

Annual Meeting Registration Form
32nd Annual NCHIMA Behavioral Health Section Conference
“Opening the Doors to Change”
June 13 – 15, 2012



Embassy Suites Raleigh/Durham/Research Triangle Park
201 Harrison Oaks Blvd
Cary, NC 27513

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Registrant Information

Credential: (check one)	<input type="checkbox"/> RHIA	<input type="checkbox"/> RHIT	<input type="checkbox"/> AHIMA Student	<input type="checkbox"/> Other: (please specify)	
Name: (As you want it to appear on badge)					
Employer					
Job Title:					
Contact Address:					
City:		State:		Zip:	
Work Phone:	()	Fax Phone:	()		
AHIMA ID # (Required for voting purposes and reduced registration fee)					
Email Address:					

Conference Fees

We regret that we cannot accept debit or credit card payments.

Reserve early and Save! (Advance registration must be postmarked before May 1, 2012.)

Attendance Day	NCHIMA Member	Non-NCHIMA Member	Student
Entire Meeting (All three days)	<input type="checkbox"/> \$150	<input type="checkbox"/> \$160	<input type="checkbox"/> No Charge
Wednesday Only	<input type="checkbox"/> \$120	<input type="checkbox"/> \$130	<input type="checkbox"/> No Charge
Thursday Only	<input type="checkbox"/> \$120	<input type="checkbox"/> \$130	<input type="checkbox"/> No Charge
Friday Only	<input type="checkbox"/> \$ 70	<input type="checkbox"/> \$ 80	<input type="checkbox"/> No Charge
Total Advanced Registration	\$	\$	<input type="checkbox"/> No Charge

Late Registration Fees (Postmarked after May 1, 2012.)

Entire Meeting (All three days)	<input type="checkbox"/> \$170	<input type="checkbox"/> \$180	<input type="checkbox"/> No Charge
Wednesday Only	<input type="checkbox"/> \$130	<input type="checkbox"/> \$140	<input type="checkbox"/> No Charge
Thursday Only	<input type="checkbox"/> \$130	<input type="checkbox"/> \$140	<input type="checkbox"/> No Charge
Friday Only	<input type="checkbox"/> \$ 80	<input type="checkbox"/> \$ 90	<input type="checkbox"/> No Charge
Total Advanced Registration	\$	\$	<input type="checkbox"/> No Charge

If you plan to pay at the door, please send in your registration information before 5/01/2012.

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Registration Information for Student Attendees

Your registration information must include the following:

- a. Completed meeting registration form
- b. with AHIMA identification number **(if you are AHIMA Member)**
- c. Proof of current or active student status in a HIT or HIA program. (e.g. valid student ID card)

Also note the following:

- a. All students meeting the above requirements are eligible for the scholarship.

Registration Information for All Meeting Attendees

Meeting Registration:

Please make your check payable to **NCHIMA-Behavioral Health Section**. Receipts will be provided in the registration packet distributed at the meeting. ***Refunds will be made only by written notification received by May 01, 2012.***

Mail your completed meeting registration form to:

Valentina S. Holder, MAEd, RHIA
127 B Emily Drive
Winterville, North Carolina 28590
Work Phone: 252-493-7761

Hotel Reservation Information:

You must make your hotel room reservation by **May 10, 2012** to receive the NCHIMA-BHS rate. Utilize the hotel online reservation process as outlined on the hotel reservation form. Any checks with meeting registration charges combined with hotel charges will be returned to you by the hotel.

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Hotel Room Reservation Process

All attendees of the NCHIMA – BHS conference are to make their hotel room reservation by **May 10, 2012** to receive the NCHIMA-BHS rate using our personalized webpage. **ALL** reservations are to be booked using the webpage link below and guaranteed with a credit card. You will receive a reservation confirmation number at the end of the reservation process.

Credit card charges will not be charged at the time of making the reservation

If you wish to mail your payment for your reservation, send it **directly to the hotel** at the address below and include the reservation confirmation number from the online reservation.

Reservations Department
Embassy Suites Raleigh/Durham/Research Triangle Park
201 Harrison Oaks Blvd
Cary, NC 27513

RESERVATION INSTRUCTIONS:

1. When making hotel reservations, use the link provided below to access the hotel reservation page exclusively for the NCHIMA-BHS site.
http://embassysuites.hilton.com/en/es/groups/personalized/R/RDUAPES-IMA-20120612/index.jhtml?WT.mc_id=POG

2. DO NOT use the Reservations at the top of the page.
3. Scroll down to the shaded area titled Quick and Easy Reservations for Attendees.
4. Click on “**Book a Room**” and proceed from there.

If you are interested in viewing the rooms, select the underlined room type to the left of the menu next to the book a room box to view. When you have completed viewing the room, close the pop-up box. Follow the directions in Step 4 to book a room.

The rooms sleep up to four (4) people. If you plan to share a room, all parties need to be included when making the reservation. The Embassy Suites will divide bills for all parties in one room for separate payment.

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Wednesday, June 13, 2012 – Day One

- 7:00 am – 8:00 am **Registration**
- 8:00 am – 8:15 am **Welcome and Invocation**
Linda Taylor, NCHIMA-BHS Coordinator
- 8:15 am – 8:45 am **NCHIMA Updates**
Lee Ford, President
NC Health Information Management Association
- 8:45 am – 9:45 am **Key Note Speaker - MCO, Merger activity and CAP Innovations waiver**
Steve Jordan, Director – NC Division of MH/DD/SAS
- 9:45am – 10:00am **Vendor Introductions/Break**
- 10:00 am – 12:00 pm **ICD-10 – A Continuation**
Laquan D. Black, RHIT, Pitt Community College, Instructor/Interim Program Director, HIT
- 12:00 pm – 1:30 pm **Lunch (on your own)**
- 1:30 pm – 2:30 pm **Choices = Future: HIM Skills, Employment and Advancement**
Cynthia Allen Coe, RHIA, DMH/DD/SAS, Accountability Team
- 2:30 pm – 3:00 pm **Vendor Break**
- 3:00 pm – 5:00 pm **Transitioning to Electronic Medical/Health Record**
Mark Rigsbee, CST Data

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Thursday, June 14, 2012 – Day Two

8:00 am – 9:00 am **Registration**

9:00am – 9:30am **Meet the Candidates**
Presenter: Kathleen Medlin, NCHIMA-BHS Nominating Committee Chair

9:30 am – 10:30 am **Mergers-How to merge successfully with the 1915 b/c waiver**
Steve Tomlinson, PBH MCO

10:30 am – 11:00 am **Vendor Break/Voting begins**

11:00 am – 12:00 pm **Role of the IMT for Managed Care Organization (MCO) Agencies**
Katherine A. Nichols, LCSW, DMA

12:00 pm – 1:30 pm ***Lunch (on your own)***

1:30 pm – 2:30 pm **Retention of Records –abandonment; provider closures, access now and in the future,**
Cynthia Allen Coe, RHIA, DMH/DD/SAS, Accountability Team

2:30 pm – 3:00 pm ***Vendor Break/ Voting ends***

3:00 pm – 5:00 pm **NC Health Information Exchange – More Information**
Linda Attarian, JD, MPH, Privacy and Security Program Manager for
Health Information Technology

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Friday, June 15, 2012 – Day Three

8:30 am – 9:30 am **Business Meeting, Installation of Officers**

9:30 am – 11:30 am **HIPAA Privacy and Security Updates**
Sherry Brooks, DHHS Privacy Officer

11:30 am – 12:00 pm **Announcements, Final door prizes, Meeting adjournment**

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NCHIMA- Behavioral Health Section
CALL FOR NOMINATIONS

The Behavioral Health Section of NCHIMA is currently seeking candidates for the 2012-2013 terms who are interested in working together with others who want to *make a difference* for our profession and the behavioral health arena. If you are a highly motivated member of AHIMA, in good standing and committed to managing the affairs of our association and this section, we are looking for you. We encourage you to apply or nominate someone for one of the current Board openings.

<u>Position</u>	<u>Description of Office</u>
Coordinator-Elect:	Serves as an aid to the Coordinator and shall assume the duties of the Coordinator in their absence or inability to act. The Coordinator-Elect serves as Chair of the Membership Committee. The Coordinator elect also serves as Coordinator at the end of their one-year term.
Treasurer-Elect:	Provide support to the current Treasurer. When necessary, the Treasurer-elect shall perform the duties as Treasurer in the absence or inability of the Treasurer. The Treasurer-elect shall succeed to the office of Treasurer in the event of the resignation of the current Treasurer or at the end of the two-year term of the current Treasurer.
Secretary-Elect:	Provides support to the current Secretary. When necessary the Secretary-elect shall perform the duties as Secretary in the absence or inability of the Secretary. The Secretary-elect shall succeed to the office of Secretary in the event of resignation of the current Secretary or at the beginning of the new calendar year.
<u>Appointed positions:</u>	
Education Chair-elect	Assists the Education chair in their duties to prepare the scholarship announcement and verify eligibility of scholarship applicants; obtain CE credit approval for annual meeting and section sponsored seminars, prepare CE credit form and coordinate meeting speakers.
Communication Chair-elect	Assists the Communication chair in their duties to notify the membership about meetings and other information related to the section through Footprints and other communication methods, assist in the preparation of the annual report and other duties that support the Section.

Elections will be held during the Behavioral Health Section’s Annual Meeting in June 2012. Contact Kathleen Medlin - Nominating Committee Chair if you are interested in running or nominating someone for any of the open positions listed above. Send your nominating information to:

Kathleen Medlin
HIM Department – Pathways LME
901 S New Hope Road
Gastonia, NC 28054
Phone: 704-884-2593
Fax: 704-884-2633

**NCHIMA–Behavioral Health Section
Nomination/Candidate Application Form
2012-2013 Term**

Name:	Credential(s):
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Address:

City:	State:	Zip:
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Home phone:	Business phone:
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Fax:	Email:
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Elected position you are applying for:

Coordinator-elect Treasurer-elect Secretary-elect

Appointed position you are applying for:

Education Chair-elect Communications Chair-elect Other _____

Academic Background:

Employment Background:

Special skills/attributes that you bring to the association:

Your goals for the Behavioral Health Section/Board/Office

I certify that the information provided in this application is, to my knowledge, correct. Any false information or statement made in this application will constitute cause for denial of my application for the section position I have applied. I also understand that some information may be made available to the membership for election purposes.

Signature of Applicant	Date
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