AHIMA®

Approved Continuing Education Provider Program 2024 Guidebook





Approved Continuing Education Provider Program 2024 Guidebook

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American Health Information Management Association®



ACEP Provider Program ACEP INFORMATION GUIDE

OVERVIEW

The Approved Continuing Education Provider (ACEP) program offers third-party providers the opportunity to award AHIMA credit hours for their continuing education products. These offerings must directly qualify toward recertification as defined in the AHIMA Guide. Granting prior approval does not constitute endorsement of the program's content or sponsor. This guide addresses:

- How to become an ACEP approved provider (organization/individual)
- Benefits of provider status
- How to obtain program approval (processes and documentation)
- Instructor/Course Developer qualifications
- · Approved teaching methodologies
- How to calculate Continuing Education Units (CEUs) (what is and isn't eligible)
- Program evaluation requirements
- Post-event requirements
- Associated fees
- Provider audits (standard and triggered)
- List of AHIMA domains for content purposes
- Required documentation format (examples provided)
- Instructions on navigating the ACEP Portal

SECTION I: TWO-PART APPLICATION PROCESS

The ACEP application process is twofold. First, an entity must qualify to become an ACEP provider based upon the criteria below. Second, once approved, each educational offering must be submitted for review and approval.

Becoming an Approved Provider

I. Eligibility

- **Organizational:** Companies, firms, hospitals, associations, and other corporate entities that provide qualifying educational content intended for either in-house or external training; maintain an active website providing information on educational offerings; and possess the means to monitor participation, distribute certificates of attendance, and maintain records
- **Nonprofits:** Nonprofit entities are held to the same criteria as organizational providers but are eligible for a 10 percent discount on submission fees. Documentation of nonprofit status must be submitted during provider application.
- Individual: Individual trainers that provide qualifying educational content under the auspices of an LLC; maintain an active website providing information on educational content intended for either in-house or external training; and possess the means to monitor participation, distribute certificates of attendance, and maintain records

II. Benefits of ACEP-Approved Provider Status

- Recognized by AHIMA, health information management (HIM) professionals, coding professionals, and employers as having met AHIMA standards for rigor, quality, and consistency in the development and presentation of educational events
- Identified as an approved provider of quality education with listing in the on-line ACEP Provider Directory (currently under re-construction, available in 2024)
- Authorized to use the ACEP logo on participation certificates and individually approved program
 marketing (Note: The AHIMA logo may not be used under any circumstances). ACEP providers may not
 indicate that they are approved by AHIMA, as AHIMA approves individual- event program content only.



Obtaining Program Approval

III. Requirements and Process

The following information, in the recommended format, is necessary for approval consideration.

Intended Audience: ACEP providers may request prior approval of CEUs for program attendees holding any of the following credentials:

- Registered Health Information Administrator (RHIA®)
- Registered Health Information Technician (RHIT®)
- Certified Coding Associate (CCA®)
- Certified Coding Specialist (CCS®)
- Certified Coding Specialist—Physician-based (CCS-P®)
- Certified in Healthcare Privacy and Security (CHPS®)
- Certified Health Data Analyst (CHDA®)
- Certified Documentation Improvement Practitioner (CDIP®)

The following information will be submitted via the ACEP Provider Portal:

Program Name: Must be exactly as it appears in all marketing materials and/or on the provider's website

Program Start/End Dates: As of June 2023, approved applications are active beginning on the program start date and expire in 365 days. Programs cannot be renewed. An updated version must be resubmitted. Note: Options for approved-program duration are under consideration for 2024.

Program Content: Must be relevant to the field of health informatics and HIM practices. A succinct description of the program's content is required. Multiple-session submissions must include a brief description of each session.

Learning Objectives: Must be clearly stated and measurable. The number of objectives will be appropriate to the type and length of the CEU activity.

Program Agenda: Agendas should reference all program details. Supplemental documentation may be uploaded, such as complete speaker bios. Ideally, applicants should utilize a table or spreadsheet format (see examples on page 12), although brochure or other formats are acceptable if all required information is included.



Instructor/Course Developer Qualifications: Providers must ensure that course developers and trainers are adequately qualified. At least one credential holder must be involved in the development and/or presentation of the CEU activity. Faculty and content developers should:

- · Submit brief bios with credentials
- Demonstrate competency in the subject matter
- Provide the most up-to-date information
- Possess the knowledge and skills for adult learning
- Meet the stated course objectives

Approved Teaching Methods

- Live events: face-to-face activities including lectures, seminars, workshops, live video presentations
- Audio conferences: seminars, courses, updates
- Virtual events: recorded lectures, webinar replays
- **Online:** self-paced, web-based "on demand" activities which include visuals, quizzes, evaluations and adequate content equal to the number of CEUs requested

Methods and Content Not Eligible for Approval:

- Publications of any kind (including summarized articles, newsletters, textbooks, or journals)
- Exam prep courses
- Study guides in any form

In-Person Activities Not Eligible for CEUs:

- Registration
- Greetings or welcome
- Breaks
- Meals
- Business meetings
- Social events
- Exhibit halls



Considerations When Calculating CEUs

• A session must be at least 30 minutes in length to qualify for 0.5 CEUs. Shorter sessions may not be combined to attain the required duration.

0-29 minutes	0 CEUs
30-44 minutes	0.5 CEUs
45-89 minutes	1.0 CEUs
90-104 minutes	1.5 CEUs
105-149 minutes	2.0 CEUs
150-164 minutes	2.5 CEUs
165-209 minutes	3.0 CEUs

- Only request the actual number of CEUs that a participant may obtain. Do not include concurrent sessions in the CEU calculation.
- Do factor concurrents in if they are intended for replay.
- Calculations are based upon one slide = two minutes.
- Take faculty/participant interaction into consideration for determining session duration.
- Attendees may only be awarded CEUs for the actual number of hours attended.

IV. Post Event Requirements

Evaluations and Post Tests: Providers must present the opportunity for participants to evaluate the program's content, quality, and overall experience. Evaluations are suitable for live events. Replays and on-demand programs require a self-assessment activity or post test.

Distribution of Certificates: Providers are required to distribute a certificate of participation after the program evaluation or post test is completed. Certificates should not be blanketly mass mailed. Certificate wording and requirements are provided on page 13.

Post-Event Participant List: We encourage providers to alert participants to the benefit of uploading certificates to their AHIMA CEU Center. This proves most helpful to attendees in the event of a member audit.

Future State: Providers will be required to upload the final participant list. Providers will be alerted when this becomes mandatory.

SECTION II: FEE CALCULATIONS

FEES as of June 2023

Do factor concurrents in if they are intended for replay.

1-3 CEUs	\$295.00
4 CEUs	\$345.00
5 CEUs	\$395.00
6 CEUs	\$470.00
7 CEUs	\$520.00
8 CEUs	\$570.00
9 CEUs	\$620.00

10 CEUs	\$670.00
11 CEUs	\$720.00
12 CEUs	\$770.00
13 CEUs	\$810.00
14 CEUs	\$840.00
15 CEUs	\$870.00
16-20 CEUs	\$920.00

Any program that exceeds 20 CEUs will be calculated at \$50.00 per CEU.

ACEP does not charge for concurrent sessions and they should not be included in the calculation.

Nonprofit groups are eligible for a 10% discount on program fees. Eligibility will be determined by proof of nonprofit status, such as a 501 (c) (3) form, to be submitted at the time of approval application. Legal documentation is required.

Additional Fee Information:

Expedited: Programs submitted less than two weeks prior to the start date will be charged an expedited fee automatically. Providers may opt for an expedited review for marketing purposes. Expedited applications are guaranteed to be reviewed within 2 weeks.

Revision: As a service to approved providers, ACEP no longer charges a revision fee. Alert ACEP to changes via PriorApproval@ahima.org

Late: As of May 2023, ACEP no longer offers retroactive program reviews.

Refunds: No refunds will be issued for denied programs; therefore, please read this guide in full before making your submission

SECTION III: PROVIDER AUDIT

An ACEP provider is subject to random audit or one triggered by a complaint. Activity reviews may be performed by the ACEP Certification Program Administrator randomly at any time within a three-year period of program delivery. The purpose of an activity audit is to evaluate documentation furnished by the provider to determine if the activity complied with requirements. Approved providers agree to participate in an audit of their activity(ies) and, if audited, to submit any requested documentation or materials within 30 days of the initial request for information.

Approved ACEP providers must:

- Attest to compliance with ACEP requirements
- Attest that the CEU program conveyed information as submitted
- Attest that only the number of approved CEUs were provided
- Agree to distribute evaluations and/or post tests to ascertain program success
- Agree to issue a certificate and/or upload final attendee list when participation is confirmed
- Attest no content was designated as "exam prep" or "study guide"
- Attest that AHIMA CEUs are only provided for programs submitted and approved by ACEP
- Attest that marketing language and logo usage is in compliance with ACEP guidelines

Audit Process: Required Documentation

Should you be audited, you may be requested to:

- Provide documentation of all required items (in support of initial submission information)
- Any program-change documentation related to content or faculty (change of session topics or faculty)
- Participant list containing:
 - Full name
 - Contact information or affiliation
 - Proof of participant attendance

Audit Process: Timelines and Process

Should you be audited, you will be required to:

- Provide all requested materials to the ACEP Certification Program Administrator
- Send documentation within 30 days of audit notification
- Provide ACEP Certification Program Administrator with on-line access if requested
- Be available to discuss questions and concerns via Teams meeting

Audit Process: Outcome

- The ACEP Certification Program Administrator will conclude all audits within 30 days.
- Should a provider fall short on an audit, the ACEP Certification Program Administrator will arrange a Teams meeting to discuss inadequacies and how they may be rectified.
- If a provider does not meet with the ACEP Certification Program Administrator as requested, or does not correct identified issues, status as an ACEP Provider will be revoked.

HIIM Domains

Health Informatics and Information Management (HIIM) Professional Domain Definition: HIIM improves the quality of healthcare by ensuring the most timely and accurate information is available to make all healthcare decisions. HIIM professionals manage healthcare data and information resources. The profession encompasses services in planning, collecting, aggregating, analyzing, and disseminating individual-patient and aggregate clinical data. It serves the following healthcare stakeholders: patients, providers, patient care organizations, research and policy agencies, payers, and other healthcare-related entities. Eighty percent of all CEUs must be earned within the HIIM Domain, which is divided into the domain areas below. The Commission on Certification for Health Informatics and Information Management (CCHIIM) provides the following list of examples of educational experiences. These educational experiences may include, but are not limited to, the following:

Domain I. Data Structure, Content, and Information Governance

Data content, structure, and standards help create the framework for an optimal health record and effective information exchange between healthcare providers. This is achieved by establishing clear guidelines for the acceptable values, data sources, and how information is technically captured, processed, accessed, archived/stored, and retrieved for specified data fields. It focuses on information systems, informatics principles, and information technology as it is applied to the continuum of healthcare delivery.

Examples:

- a. Principles and applications of classification, taxonomies, nomenclatures, terminologies, clinical vocabularies, and content related to diagnostic and procedural classification and terminologies, such as: ICD-10-CM/PCS, ICD-10-O, ICD-11, CPT, HCPCS, SNOMED, DMS-V, ICF
- b. HIIM software applications: encoders, Groupers, computer assisted coding tools, speech recognition, clinical documentation integrity (CDI) and Release of Information applications, EHRs
- c. Technology design, architecture, and infrastructure: cloud technologies, interfaces, encryption, firewalls, operating systems, patient and physician portals
- d. Standards: HL-7, UHDDS, HIPAA

Domain II. Information Protection: Access, Disclosure, Archival, Privacy, and Security

Establish, evaluate, and maintain policies and protocols for protecting healthcare information to govern systems and processes that generate, collect, store, transmit, use, archive, and dispose of data and information.

Examples:

- a. Healthcare law and regulations and terminology related to access, disclosure, archival, privacy and security
- b. Policy and procedure development, evaluation and maintenance for the following:
 - Privacy, security, and confidentiality
 - · Record and data access and disclosure management
 - Data security
 - · Data archiving
 - Patient portals
 - · Release of information
- c. Security and privacy risk assessment, analysis, mitigation, and management
- d. E-discovery
- e. Business continuity planning such as off-site storage, servers, and backup systems
- f. Personal health information

Domain III. Informatics, Analytics, and Data Use

Defines how health information is manipulated and utilized by the organization and shared to external entities, including but not limited to: budgeting projections, long-term service line planning, forecasting healthcare needs of an organization's patient population, resources used, etc. Data analysis is the process of transforming data into information for decision making.

Examples:

- a. Manipulation of available data
- b. Record tracking
- c. Data quality assessment (validity, reliability, completeness, timeliness, and accuracy)
- d. Data (internal and external) importing and exporting
- e. Data exploration and mining
- f. Statistical analysis of healthcare data
- g. Data display and reports
- h. Data extraction and transmission to internal and external entities (billing, registry reporting, quality-measure reporting, vital statistics, statewide administrative databases, etc.)

Domain IV. Revenue Cycle Management

Management and oversight of all business, administrative, and clinical functions that contribute to patient revenue from point of entry through payment and adjudication. This may include insurance processing, registration, eligibility, claims management, billing, collections, and denials.

Examples:

- a. Payment methodologies and systems
- b. Billing processes and procedures
- c. Bill scrubbers, MCE and NCCI
- d. Local and national coverage determinations
- e. Insurance models and trends
- f. Interaction with payers (insurance plans)
- g. Appeals and denials management
- h. Revenue collection from patients
- i. Cost reporting, budget variances, budget speculation
- j. Cost-benefit analysis
- k. Payer contracting
- I. Case mix management
- m. Value based purchasing program
- n. Hospital-acquired conditions and POA
- o. CDI -reimbursement focus

Domain V. Health Law and Compliance

The process of establishing an organizational structure that promotes the prevention, detection, and resolution of instances of conduct that do not conform to federal, state, or private payer healthcare program requirements or the healthcare organization's ethical and business policies.

Examples:

- a. Healthcare law and regulations related to coding, clinical documentation, billing and data reporting
- b. Industry endorsed ethics, guidelines, and directives related to coding, clinical documentation, billing and data reporting
- c. Policy and procedure development, evaluation and maintenance related to billing, coding, clinical documentation, and data reporting
- d. Accreditation standards, policies, and procedures
- e. Patient safety
- f. Risk management

Domain VI. Organizational Management and Leadership

Utilizing skills and tools to manage, guide, and improve operations, provide innovative solutions based on health data, proactively offer knowledge and decision-support expertise, and support patient-safety and quality initiatives which ultimately lead to greater trust and transparency within organizations and in healthcare generally.

Examples:

- a. Professional and practice-related ethical issues
- b. Managed care operations
- c. Negotiation techniques
- d. Workflow reengineering and design techniques
- e. Leadership development
- f. Performance improvement models
- g. Training and development
- h. Work design
- i. Employee hiring and retention
- j. Effective communication
- k. Managing remote staff and functions
- I. Lean management systems
- m. Project management

Domain VII. Clinical Foundations

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

Examples:

- a. Medical terminology
- b. Anatomy and physiology
- c. Pathophysiology
- d. Pharmacology
- e. Diagnostic and laboratory testing
- f. Ancillary services
- g. Telemedicine
- h. Medical and surgical procedures

Domain VIII: Evolving Topics/Other HIIM Relevant Topics

Emerging topics that arise as part of the healthcare ecosystem as it transitions to keep pace with new regulations, technologies, and other changes in the industry.

Examples of Agenda Information

AHIMA CEU's Requirements

Date: July 2023

- Program Title: Breaking Down Coding Denials: Appeal Strategies and Tips for Successful Resolution
- 2. Presenter Name and Credentials: Gloryanne Bryant, RHIA, CDIP, CCS, CCDS
- 3. Program Length: 60 mins. (1 hour)
- 4. Content-what topics will be covered: The increase in hospital inpatient coding and clinical denials continue. Understanding the top payer denials and rationale is vital to HIM Coding and CDI. Gaining greater disease process (Respiratory Failure, AKI, Aspiration Pneumonia) understanding can help <u>aide</u> in writing appeals and justification for ICD-10-CM code submitted on inpatient claims. Documentation and coding key aspects to appeals is a growing area for HIM professionals.
- 5. Learner Objectives-what knowledge or skills should the participant have after the program? Review top coding and clinical denials and payer rationale; Understand the ICD-10-CM guidelines most often identified as a denial rationale; Gain a better understanding of payer coding denials; Enhance clinical and ICD-10-CM knowledge through review of case scenarios; Improve coding accuracy and compliance while reducing denials.
- 6. HIIM Professional Domain (select one below)
 - 1. Data Structure, Content, and Information Governance
 - 2. Information Protection: Access Disclosure, Archival, Privacy and Security
 - 3. Informatics, Analytics, and Data Use
 - 4. Revenue Cycle Management
 - 5. Health Law and Compliance
 - 6. Organizational Management and Leadership
 - 7. Clinical Foundations
 - 8. Evolving Topics/Other HIIM Relevant Topics

Medical Record Ownership: Do You Know Who Can Stake Claim?

August 17, 2023 • 1:00 pm - 2:05 pm ET

Agenda

What Is a Medical Record?

- · Statutory Requirements
- Quasi-Medical and Non-Medical Information in Records
- . Genomic and Big Data Information

Physical Records vs. Data/Information

Nature of Data as Fully Replicable

Competing Ownership Claims

- Provider vs. Patient
- · Hospital vs. Physician/Other Provider
- · Employed Physicians vs. Employer Practice

Rights Short of Full Ownership

- Right to Monetize (Use, Exploit, Sell, Patent, etc.)
- Standard HIPAA Rights: Access, Restrict, Amend, Accounting
- · Right to Be Notified of Breach
- · Right to Privacy/Security Generally

Learning Objectives

After attending this live webinar, you will be able to:

- describe the statutory requirements of a medical record.
- discuss who owns the rights to medical records.
- explain the distinction between physical records and the information contained in records.
- review competing ownership claims.

Learn who has the rights to data to avoid legal issues associated with protected health information.

Medical records are currently a primary target of hackers. This clearly indicates the ultimate value that medical records hold. However, that begs an introductory question, who owns those records in the first place? The physician, hospital, or other health care provider who compiles the medical records has a clear claim to the records, but so does the patient who is the subject of the information. There's also the distinction between the physical records, be they paper or electronic, and the information contained in the records. While the records may need to be reproduced, at some cost, to be possessed by a second party, the information can be possessed by multiple persons, and each new holder of the information does not diminish the ability of the earlier holders to retain the data. There's also the issue of rights, such as the right to access or amend the records that fall short of outright ownership. This topic will analyze how these various concepts and structures impact the ultimate question of who owns or has rights to medical records or the data contained therein. The presentation will highlight the likely areas conflicts regarding ownership of medical records are likely to occur and the legal and regulatory underpinnings of competing claims to the records.





Certificate of Attendance

This is to certify that

has completed the

Radiation Oncology Coding and Documentation

Approved by American Health Information Management Association (AHIMA):
7.0 hours of CEUs (Clinical Data Management)
Expiration Date: December 13, 2023
Session Date: 12/13/2022

This program has been approved for 7.00 continuing education unit(s) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its program sponsor.





TH - 2022 System Wide Coding Education Session II - November 2022

Back to Basics: ICD-10-CM Chapter-Specific Coding Guidelines; Aortic Dissection Repair Procedures; CPT Coding for Selective Catheterization; Coding for Coronary Artery Bypass Graft (CABG) and Percutaneous Transluminal Coronary Angioplasty (PTCA)

November 14, 2022

AWARDED TO

NAME

Wanda Feick-Chall

highschool_border2

Wanda Feick-Chall, RHIT, CCS Manager- System Office Coding and Audit Sponsored by Trinity Health 1848998-8212



Clinical Data Management 2.0 CEUs "This program has been approved for 2.0 continuing education unit(s) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its program sponsor." Expires November 17, 2023.

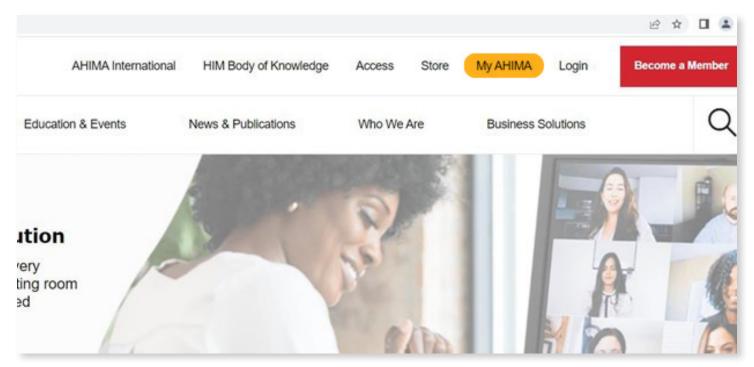


ACEP PORTAL GUIDE

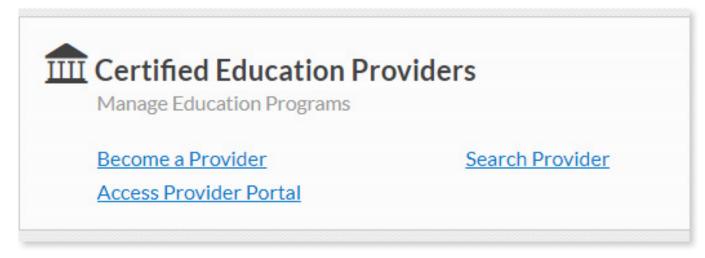
Becoming an ACEP Provider

Before you submit educational content for ACEP approval, you must become an approved provider by taking these steps:

- Establish a "My AHIMA" account
- Access the Provider Portal
- Add your organization to the portal, along with all required information
- Be approved
- 1. **Set up a "My AHIMA" account:** You do not need to be a member to make a "My AHIMA" account. Go to AHIMA's landing page, click "My AHIMA," follow the directions. Once your "My AHIMA" account is established, you may submit an application to become an ACEP Provider.



2. Fill out an application to become a provider: Log into your "My AHIMA" account and click the "Become a Provider" link. Follow the directions. Note: The "Access Provider Portal" link will not be available in your "My AHIMA" profile until your provider application is approved.

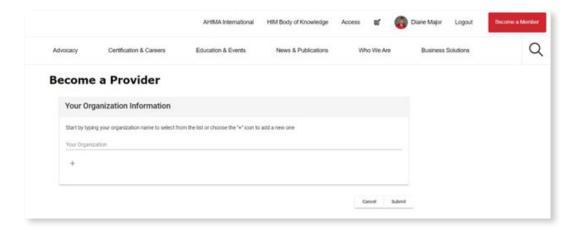


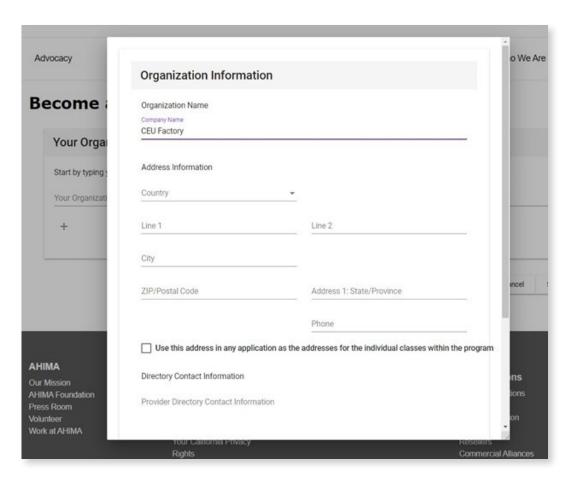
- **3. ACEP contacts:** Your organization may have up to four contacts for ACEP submissions. You will be asked to designate one primary contact, who will be responsible for maintaining program compliance and establishing the account. Each contact should have their own "My AHIMA" account.
- **4. Nonprofit status:** If your organization qualifies as a 501 (c) (3) nonprofit, you are eligible for reduced application fees. You must upload legal documentation of nonprofit status at the time of application submission for it to be considered.

Inside the Portal

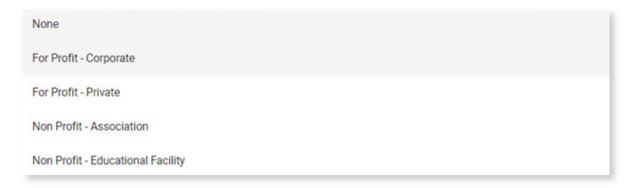
Sequential steps to becoming a provider

1. Click on the "plus" icon to add your company/organization.

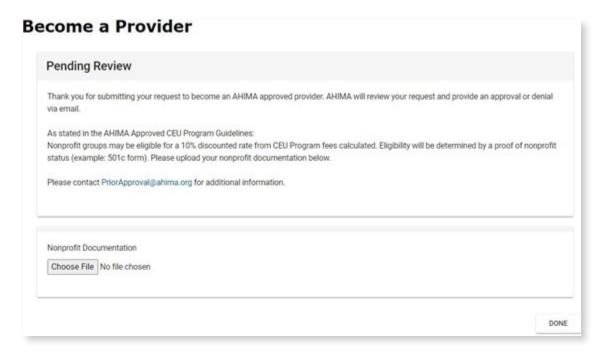




2. Choose your provider type.



- 3. Click "create" and you will see "successful" pop up. Click "submit."
- **4. Confirmation screen.** Once approved, your organization will be able to submit new applications and manage those "in process." If you must make changes to your provider information, please contact the ACEP Certification Program Administrator.



Nonprofit Providers - Instructions

Nonprofit types will need approval before the Nonprofit discount applies.

 On the Become a Provider confirmation screen, you will be able to upload your proof of nonprofit status. You will also have this option to upload in the "Manage Provider Information" section.

Become a Provider

Pending Review (Submitted / Pending Review) Thank you for submitting your request to become an AHIMA approved provider. AHIMA will review your request and provide an approval or denial via email. As stated in the AHIMA Approved CEU Program Guidelines: Nonprofit groups may be eligible for a 10% discounted rate from total fees calculated. Eligibility will be determined by a proof of nonprofit status (example: 501c form). Please upload your nonprofit documentation below. Please contact PriorApproval@ahima.org for additional information. NonProfit Documentation Choose File No file chosen

2. You will also have this option to upload in the "Manage Provider Information" section.

Uploads		
Not For Profit Letter Upload		
Choose File No file chosen		
Organization Logo Upload		
Choose File No file chosen		
Choose File No file chosen		
Choose File No file chosen		
Organization Contacts	o manage programs for the organization. You can add or delete contacts from this list.	

Accessing the Provider Portal

Provider Portal

- Submit a New Program
- · Purchase Directory Listing
- · Manage an Existing Program
- Manage Provider Information

Submit a New Program: Click this link when you are starting a new program.

Purchase Directory Listing: The ACEP Provider Directory is under construction, therefore **this opportunity is not currently available** but is coming soon in 2024. Simply by-pass this step during the application process.

Manage an Existing Program: If you need to log out before submitting your program application, please use the "Managing Existing Program" option to save your work for when you return to continue the progress.

Note: Your event application will move from "Processing" status to "Under Review" when payment is made. The ACEP Program accepts credit card payment only. Providers cannot be invoiced.

E-Mail Notifications and Receipts: The ACEP Portal will generate emails at the "under review," "payment receipt," and "approved" phases. Please keep your emailed payment receipt for your records.

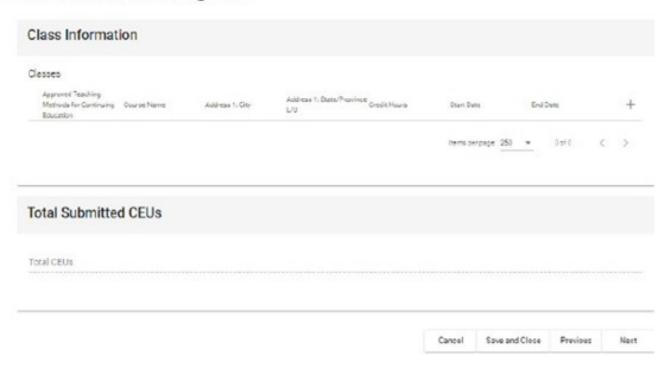
Submit a New Program

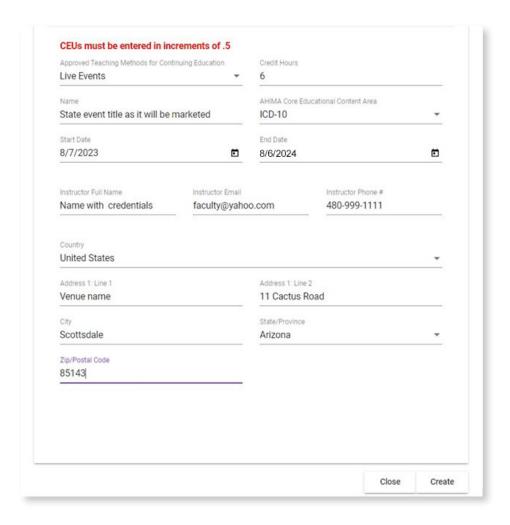
Details	
Program Name	
Title exactly as it will be marketed	
Program Content	
Reference AHIMA Re-Certification Guide for In-Depth Insight into Eligible Content or Quick	Reference AHIMA Domains
Program URL	
https://www.ahima.org/	
Results	
Learner's Objectives	
Be sure to clearly state measurable goals and objectives	
Topics Covered	
Clearly and concisely state content	
Evaluation Methodology	
Live events may utilize an evaluation, recorded and on-line content should provide post events.	ent quiz



Click "+" to enter class information. Enter all classes eligible for CEUs here. It is
important that you enter courses individually here if you plan on offering partial
credit.

Submit a New Program



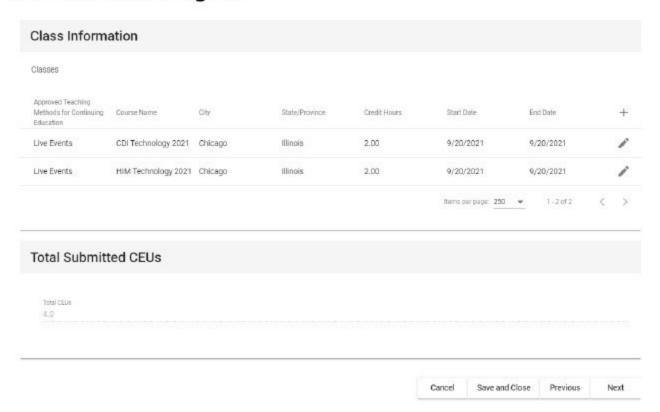


5-7. Enter course information: (Course hours will calculate as each session is entered)

- Select an approved teaching method from the dropdown
- Enter credit hours
- Start/end date (Example: start date, June 19, 2023, end date, June 18, 2024)
- When asked for instructor information, please enter: Brief instructor bios
 - See attached (upload roster of speaker bios)
- Once all information is entered, click "create."
- Repeat process for each individual session eligible for CEUs.

8. When all classes have been entered the total submitted CEUs will appear below.

Submit a New Program



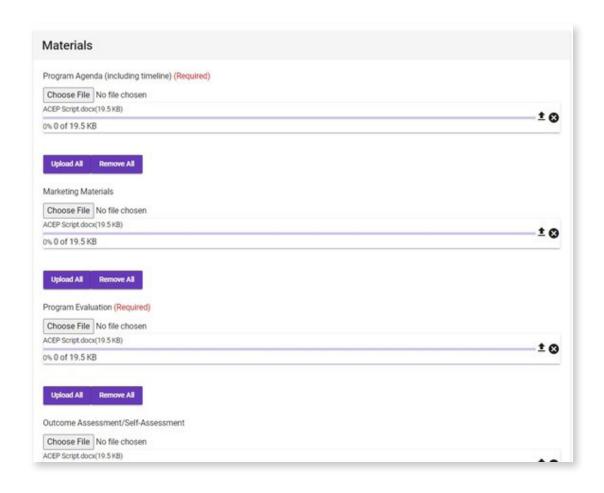
Note: the CEUs will total here (see above)

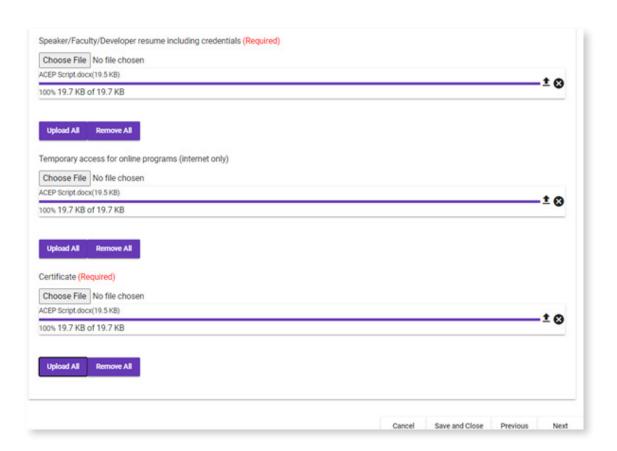
9. Click next to continue.

Submit a new program:

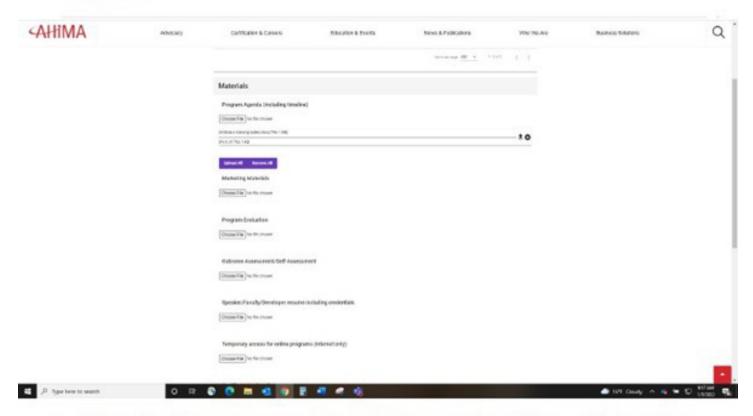
10. Uploaded documents

 Click "upload all" after you have chosen your items for upload. If you have previously uploaded a file, it has been received. Refresh your webpage to validate file upload. (May take up to 30 seconds). Max file size: 5MB



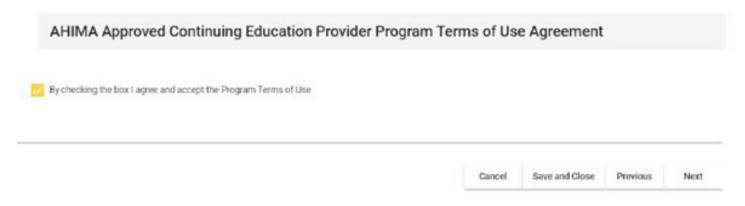


 Choose file to upload and click on "upload all". Once all documents have been uploaded, click "next"



 Click on check box to agree to AHIMA ACEP Terms and Conditions. Click "Next" to continue.

Submit a New Program



Submit a New Program

AHIMA Approved Continuing Education Provider Program Terms of Use Agreement

About AHIMA's Approved Continuing Education Provider Program ("ACEP")

The purpose of the American Health Information Management Association's (AHIMA) ACEP is to grant Providers prior approval for continuing education credits (CEUs) to courses offered by Providers, other than AHIMA, that meet AHIMA's standards for CEU credit ("Provider's Program"). Designation of a Provider's Program as having the prior approval by AHIMA for CEU credit indicates that the Provider's Program meets AHIMA's guidelines set forth in AHIMA's ACEP Guide, which is accessible on the www.ahima.org website at https://www.ahima.org/certification-careers/certifications-overview/for-employers/continuing-education-provider-program/ and the terms of which are incorporated by reference herein. AHIMA reserves the right to amend or modify the ACEP Guide or this Agreement in its sole discretion from time to time as AHIMA deems necessary and appropriate. A health care education course provider ("Provider") who applies for approval of its Provider's Program under the AHIMA ACEP must, as a condition of such application, agree to the terms and conditions set forth in this Terms of Use Agreement ("Agreement").

By checking the box I agree and accept the Program Terms of Use

Cancel Save and Close Previous Next

Submit a New Program

ACEP Fees and Directory Listing

ACEP Directory Listing - \$500.00 ea



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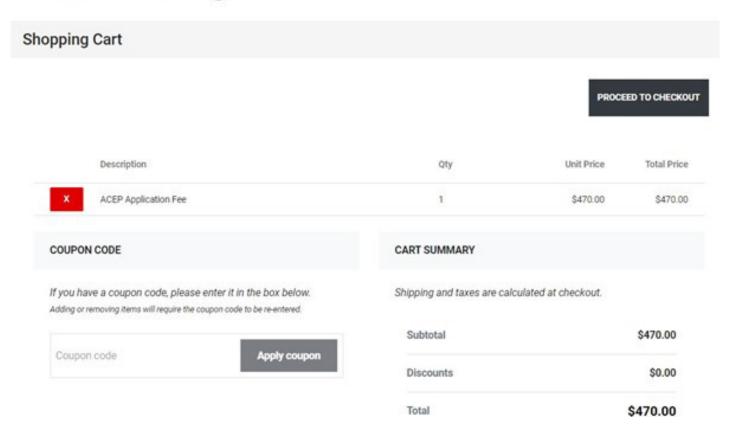
New! AHIMA Recognized CEU Provider fee. Become an AHIMA Approved Recognized CEU Provider by paying an annual fee.

ACEP Optional Expedite Fee - \$200.00 ea



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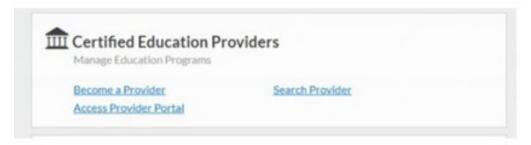
Submit a New Program



The billing information must match that of the credit card holder not the individual submitting the program. Errors in this area will result in a 125 fraud decline. You will see a confirmation screen once payment is accepted. ACEP only accepts credit card submissions. Providers cannot be invoiced.

To Manage an Existing Program - Instructions

1. Once logged into your MyAHIMA Account and in the "Access Provider Portal"



2. Click on "Manage and Existing Program"

Provider Portal

- Submit a New Program
- Purchase Directory Listing
- Manage an Existing Program
- · Manage Provider Information
- 3. Manage programs that have not yet been submitted.

Manage an Existing Program

