation > Health Information Management > Initial Accreditation** in the “7. Profile Page” box.

Health Informatics (HI) Programs

This section refers to the pre-application requirements and required documentation for Health Informatics (HI) programs.

Minimum Requirements for Application

The following three (3) requirements must be met or completed during this stage in development and when submitting an application. An application will be denied if these conditions are not implemented.

1. **Timing:** Program assesses readiness for application for accreditation.
2. **Program Director:** A permanent Program Director is hired that meets the minimum qualifications in the Standards for a Program Director. The position must be full time throughout the application process.
3. **Applicant Program Campus:** The program and campus applying for accreditation must award the degree which includes online applicant campuses. Either a) the sponsoring institution is accredited by a regional or national accrediting institutional organization recognized by the U.S. Department of Education (USDE) to offer a degree, or b) the sponsoring institution accredited by a national accreditor with USDE provisions their Grant for Accreditation for establishing eligibility to participate in Title IV programs. Upon request, the applying campus program must provide the OPEID number assigned by the U.S. Department of Education as proof of participation for financial aid. State Board of Education approvals must also be completed.

A program that meets the requirements for application must submit the following seven (7) documents to CAHIIM:

1. Letter of Intent
2. CAHIIM Self Evaluation Tool (CSET)
3. Curriculum Vitae for the Program Director
4. Synopsis of Curriculum Template
5. Syllabi
6. Curriculum Vitae for Full-Time Faculty Members
7. Profile Page

The program should email all seven (7) of these documents to CAHIIM at the following email address: HIApplicationSubmission@cahiim.org. Each document is discussed in detail below.

Letter of Intent

Programs that meet the minimum requirements for application must submit a Letter of Intent from the President/Chief Executive Officer of the institution that describes the readiness of the program to pursue Initial Accreditation.

Content Description

The Letter of Intent should contain the following information:

- Describe support for the program.
- State reasons for the program inception or program need.
- Confirm state and institutional authority to provide the degree granting program.
- Indicate the month and year of the program launch.
- Indicate projected month and year of first graduation class.
- Provide the name of the program director.

This letter can be sent prior to the Candidacy application.

CAHIIM Self Evaluation Tool (CSET)

CAHIIM has developed a tool, called the CAHIIM Self Evaluation Tool (CSET), for evaluating curriculum. The CSET can be found at <https://www.cahiim.org/accreditation/forms-fees-and-documents/cahiim-process-forms> along with a user guide.

Complete the CSET for two courses, an introductory level course (that all students must take) and one advanced level course (that all students must take).

Curriculum Vitae for the Program Director

Submit a Curriculum Vitae for the Program Director. Current employment must be up to date.

Synopsis of Curriculum Template

In the synopsis, list all required courses in the curriculum (prerequisites and professional courses) for each specific quarter/trimester/semester within the total curriculum sequence.

Syllabi

Submit the syllabi for the two courses used for the CSET. The syllabi must be for the two courses used for the CSET.

Curriculum Vitae for Additional Full-Time Faculty Members

While additional faculty members are not required, if the program has full-time faculty members in addition to the Program Director, submit a Curriculum Vitae for each full-time faculty member. Current employment must be up to date.

Profile Page

The profile page is a PDF document which provides CAHIIM with all contact information for the program.

The blank, fill-able PDF can be downloaded from the CAHIIM website under **Accreditation > Health Informatics > Initial Accreditation** in the “7. Profile Page” box.

Step 2: Submit Pre-Application Fee

Programs will be billed the application fee of \$500 once they have submitted all seven (7) application documents to CAHIIM for review. The fee must be received before the assessment process may begin on a submitted application in the system.

Step 3: Staff Review of Pre-Application

The pre-application will be reviewed upon receipt of all application requirements including the fee. An assessment of whether the pre-application meets requirements will be provided within 90 days of receipt.

Step 4: Program Response (if necessary)

If CAHIIM requests additional information or any clarification from the program, a response from the program is required before moving on in the application process.

Step 5: Candidacy Status Decision and Description

Candidacy status is the application stage during which a candidate program may complete the Self-Assessment information and documentation in the CAHIIM Accreditation System (CAS). An application may either be accepted into Candidacy Status or denied.

CAHIIM senior staff reserves the right to make final administrative decisions of a program's Application for Candidacy Status with CAHIIM.

Denied: An application may be rejected if it does not meet the conditions for application including curriculum.

Accepted: An application may be accepted into CAHIIM Candidacy Status. When a program is accepted into candidacy, the program is

- Assigned a CAHIIM Educational Program Code (EPC).
- Assigned a Self-Assessment due date (one (1) year from date of when Candidacy status was achieved).
- Assigned a Candidacy Status expiration date (two (2) years from date of when Candidacy status was achieved).
- Sent an invoice for the Candidacy Status Fee.

These actions take place only for programs that are accepted into candidacy status.

Expiration of Candidacy Status

This status will be terminated if it is found that the Minimum Requirements for Candidacy have not been maintained at any time during the Candidacy Status period or the maximum two-year period has elapsed. If a program has been informed of this action, the program must reapply by submitting a new Application for Candidacy.

Once Candidacy Status is established, all initial programs begin the Comprehensive Review Process. (See [Comprehensive Program Review Process](#))

Comprehensive Program Review for Continuing Accreditation

Prior to the end of an accredited program's seven-year term of accreditation, a program is notified by CAHIIM staff a minimum of one year in advance to prepare for the Comprehensive Program Review Process and to begin budgeting and planning activities. The notification letter is also sent one year from the date of the Self-Assessment stage Due Date provided to the program and includes an Acknowledgement Form.

The notification letter provides the program with the following information:

- List of applicable resources to complete the Self-Assessment stage including curriculum forms.
- Directions for logging on to the CAHIIM Accreditation System (CAS).
- Due Date for the Self-Assessment stage of the Comprehensive Program Review to be completed.
- First Installment Invoice of the Comprehensive Program Review Process. (See [Fee Schedule: Table 2: Continuing Accreditation Fees](#))
- Date and Brochure of the next CAHIIM Accreditation Conference for programs in this cycle. The CAHIIM Accreditation Conference generally takes place in the Spring quarter, each year, and the conference includes multiple presentations designed to help programs complete the Comprehensive Program Review Process. Those programs undergoing Comprehensive Review must attend the conference at least once during their review period, after their notification letter and before their site visit.

The notification letter is sent prior to the end of an accredited program's seven-year term of accreditation.

Applying for Continuing Accreditation

Upon notification of the review, the Program Director of the accredited program is immediately provided electronic access to the CAS for the Self-Assessment stage. The program must complete its self-assessment by the required Due Date.

Submitting the Acknowledgement Form: The program director must submit the acknowledgement form within 30 days of receiving the form that confirms there are no planned changes in the program during the program review timeline that may affect completion of the accreditation process.

Extension of a Program's Comprehensive Review: Programs must contact CAHIIM staff as early as possible in order to discuss any situations regarding possible Substantive Changes in the program that may require an extension of the program's next Comprehensive Program Review cycle. **A Comprehensive Program Review extension after a program's acceptance and review process has begun will result in an additional fee. (See [Fee Schedule](#))**

The program must be able to resume the review within one year. Fees paid for a cancelled review are non-refundable.

Comprehensive Program Review Process

This section identifies the five (5) stages of the Comprehensive Program Review Process.

Stage 1: Self-Assessment

The Self-Assessment stage is an essential part of the accreditation process and is designed to help educational institutions improve program effectiveness by identifying the strengths and weaknesses of the program. The objective of the Self-Assessment stage is to provide qualitative as well as quantitative assessments of the program. Careful review of a current program and evaluation of its goals and objectives, content, policies, administration, educational resources, and general effectiveness of faculty, administrative staff, advisory committee, and students is the best means of securing lasting educational improvements within any institution or program.

The Self-Assessment stage serves the following functions:

- Demonstrates incorporation of the Accreditation Standards.
- Provides an opportunity for evaluation of programs and their goals, objectives and outcomes.

A primary goal of the accreditation process is helping institutions develop a thorough understanding of their existing programs and the needs of the communities of interest, including potential students and employers. The results of such an analysis may be reconfirming the present curriculum or recognizing the need to make changes.

The failure of a program to follow through with this process and develop a thorough Self-Assessment stage may result in rejection of information or the postponement of a site visit until acceptable Self-Assessment documentation is completed.

Self-Assessment Committee

A permanent Program Director must assemble and author the Self-Assessment with assistance from the program's Self-Assessment committee. This committee is of paramount importance in program evaluation and improvement. The committee's interaction provides an opportunity for all those concerned with a program to participate in its evaluation process.

CAHIIM recommends that the committee include representatives of the administrative staff, faculty, students, external program advisory committee, and from the professional practice experience sites. It should be chaired by the qualified Program Director. A Self-Assessment can be an effective instrument for change only if it is conscientiously conducted by responsible committee members with the full support of the administration, faculty, and students of the educational institution. The Self-Assessment committee meets initially to plan how a self-evaluation will be conducted and to assign individuals to gather all required information requested to be uploaded for specific questions.

A Self-Assessment describes, in logical standard sequence, an educational program as it exists, indicates a program's strengths and weaknesses, develops strategies for correcting weaknesses, and projects plans for future development of a program. The committee should ensure that information received is accurate, substantive, and of high quality.

An educational program must meet the stated requirements of the Standards, and communication from the program should be written so that those individuals unfamiliar with the program will gain the following:

- Understanding of the philosophy, mission, goals, and objectives of an educational institution and its program.
- Understanding of the environment in which the program campus operates, the learning resources available, and the learning experiences provided.
- Enough information about the curriculum to appraise it fairly in relation to its published description in the college or university catalog or bulletin, the stated program goals and objectives, and current Standards.

All program applicants submit information electronically through the CAHIIM Accreditation System (CAS).

Self-Assessment Forms and Templates required for submission can be found on the CAHIIM website at **Accreditation > Forms & Fees > CAHIIM Process Forms**.

Online Content Delivery

Academic technologies, software applications and simulations, and online or web-enhanced courses have a significant role in the learning environment. In order for CAHIIM to fairly evaluate online content, programs must provide CAHIIM with full access to all online course content and relevant education applications used to deliver this content.

Substantive Changes After the Self-Assessment Stage

If a change is implemented after the Self-Assessment stage is submitted, without prior approval from CAHIIM, the application for Continuing Accreditation may be rejected. A change in Program Director is considered a Substantive Change and is prohibited during the process. The program may resume the process if a faculty member is hired as Program Director and has been involved with the program for a minimum of one year.

Continuing Program in Need of New Program Director

If an external search for a qualified, permanent Program Director must be initiated, the current program review will be postponed into a future program review cycle. If this action is taken after the program submits the Self-Assessment stage, the program will be invoiced the Comprehensive Program Review Extension Fee. The program must reinitiate the accreditation process by the date provided by CAHIIM. A program for Continuing Accreditation may continue the accreditation process if an Interim Program Director is implemented and if the implemented faculty member has been involved with the program for a minimum of one year.

Stage 2: Site Visit

Site Visits are conducted to assure CAHIIM that the documented educational programs comply with the Accreditation Standards for academic programs. The Site Visit can provide the opportunity for faculty to consult with educational specialists, assist an institution in continuing the Self-Assessment stage and improvement of the quality of instruction, and promote exchange of ideas between educators and practitioners of the profession.

The site visit provides the opportunity to validate or clarify the contents of the Self-Assessment stage and to determine the extent to which a program complies with the Standards. The Site Visit is predicated on the Self-Assessment review process results prior to the Site Visit and the program's response to the CAHIIM evaluation by the Peer Review team who will become the Site Visit team. The Site Visit team is responsible for evaluating additional documentation provided to them during the Site Visit that substantiates their assessment and evaluation.

Site visits are conducted by a team of Peer Reviewers that are the essential basis of the CAHIIM program accreditation assessment process. Peer Reviewers are volunteer academic professionals who are associated with CAHIIM-accredited programs. Peer Reviewers are designated as representatives of either the HI or the HIM professions. They are trained to obtain sufficient information to understand an institution's total program and to ensure the quality of a program's stated philosophy, goals, objectives and curriculum along with the established Accreditation Standards. Trained reviewers are dedicated, and through their role, they provide a service in verifying program information on the operations and performance of all Accreditation Standards. The peer review team will report all findings during program reviews to either the Health Information Management Accreditation Council (HIMAC) or the Health Informatics Accreditation Council (HIAC), based on the program and program level they are reviewing.

The Site Visit team representing CAHIIM will make an in-depth analysis of the program with appropriate administrative officials and faculty members. Site visitors will have focused discussions with students enrolled in the program, advisory committee members, and other individuals associated with the program. The following information is reviewed onsite: agreements, advisory committee minutes, faculty handbook, examinations and course related materials (such as textbooks, laboratory projects, simulation labs, research reports), and student files maintained by the Program Director.

The Site Visit team or CAHIIM staff member may request additional information to be provided at the time of the visit. The Team endeavors to obtain sufficient information to understand the total educational program and to compare the program's stated philosophy, goals, and objectives with the established CAHIIM Standards. The Site Visit is only one part of the review process. The Site Visit team will make no assumption regarding the final outcome (accreditation status) of the program. Official notification of CAHIIM Accreditation status is provided by the CAHIIM office to program officials after completion of all steps in the accreditation process and after a decision has been made and award been given by the CAHIIM Board of Directors.

Peer Review Site Visit Team

After the program submits the Self-Assessment stage, a CAHIIM staff member will contact the Program Director to establish a tentative Site Visit date. A proposed Site Visit team will be assigned using this pre-established program timeline.

The Site Visit team is composed of up to three members representing CAHIIM. These individuals are qualified through education, experience and training in the accreditation process. A CAHIIM staff member will be included. The team composition is selected based on availability and confirmation of no conflicts.

After Site Visitors are assigned, CAHIIM staff notifies the Program Director to ensure no possible conflicts exist with the institution. Every effort is made to avoid any conflicts of interest in the assignment of a Site Visit team. However, if a conflict exists, please notify the CAHIIM staff member

immediately during the team approval process. Once a Site Visit date is identified for a program applicant, the date will be posted on the CAHIIM website.

Hotel and Travel Information

CAHIIM staff will coordinate all hotel room reservations for single occupancy and guaranteed for late arrival. Check-in will be the day prior to the first day of the Site Visit, with checkout on the second day of the Site Visit. Final hotel expenses will be paid by the assigned CAHIIM staff person at check-out.

Site Visit Team Observer (if applicable)

A CAHIIM volunteer may, on occasion, be assigned as a full participating member on the Site Visit for training purposes. The program is not responsible for any of the observer's Site Visit expenses. The CAHIIM observer will participate fully as a site visit team member.

Air Travel Arrangements

The CAHIIM office is responsible for making any Site Visit team travel arrangements through the CAHIIM-designated travel service.

Car Rental and Local Information

The Site Visit team may rent a car at the airport if necessary. If there is a campus map, information about the city, restaurant guide, etc., or any other useful information, please forward to the CAHIIM staff member.

Site Visit Fees (See Fee Schedule)

The program will be invoiced in advance of the Site Visit with payment due within 30 days of receiving the invoice, or the Site Visit may be delayed.

The Site Visit Agenda

The Site Visit agenda template and checklist may be found on the CAHIIM website at **Accreditation > Forms & Fees > CAHIIM Process Forms**.

Virtual Site Visits

The review aspects and intent are the same for a virtual Site Visit as they are for an on-Site Visit to the program's location. All program review information is documented in the CAS.

The Site Visit Team: During the Virtual Site Visit, the team of Peer Reviewers and the assigned CAHIIM staff member coordinate via conference call. The time of the Site Visit will be scheduled according to the central time zone.

The Program and Institution: During the Virtual Site Visit, the Program Director and all individuals listed on the Site Visit itinerary from the institution will participate online from the program campus location, when possible.

Communication Method: The Site Visit is conducted using a remote conferencing service such as Zoom, Skype or WebEx.

Site Visit Report

After the virtual or onsite visit is concluded, the site visit team will complete a Site Visit Report within ten days in CAS. This report will then be sent to the Program Director.

Stage 3: Program Response

CAHIIM will notify the program directory that a formal response to the Site Visit Report is required within thirty days of receipt of the report.

Stage 4: Council Recommendation of Accreditation Status

The Accreditation Councils evaluate a program's compliance level with the Standards after all stages of the program assessment process have been completed, including an opportunity for a program to respond to the findings and results of the Site Visit. Based on the results of the assessment process, the Council makes a recommendation to the Board of Directors for an Accreditation Status to be assigned to the program.

Stage 5: Board of Directors Decision

Recommendations from the Councils concerning accreditation of programs are an agenda item on all meetings of The Board of Directors. The Board reviews the recommendations and makes a decision.

The Board may approve the recommendation or defer.

Approve

The recommendation of the council is approved.

Defer

As appropriate, the Accreditation Council may defer making a program recommendation for Initial or Continuing Accreditation until additional information is obtained. The Council may request deferment for the any of the three (3) following reasons:

1. The site visit team's report contains insufficient or inaccurate information.
2. The site visit team's report demonstrates failure to adhere to CAHIIM policies and procedures.
3. There exists a discrepancy or differences between the information presented in the site visit stage and the program's response to the report.

When information is required for a deferred decision, the CAHIIM staff will request that staff contact the program director in writing in order to request additional information. The Accreditation Council will specify what additional information is needed to determine the program's consistency with the accreditation Standards. The Accreditation Council may also contact the Site Team Leader of the site visit team to identify issues in need of clarification. The program will be provided Due Process and the opportunity to respond to any new information or respond to any revised Standard deficiencies through the CAHIIM Accreditation System (CAS).

Due Process Procedures

This section discusses the Procedural Reconsideration Process as well as the Appeals Procedure.

Procedural Reconsideration Process

(See [Appendix: Procedural Reconsideration Process](#))

Prior to the final decision, CAHIIM provides an opportunity for the institution to request CAHIIM Procedural Reconsideration of a recommendation for **Accreditation Withdrawn** or **Accreditation Withheld**. (See [VII. Accreditation Statuses and Decisions](#)) The program must demonstrate why its accreditation status should not be withheld or withdrawn. The letter informing the CEO of the accreditation recommendation describes the Procedural Reconsideration Process.

Appeals Procedure

An institution may only appeal final recommendations of **Accreditation Withheld** and **Accreditation Withdrawn**. For information on appealing a final decision, the CEO of the program must initiate this process with a written request for information to CAHIIM regarding the Appeals Process and the applicable processing fee.

VII. Accreditation Statuses and Decisions

Last Revision: 2-24-2021

Programs are assigned an accreditation status relevant to their stage in the accreditation process (initial or continuing), outcome of the program peer review process, and circumstances that may affect the performance or quality of the program. These statuses are posted publicly in the CAHIIM program directory, and programs must disclose these statuses upon request.

Candidacy (status)

Programs demonstrating that they fulfill all requirements for candidacy will be placed in Candidacy Status. This status does not denote accreditation or full compliance with Accreditation Standards. (See [Applying for Initial Accreditation, VI. Accreditation Process](#))

Accredited (status)

This section discusses Accredited Status for Initial and Continuing Accreditation.

Initial

The program seeking Initial Accreditation satisfies and meets each of the Accreditation Standards in the judgement of CAHIIM. The program is in good standing and will participate in the APAR monitoring process annually. If at any time during the seven-year term the program's outcomes in APAR demonstrate non-compliance with the Standards, the program will be placed on Probationary Accreditation. Programs with Initial Accreditation must participate in a Comprehensive Program Review for Continuing Accreditation no later than the sixth year of the initial accreditation period. A notification letter from CAHIIM staff will be sent to the Program Director and Dean, that initiates this process.

Continuing

If, after a Comprehensive Program Review, the accredited program seeking Continuing Accreditation satisfies each of the Accreditation Standards, it is awarded Seven Year Accreditation status. The program is considered in good standing and is expected to continue to participate in the APAR monitoring process annually. If at any time during the seven-year term the program outcomes in APAR are in non-compliance, the program will be placed on Probationary Accreditation. Programs with Continuing Accreditation must initiate an application for Continuing Accreditation no later than the sixth year of the continuing accreditation period.

Accreditation Withheld (adverse status)

A program under Candidacy Status may be recommended for Accreditation Withheld, by the applicable Accreditation Council, if the program is sufficiently out of compliance with the Standards to such an extent that it's not possible to deliver a quality program. The program is provided with a clear statement of each Standard deficiency. When the CAHIIM recommends Accreditation Withheld, the institution's administrators listed on the program's Profile are notified by express mail or equivalent. The program may request Procedural Reconsideration based on submitting evidence that the Standards were in compliance at the time the decision was made by the Accreditation Council. (See [Procedural Reconsideration Process](#))

If after Procedural Reconsideration, the Accreditation Council upholds the adverse recommendation decision to the Board of Directors, the Board will provide the opportunity for the program to initiate the CAHIIM Appeal Process.

Accreditation Withdrawn (adverse status)

This section discusses the Accreditation Withdrawn adverse status.

Accreditation may be involuntarily withdrawn from an accredited program as a result of **Administrative Probationary Accreditation** or **Probationary Accreditation**, if, at the conclusion of providing the program Due Process, the program is still not in compliance with the administrative requirements for maintaining accreditation or is not in compliance with the Accreditation Standards.

When the CAHIIM Board of Directors awards Accreditation Withdrawn, the CEO of the sponsoring institution is notified by express mail or equivalent.

Final statuses of Accreditation Withdrawn are published on the CAHIIM website. Students enrolled in the program at the time of the award of Accreditation Withdrawn will be considered graduates of the program.

Students enrolled after this date will not be considered graduates of an accredited program.

The sponsoring institution may request Voluntary Withdrawal of Accreditation at any time prior to the final adverse decision of the Board of Directors.

Focused Review

The agenda for a focused review will be specific to the program being visited and will be developed in coordination with the program prior to the visit. Programs are responsible for the focused review fee. (See [Appendix: Fees](#))

Voluntary Withdrawal (administrative action)

This section highlights the Voluntary Withdrawal decision.

Applicants and Candidates (Initial Accreditation)

The President/CEO of the sponsoring institution of a program may withdraw their application for Initial Accreditation at any time prior to final action by CAHIIM. If a program in Candidacy Status, initiates this request after notification of **Accreditation Withheld** by the Accreditation Council, the program relinquishes the opportunity for Procedural Reconsideration and /or the Appeal Process.

Accredited Programs

A program may at any time inform CAHIIM in writing that the program is or will be discontinued by a given date or wishes to have accreditation withdrawn. If there are any remaining students in the program, the program must notify CAHIIM staff of Inactive Status and submit a Teach-out Plan that ensures equitable treatment of the remaining students. (See [Teach-out Plan, I.X. Substantive Changes](#))

The request for Voluntary Withdrawal of accreditation must be signed by the Chief Executive Officer of the program's institution.

The official is informed that the sponsoring institution must apply for accreditation as a new applicant should it wish to resume sponsorship of an accredited program.

Annual fees will not be prorated for the year in which voluntary withdrawal occurs.

A program may not voluntarily withdraw once a board decision has been made to involuntarily withdraw accreditation.

Administrative Probationary Accreditation (Administrative action)

Administrative Probationary Accreditation occurs when an accredited program does not comply with one of the following administrative requirements for maintaining accreditation as required by the Standards:

- Submitting the CAHIIM APAR and other required reports by the CAHIIM determined date.
- Agreeing to a Site Visit of the accredited program.
- Informing CAHIIM of any required substantive changes within 30 days.
- Making timely payment of all CAHIIM fees.

Failure to meet these requirements by a designated timeframe will result in a recommendation of Accreditation Withdrawn to the Board of Directors. CAHIIM awards of Administrative Probationary Accreditation are not subject to appeal. During a period of Administrative Probationary Accreditation, programs continue to be recognized and listed in the Directory as being accredited.

Probationary Accreditation (adverse status)

Probationary Accreditation is an adverse status, indicating that the program must demonstrate why Accreditation Withdrawn should not be taken as a result of being found to be in substantial noncompliance with one or more of the Standards and has not been found to have made sufficient progress to come into compliance with the Standards. The program must demonstrate that it has responded satisfactorily to concerns, has come into compliance with all Standards, and will likely be able to sustain compliance.

Inactive (status)

Inactive status is a two-year period in which an accredited program may voluntarily suspend enrollment of a new class of students. The program may or may not be in the teach-out process for currently enrolled students during the inactive period. During inactivity, the program's APAR is not required, and the program's next Comprehensive Program Review cycle is postponed, if applicable. The program must continue to pay the Annual Accreditation Fee. During a period of Inactive Status, the program's status will be listed as Inactive in the CAHIIM Directory. Programs under the Inactive Status period are not required to submit the Annual Program Assessment Report. After two years of Inactive Status, the program must resume enrollments, or the program's accreditation will be withdrawn.

Progress Report

A program may be required to submit a progress report by the requested date, due to failure to adequately address Standards and requirements, at the time the decision was made, the program will receive a detailed request for information to demonstrate compliance with the un-met or partially-met Standards.

For programs under Probationary Accreditation, a request for a Comprehensive Program Review may be included.

VIII. Fees

Last Revision: 10-1-2020

See [Appendix](#) for CAHIIM's current fee schedule.

IX. Substantive Changes

Last Revision: 10-16-2020

CAHIIM monitors changes in CAHIIM-accredited programs and the institution to ensure educational quality. A formal assessment process is conducted to determine continued compliance with the Accreditation Standards when there are significant program changes including significant modification of program scope, content or supporting educational infrastructure since the program's last award of accreditation.

Substantive changes listed here must be reported to CAHIIM **at the time of occurrence**.

Program Directors can update the following profile changes by logging into the APAR system at the [APAR Login](#):

- Mailing address.
- Phone.
- Website URL changes.
- Program Director email.
- President/CEO and Dean.

These profile changes can be made in the APAR system.

The following changes must be reported in the Annual Program Assessment Report (APAR):

Program Resources

Significant reduction of the following program resources must be reported to CAHIIM:

- Budget
- Physical Space
- Salaries

Disasters

In the event of a disaster which causes adverse change, CAHIIM must be notified as soon as is reasonably possible. Such changes include

- Alternative physical space
- Curriculum Sequence
- Delayed matriculation and/or graduation
- Inability to offer Professional Practice Experience (PPE)
- Loss of resources

Notify CAHIIM as soon as reasonably possible for changes such as the ones listed above.

Enrollment

This section identifies substantive changes to enrollment that should be communicated to CAHIIM.

Admission Requirements

CAHIIM must be notified any time that admission requirements for the program change.

Enrollment Numbers

Programs must notify CAHIIM if there is a significant increase or decrease in enrollment numbers from year to year. This change includes the decision not to admit a cohort.

Faculty Composition

CAHIIM must be notified if there is a significant change in faculty composition within a program, such as significantly increased or decreased numbers; change in full-time, part-time, and adjunct makeup; and a large number of vacant positions.

Major Curricular Revisions

Major curricular revisions must be communicated to CAHIIM prior to implementation.

Program Mission or Goals

If a program's mission and/or goals have changed since the program's last comprehensive review or annual report (APAR), the program must communicate this change to CAHIIM.

Insufficient Outcomes

Programs failing to meet expected outcomes must notify CAHIIM.

Director Release Time

If the release time of a program director changes significantly, CAHIIM must be notified.

The following Substantive Changes must be reported to CAHIIM staff for discussion and information. Contact CAHIIM staff at substantivechange@cahiim.org with any questions and for additional consultation.

Institution

This section identifies substantive changes to an institution that should be communicated to CAHIIM.

Changes in Institutional Accreditor

Submit a copy of the official letter from the new institutional accreditor that indicates pre-accreditation or applicant status in order to receive Title IV funding of the Higher Education Act.

Change in the Name of the Program/Institution

The letter from the institutional accreditor must be submitted and must include the date of approval for the name change and the date of the next review and Site Visit of the institution by that accreditor.

Accreditation Status of the Sponsoring Organization

The CAHIIM accredited program must maintain the updated accreditation status of the institution in the program's APAR Profile at all times. Any adverse award status letters (preliminary or final) from the institutional accreditor must be submitted within 30 days of receipt of the status letter and must indicate if any deficiencies directly impact the accredited program.

Change in Ownership of the Institution

Programs must notify CAHIIM when ownership of the sponsoring Institution changes.

Development of a Consortium Arrangement

As CAHIIM does not accredit systems, CAHIIM must be notified when an Institution develops a consortium arrangement with other schools.

Program

This section identifies substantive changes to a program that should be communicated to CAHIIM.

Administrative Location

Programs must notify CAHIIM if the administrative organizational location of an accredited program changes, such as moving from one department, school, or college to another within the institution.

Delivery Method

If the program delivery method changes, such as a change from campus-based to online offerings, CAHIIM must be notified. The program may change this delivery method during the open period of the Annual Program Assessment Report (APAR).

Certificate of the Degree Programs

A certificate of degree program (Post-Baccalaureate program) refers to a coherent and complete program that offers a pathway to the HIM profession for prospective students that hold a previously-earned baccalaureate degree or higher from an academic institution accredited by an institutional accreditor recognized by the United States Department of Education (USDE).

The degree pathway must be a subset of an already CAHIIM-accredited baccalaureate degree program and must award academic credit and be recognized as such by the college or university institutional accreditor.

An accredited program that offers a Certificate of the Degree must report this enrollment pathway in APAR, and after approval by CAHIIM, the program is published in the CAHIIM Program Directory.

Program Location Change or Addition of Instructional Site

CAHIIM does not recognize branch campuses under one award of accreditation. CAHIIM requires that each program location have a separate accreditation review and award status and must be in compliance with all the Accreditation Standards. Accreditation of a previous campus cannot be transferred to another campus or institution. A new institution or campus must go through the Initial Accreditation process. Contact CAHIIM staff prior to implementation of program-campus changes that are a significant departure from the last onsite visit/review and Accreditation status award of the program.

Request for Inactive Status

Inactive status is a two-year period in which an accredited program may suspend enrollment of a new class of students. The program may or may not be in the teach-out process for currently enrolled students during the inactive period. Programs must contact substantivechange@cahiim.org to schedule a conference call with CAHIIM staff.

During inactivity, the program's APAR is not required, and the program's next Comprehensive Program Review cycle is postponed, if applicable. The program must continue to pay the Annual Accreditation Fee until all students have graduated or are no longer enrolled. The program's status will be listed as Inactive in the CAHIIM Directory. After two years of inactive status, the program must resume enrollments, or the program's accreditation status will be withdrawn.

Submitting the Letter of Inactive Status

A letter must be submitted to include the following:

- The date the last class of students were admitted to the program.
- The reasons for halting enrollments (Include reasons for program closure if applicable).
- Signed by the President/CEO or Dean of the administrative unit.

Implementing a Teach-out Plan

For programs that are phasing out the program and intend to submit a request for Voluntary Withdrawal of Accreditation, a plan to complete the education of all students enrolled in the accredited program (teach-out) must be submitted no later than 30 days after notification of a change to Inactive Status due to program closure. That plan must include

- Description of Teach-Out plan.
- Names and credentials of faculty teaching all program professional courses.
- Number of students remaining in the program and final graduation dates of last group of students.

This information should be included when submitting a Teach-Out plan to CAHIIM.

Request for Program Reactivation

Should a program choose to re-enroll students prior to the two-year expiration of Inactive Status, a letter must be submitted to substantivechange@cahiim.org. A review of the program changes will be conducted to determine the level of changes made to the program. CAHIIM reserves the right to assign a Comprehensive Program Review of the program if the changes reflect a significant departure from the program's accreditation status.

Request for Voluntary Withdrawal of Accreditation

A college or university that establishes a program incurs an obligation to its students to conduct the program as planned. A program may request voluntary withdrawal of accreditation once all students in the program have graduated or other accommodations have been made for students currently enrolled such as transfer to another academic unit or institution. This request must be made by the President/CEO or the Dean of the administrative unit. Until then, the institution must continue to pay the CAHIIM Annual Accreditation Fee. Notification of program closure must be submitted in writing by within 30 days of implementation and should include two (2) items:

1. Reasons for program closure.
2. The date of the last graduating class.

This information must be sent in writing by the CEO of the institution.

Program Director

Accredited programs must notify CAHIIM within 30 days of a change in program director. The program may identify the new Director as one of the following:

- *Permanent Program Director*: a candidate that does meet the qualifications of the position as stated in the CAHIIM Accreditation Standards.
- *Interim Program Director*: a candidate that does meet the qualifications of the position as stated in the CAHIIM Accreditation Standards, and a search process is in progress for a permanent candidate.

- *Acting Program Director*: a candidate that does not meet the qualifications of the position as stated in the CAHIIM Accreditation Standards, and a search process is in progress for a permanent candidate.

Complete the form at this link [Program Director Change Form \(PDF\)](#) including all steps for a *Permanent*, *Interim* or *Acting* Program Director.

Payment: An invoice will be sent for the \$200 Substantive Change Fee after the approval of the Program Director change form has been completed and a confirmation letter is provided. Contact accounting@cahiim.org if you wish to pay by credit card.

X. Operational Policies & Procedures

Last Revision: 10-16-2020

This section identifies policies and procedures for amending the policy manual, emergencies and disasters, evaluation of the accreditation process, the language of business, records maintenance, and complaints.

Amending Policy Manual

The manual will outline all policies and procedures for CAHIIM and will be regularly assessed and revised, as needed. Any changes to this manual must be approved by the Governance Committee and subsequently the CAHIIM Board of Directors.

Emergencies & Disasters

CAHIIM recognizes that there are times of local, regional, or national emergency or disaster that may delay or disrupt operations of programs and classes and in other ways compromise communications between CAHIIM-accredited programs and CAHIIM. For the purpose of this policy/procedure, such an emergency or disaster must impact, or be perceived as potentially impacting, operations and/or communications for at least a 1-month period.

Requests for Special Consideration

In order to avoid unintentional injury to students, programs, or other stakeholders during times of emergency or disaster, the following policy will be followed:

- A.** The program director is requested to contact CAHIIM as soon as physically possible after the emergency/disaster to inform accreditation staff of any expected short- or long-term impact on the program and its ability to remain in compliance with the Standards. If there is no communication within 2 weeks, CAHIIM staff will attempt to contact the program director and administrators of the impacted program by electronic means, telephone, and mail in week 3.
- B.** Once communication is established, the program director will be asked to consider a request for special consideration by CAHIIM under the emergency/disaster policy.
- C.** Requests for special consideration must include the following information:
 - a. The nature of the impact on the program and students.
 - b. The tentative plan and timeline for resumption of classes and other services by the educational program.
 - c. Contact information for the program director or other administrative contact.
 - d. Status of the students during the interim period, if any.
 - e. Length of time for special consideration. (Requests may be granted for a period of time up to 6 months.)
- D.** Action to grant or deny emergency/disaster special consideration will occur within 2 weeks of receiving the required information and a written request from the program director based on the verbal and written information supplied by the program director. During the period of special consideration, submission by the program of any requested information (e.g., Progress Report, Annual Report, Self-Assessment) or other action by the program may be delayed without negative consequences. If an on-site evaluation is scheduled during the granted period, it may be rescheduled. CAHIIM may also decide to conduct a virtual, rather than in-person on-site, evaluation of the program.
- E.** One extension of the special consideration term may be granted for good cause, for up to 3 months, with written information from the program director or administrator explaining the

rationale for an extension. The maximum period a program may be granted special consideration under this policy is 9 months (6 months initially, followed by a 3-month extension).

- F. Information will be placed on the CAHIIM website (www.cahiim.org) indicating the period for which the program was granted special consideration status as a result of the emergency or disaster.

At the end of the special consideration period, the program director will be informed of the timeline for submission of any previously requested reports.

Responsibilities of the Program

In the event of special consideration, the program will have the following responsibilities:

- If special consideration is granted by CAHIIM, the program director must provide monthly written updates of progress toward resumption of classes and other services by the educational program.
- During the granted period of special consideration, the program director may request in writing, one extension of up to 3 months should it become evident that the program will not resume operations within the initially granted time period.
- Should it be evident that the program will not be able to resume classes and other services by the end of the total period of special consideration, the program will be placed on Inactive Status.

These responsibilities fall to the program if special consideration is granted by CAHIIM.

Responsibilities of CAHIIM

If Accreditation staff are unable to make contact with a program representative within 3 weeks of the emergency/disaster, the program's status will be changed to Accreditation-Inactive. Prospective students and others inquiring about the program will be informed that the program is not currently accepting new students. Subsequent actions will be guided by CAHIIM's policy on Inactive Status.

Evaluation of the Accreditation Process

Accreditation process effectiveness will be regularly assessed by the CAHIIM Board of Directors by soliciting opinions from Peer Reviewers and program directors through the use of surveys. If necessary, the CAHIIM Board will communicate feedback directly to Peer Reviewers and may recommend removal of volunteers who repeatedly receive critical feedback.

Assessment of Site Visit Team

Once a site visit is complete, all site visitors will complete a survey evaluating the process. This feedback will be used by CAHIIM to inform decision-making such as policy and procedure revision, site visitor training, and future site visit team creation.

Program Assessment

Once a program receives an accreditation status decision letter from the CAHIIM Board of Directors, the program director will complete a survey evaluating the review process, Standards, and their site visit team. This feedback will be used by CAHIIM to inform decision-making such as policy and procedure revision, site visitor assessment training, and future site visit team compositions.

Language of Business

All communication and correspondence with CAHIIM must be conducted in the English language. If necessary during a program review, English translation services must be provided at the program's expense.

Maintenance of Records

This section discusses the maintenance of records.

Research Using CAHIIM-Published Data

To maintain transparency and advance education in health informatics and information management, CAHIIM is fully committed to sharing its accreditation data. Annually, CAHIIM will prepare a comprehensive report that provides information about all CAHIIM accredited programs, including descriptive statistics of the programs, the accreditation actions taken by CAHIIM over the previous year, and aggregate data on graduates, enrollments, and outcomes. This annual APAR Data Report is posted on the CAHIIM website in PDF format. Access is unrestricted. When CAHIIM-published data is used by a third party as part of a separate publication, the CAHIIM requests that the publication include the following disclaimer:

"The analysis and opinions contained in this publication are those of the author(s). All compilations of data from these records were prepared by the author(s), who is/are solely responsible for their accuracy and completeness. CAHIIM is not a party to, nor does it sponsor or endorse, this publication."

Complaints

This section discusses the procedure for complaints against a CAHIIM Accredited Program as well as complaints against CAHIIM.

Complaints Against a CAHIIM Accredited Program

CAHIIM-accredited programs are subject to complaints from students and other public stakeholders. CAHIIM will initiate the required process for investigating these concerns if they target non-compliance issues related to the Standards. All complaints must be submitted in writing and signed by the complainants and must show evidence that steps to reach a resolution at the sponsoring institution have been exhausted. CAHIIM will protect the identity of the complainant; however, the written complaint submitted to CAHIIM must be signed.

Before submission of the complaint, contact CAHIIM staff to discuss the process.

Complaints Against CAHIIM

Complaints may be submitted to the CAHIIM office that are related to CAHIIM's own practices, activities and policies and procedures. All complaints must be submitted in writing and signed by the complainants. Complaints will be referred to the Executive Committee of the Board of Directors, and the Committee's resolutions will be communicated to complainants within 30 days of receiving complaints.

XI. Ethical Standards

Last Revision: 10-16-2020

This section highlights the ethical standards for adherence, conflict of interest, confidentiality, fair business and professional practices, fair education practices, discrimination, ownership of records, cost of compliance with third-party discovery requests, reporting violations, investigations, and ethics judgment appeals.

Adherence

CAHIIM staff and volunteers are required to adhere to ethical standards of practice in all CAHIIM-related activities. CAHIIM is a member of the Association of Specialized and Professional Accreditors (ASPA) and, accordingly, subscribes to the ASPA code of ethics (posted on the ASPA website: www.aspa-usa.org).

Conflict of Interest

Conflict of interest refers to any situation in which a staff member or volunteer (Board and Council members, site visitors) for CAHIIM stands to gain materially from his or her association with CAHIIM.

- A.** A conflict of interest exists when any CAHIIM staff member or volunteer (or his/her immediate family) stands to realize financial or tangible personal or proprietary gain as a result of any action of CAHIIM in which s/he participates.
- B.** No staff member or volunteer may enter into an employment relationship with persons or activities directly or indirectly detrimental to CAHIIM.
- C.** All volunteers will sign, annually, a statement that acknowledges they have read and understand CAHIIM's Conflict of Interest and Confidentiality Statements. Site visitors are required to sign a similar statement. Current signed statements are kept on file.

These standards apply to any CAHIIM staff member or volunteer.

Confidentiality

All records generated or received by CAHIIM that relate to programmatic accreditation status (including but not limited to accreditation letters, survey reports and progress reports) are confidential and will not be released unless authorized by the program involved, except when required to meet the recognition criteria of the Council for Higher Education Accreditation (CHEA), or as required by law. All records pertaining to a program may be made available to its sponsor's institutional accrediting agency, its state education agency, and the U.S. Department of Education, as deemed appropriate by CAHIIM. The following information will not be treated as confidential and may be released to the public:

- Program Director contact information
- Total number of current program enrollees
- Maximum annual enrollment
- Total number of program graduates per year
- Accreditation Cycle including year of next review
- Current Status of Public Recognition including any Standard citations
- Programs that have submitted a Letter of Intent application
- Programs holding a Candidacy Letter
- Approved Substantive Changes
- Programs scheduled for review at a CAHIIM meeting
- Accreditation actions, consistent with the CAHIIM's Policy on Public Notice of Accreditation
- List of anticipated site visits for the upcoming calendar year
- RHIA and RHIT credentialing success
- Retention
- Job Placement
- Overall graduate satisfaction
- Overall employer satisfaction

The information above will not be treated as confidential and may be released to the public.

Fair Business and Professional Practices

CAHIIM, accredited programs and their sponsoring institutions, as well as individuals associated with the program, are required to comply with the principles of fair business practices.

Fair Education Practices

CAHIIM-accredited programs must communicate substantive changes, which might affect compliance to current and potential students, in a reasonable timeframe and truthful manner in accordance with fair education practices.

Discrimination

CAHIIM prohibits, and does not engage in, the discrimination or harassment of individuals on the basis of race, color, religion, national origin, gender, age, sexual orientation, disability, status as a veteran or disabled veteran; nor does it discriminate against programs/institutions on the basis of affiliation, status, size or fiduciary resources.

Ownership of Records

All materials submitted to CAHIIM (e.g. Self-Assessment documents, Progress Reports, Annual Reports, and Appeals materials) shall become the property of CAHIIM and are subject to CAHIIM records retention policies.

Cost of Compliance with Third-Party Discovery Requests

Costs to CAHIIM related to compliance with third-party discovery requests regarding its accredited programs cannot be reasonably anticipated for budgeting purposes. When reimbursement for copying and delivery costs is not offered to CAHIIM by the party serving the subpoena or document request, CAHIIM may charge the accredited program at a reasonable rate for these costs.

Reporting Violations

When a CAHIIM staff member or volunteer violates CAHIIM's ethics policy, an investigation will ensue. If a staff member or volunteer becomes aware of potentially-illegal activity during a site visit or review of accreditation materials, he or she is obligated to report this news to CAHIIM's CEO as soon as possible.

- Disciplinary action may occur as a result of ethics violations by CAHIIM staff, volunteers, or CAHIIM-accredited program faculty/staff.
- Anyone can report ethics violations that are related to CAHIIM activities.
- Violations will be submitted to the CAHIIM CEO within two (2) weeks of the incident.
- Failure to report an ethical breach could be considered an actionable violation.
- CAHIIM's CEO will work with the CAHIIM Board Chair to review reported violations and judge potential merit. If investigation is warranted, an ethics committee of 3 directors will be appointed from the CAHIIM Board to review the allegation.
- Disciplinary action potentially includes dismissal of a site visitor, removal from Council or Board, or Probationary Accreditation Status for programs.

These guidelines apply to any CAHIIM staff member or volunteer who violates CAHIIM's ethics policy.

Investigation

When the CAHIIM CEO and Board Chair refer a violation to the Ethics Committee, the committee will notify the individual in question, by certified mail, of the following:

- A. Nature of allegation
- B. Obligation to comply with investigation
- C. Opportunity to request a hearing with the Ethics Committee

Within 30 days after referral of the violation, the Ethics Committee will investigate all claims, including carrying out interviews as necessary.

After the investigation is complete, the Ethics Committee will submit an advisory opinion, including recommended sanction (e.g. reprimand, suspension) when finding an individual guilty of a violation, to the CAHIIM CEO who may accept, reject, or modify the recommendation.

Ethics Judgement Appeals

A sanctioned individual may appeal the adverse decision within 30 days after being informed of the decision. This appeal must be made by certified mail to the CAHIIM CEO.

- A.** An Appeals Committee will be formed consisting of 3 directors not involved in the previous decision and without a significant relationship with the appellant.
- B.** Upon full review of the initial investigation and decision, the Appeals Committee will submit an opinion to the CAHIIM Board to
 - a. Reopen the investigation
 - b. Uphold the original decision
 - c. Strike down the original decision
 - d. Modify the original sanction

The decision of the CAHIIM Board based on the opinion of the Appeals Committee is final and binding.

- C.** Appellant will be notified of the final decision by certified mail within 30 days of the decision.

These guidelines apply for ethics judgment appeals.

Appendix

Procedural Reconsideration Process

For Adverse Statuses: Probationary Accreditation, Accreditation Withheld, and Accreditation Withdrawn.

Prior to the final decision, CAHIIM provides an opportunity for the institution to request CAHIIM Procedural Reconsideration of its recommendation to the program. The letter informing the CEO of the accreditation recommendation describes the Reconsideration Process. The sponsoring institution may withdraw its Application for Candidacy at any time.

CAHIIM Policy – Requests for Reconsideration

1. If CAHIIM denies initial accreditation or continuing accreditation for a program (accreditation withheld), places a program on probationary accreditation or withdraws accreditation, the program may request reconsideration of the decision by CAHIIM.
2. The program must submit the request in electronic format within 30 calendar days of the date of receipt of the notice of that decision. If such a request is not submitted, all rights to reconsideration will be considered to be waived and the decision will be final. The program will be notified of the final decision.
3. If a written request for reconsideration is received from the program which qualifies for reconsideration within 30 days following the date of the program's receipt of the notice, there will be no change in the accreditation status of the program until the reconsideration process has been completed.
4. The written request for reconsideration must include a concise statement of the reasons for contesting CAHIIM's decision. On reconsideration, CAHIIM will not consider any information regarding modifications to the program made subsequent to the determination of the original decision.
5. Upon receiving a written request for reconsideration, if desired, CAHIIM will provide the program the opportunity to appear before (if an onsite meeting) or at a virtual meeting before the Commission at its next regularly scheduled meeting to clarify the information available to CAHIIM at the time of the original decision. The program, at its own expense, may participate in the meeting either in person or by teleconference and may bring administrators and legal counsel. Legal counsel is limited to providing advice to the program.
6. On reconsideration, CAHIIM may decide to a) sustain the original decision or b) rescind the original decision and refer the matter to a review team for additional evaluation and/or site visit. If a site visit is conducted, the program will be responsible for the cost of the visit.
7. After reconsideration of the original decision, CAHIIM will notify the program by certified mail of the action taken within 30 days of the meeting at which the request is considered. Other administrative officers currently on file with CAHIIM will receive a copy of the letter by Express Mail. The notification will include a statement of specific findings.
8. Following reconsideration, if the original recommendation to place the program on Accreditation Withheld is sustained by CAHIIM, the recommendation will be considered final, and the program may file an appeal.

Value of Accreditation Paper

This section highlights the value of accreditation for employers, faculty, the profession, the public, students, and institutions.

Employers

Academic programmatic accreditation in health informatics and health information management education benefits employers by

- Signaling to prospective employers that an educational program has met widely accepted educational standards.
- Clarifying the knowledge, skills, and attitudes that graduates from an accredited specialized program are expected to possess.
- Ensuring that graduates have current knowledge and skills.
- Supporting and encouraging the participation of employers and the public in post-secondary education; all accrediting organizations require representatives of the public to have a voice.
- Encouraging innovation by encouraging employers, the public, and educators to articulate the values and skills needed to create an optimal workforce.
- Becoming a catalyst for innovation by encouraging educators to focus on student outcomes.
- Joining education and practice together in a neutral, forward-thinking, and collaborative dialogue.
- Providing a vehicle through which stakeholders such as employers and educators function as a system to the benefit of society.
- Spearheading the development of demonstrable and measurable competencies, which can encourage educators and employers to identify commonalities and promote collaboration in practice.
- Differentiating among closely related or overlapping fields.

This list highlights the value of accreditation for employers.

Faculty

Academic programmatic accreditation in health informatics and health information management education benefits an institution's faculty by

- Recruiting the best, brightest, and most qualified educators.
- Encouraging confidence that the educational activities of a program have been found to be satisfactory.
- Leveraging funding for faculty resources, training and professional development.
- Giving faculty and practitioners opportunities to participate in the accreditation process as peer-reviewers.
- Assuring the institution will provide appropriate resources to support the educational program.
- Encouraging and assisting the program to evaluate and improve its educational offerings through innovation.
- Providing self-evaluation tool to assess current knowledge and need for continuing education.

This list highlights the value of accreditation for faculty.

Profession

Academic programmatic accreditation in health informatics and health information management education benefits the profession by

- Upholding the public's expectations that institutions comply with professional field standards by conducting ongoing evaluation of their performance.
- Providing evidence that professional prerequisites are met to prepare students for successful placement.
- Contributing to professional unity by bringing together practitioners, educators, and students to actively direct and improve professional preparation and practice.
- Assuring that programs reflect changes in knowledge and practice, improving the professional services offered to employers and the public.
- Aiding entrance into professions that require graduates from an accredited program or institution.
- Creating partnerships, exchanges of best practices, and student transfers.
- Requiring institutions to follow the professional standards developed by content-area associations.
- Using academic and institutional data to better understand and improve workforce contributions.

This list highlights the value of accreditation for the profession.

The Public

Academic programmatic accreditation in health informatics and health information management education benefits the public by

- Providing reliable information about institutions and programs for quality educational value judgments.
- Promoting accountability and identifying successful improvement efforts.
- Confirming that the marketing of educational programs, student services, and graduate accomplishments are fair and accurate.
- Assuring compliance through ongoing external evaluation of the institution or program with accreditation standards that raise the professional expectations of the field.
- Assuring that programs reflect changes in knowledge and practice, improving the professional services offered to employers and the public.
- Identifying institutions and programs that have voluntarily undertaken explicit activities directed at improving the quality of the institution and its professional programs and are carrying them out successfully.

This list highlights the value of accreditation for the public.

Students

Academic programmatic accreditation in health informatics and health information management education benefits students by

- Encouraging confidence that the educational activities of an institution or program have been found to meet accreditation standards supported by the profession.
- Assisting with student mobility by indicating to institutions that transfer students or graduate school applicants have met the expected thresholds of educational quality.
- Signaling to prospective employers that a student's educational program has met widely accepted professional standards; graduation from an accredited program is often a prerequisite for entering the profession.
- Providing access to available federal and state financial aid to qualified students attending accredited institutions.
- Protecting the efficacy of learning to make the educational investment worthwhile.
- Assuring that programs reflect changes in knowledge and practice.
- Requiring institutions to follow professional standards developed by content area associations.

This list highlights the value of accreditation for students.

Institutions

Academic programmatic accreditation in health informatics and health information management education benefits educational institutions by

- Comparing their programs against accepted professional and industry standards and graduate learning outcomes.
- Distinguishing their programs from other similar programs offered by other academic institutions.
- Enhancing marketing and increasing enrollment through CAHIIM's online public access and its Accredited Program Directory.
- Recruiting students assured of CAHIIM's quality accreditation as a reliable indicator that specific standards have been met.
- Providing a frame of reference so that the program can identify resources that may be needed to maintain or to enhance the curriculum.
- Providing consultative feedback for continuous quality improvement.
- Aiding with the transfer of credits between institutions and admission to graduate school; student mobility is more successful among accredited institutions.
- Assuring that their programs reflect changes in knowledge and practices generally accepted in the field, improving services offered to the public and professionals.
- Improving the caliber of students and faculty.
Assisting the educational institution in obtaining additional funding to implement quality improvements.

This list highlights the value of accreditation for institutions.

Fee Schedule

This section provides the current fee schedule for Initial Accreditation Fees, Continuing Accreditation Fees, and Substantive Change Fees.

Table 1 below showcases the current fee schedule for Initial Accreditation Fees.

Initial Accreditation Fees	
Pre-application Fee	\$500
Candidacy Status Fee	\$7,500
Site Visit Fee	\$8,000
Self-assessment Late Fee	\$500
Appeals Procedures Processing Fee	\$5,000

Table 1: Initial Accreditation Fees

Table 2 below showcases the current fee schedule for Continuing Accreditation Fees.

Continuing Accreditation Fees	
2020 and 2021 Annual Accreditation Fee	\$3,000
Comprehensive Program Review Fee (payable in two installments of \$4,000)	\$8,000
Focused Review Fee	\$9,000
Self-Assessment Late Fee	\$500
APAR Late Fee	\$500
Appeals Procedures Processing Fees	\$5,000

Table 2: Continuing Accreditation Fees

Table 3 below showcases the current fee schedule for Substantive Change Fees.

Substantive Change Fees	
* Change in Program Director	\$200
* Comprehensive Program Review: Extension of Accreditation Fee - see note below	\$1,000

Table 3: Substantive Changes Fees

* CAHIIM prior approval is required for substantive changes.

Notes

Additional notes for the fee schedule are available in this section.

Payment: Payment may be made by check, ACH or credit card. Please note that credit card payments are not accepted for all types of fees; please contact accounting@cahiim.org for restrictions.

Extension of a Comprehensive Program Review: Extension of a comprehensive program review after the program acceptance and review process has begun will result in this additional fee. The program must be able to resume the review within one year. Fees paid for a cancelled review are non-refundable.

Document Request Fees: Additional fees will be charged for documentation requested after access to the CAHIIM Accreditation System (CAS) has been terminated for reproduction and shipping of documents.

Voluntary Withdrawal: No refunds will be given for annual accreditation fees collected from programs requesting voluntary withdrawal.