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CEO Message

Dear Colleagues,

Happy New Year! We hope you’ve had a relaxing holiday. Things are very busy around the H.I.P. Corporate Office as we gear up for another great year. As many of you know, Patti Ashley LVN, CCS has been promoted to President of our coding & audit divisions. Patti is a well known educator and coding compliance expert. We see this merger as strengthening our two core business lines. We’re also delighted to announce Dianne Bornia RHIA, CHFP has joined our firm as Vice President overseeing our Revenue Cycle and Interim Management divisions. Also welcome, Kimberly Hardy, H.I.P’s new Corporate Recruiter. Read on for more information on Patti, Dianne and Kimberly.

…and on the subject of the economy… things have certainly slowed down, but not with H.I.P. We’re projecting a 27% increase for 2009. Your management team is aggressively sourcing new hospital contracts and additional projects that will allow us to hire an additional 19-22 full time staff members. I will be hosting conference calls in January to talk with you all about our business plans, new hospital contracts, employee benefits and other topics of interest. I look forward to speaking with you soon.

-Joe Farris, CEO
Welcome New Employees

Dianne B., RHIA, CHFP
Dana C., RHIA, CCS
Rebecca H., CPC, CCS-P, CCP
Kimberly H.
Michael M., CCS

New Clients!

Desert Regional Hospital
Palm Springs, CA

West Jefferson Medical Center,
New Orleans, LA

Memorial Health - Revenue Cycle Division, Fountain Valley, CA

Catholic Healthcare West - Glendale Central Billing Office, CA
H.I.P. Quarterly Employee Recognition Award

Patti Ashley, LVN, CCS
President, Coding Compliance & Audit Services

Patti Ashley has been promoted to President of Auditing and Coding Compliance effective January 1, 2009. She joined HIP on January 8, 2007 as our Vice President of Hospital Audit Services. Patti has worked in the HIM field for the past 25 years, starting as a Medicare Auditor for CMRI. She is also active with the Inland Area Health Information Management Association. Patti and her husband Mark have four children and reside in Temecula, California. In her new role, Patti will build and supervise the auditing and coding divisions. She feels this is a positive merger and will considers “education” as top priority for both divisions.

Welcome Dianne L. Bornia, RHIA / CHFP
Vice President of Interim Management and Revenue Cycle Divisions

We are excited to announce the addition of Dianne Bornia RHIA, CHFP to our executive management team. Dianne comes to HIP with 20 years of business office and HIM experience. Dianne will also be our Chief Privacy Officer. As Vice-President, she will oversee our growing Revenue Cycle Division and our Interim Management Division. She has held progressively responsible positions with Canfield & Associates, Precyse Technologies and other premier HIM consulting firms. She looks forward to expanding her division by adding new service lines and focusing on large Healthcare Systems such as HCA, Kaiser and Tenet Health. Dianne lives in Lake Forest, CA with her husband Michael. Welcome Dianne!
Welcome Kimberly Hardy, Corporate Recruiter

Kimberly Hardy is a recruiting professional with 10 years of years experience recruiting entry to senior level employees in the areas of education, finance, marketing, operations and sales. In addition, she has experience training employees and career development. She has earned her BA in Communications and an MBA in Human Resources Management. Kimberly is excited to join the H.I.P. family and looks forward to this next adventure and building long lasting relationships with a great team of healthcare professionals.

Upcoming Conferences / Events

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<thead>
<tr>
<th>Date</th>
<th>Event</th>
<th>Location</th>
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<tbody>
<tr>
<td>April 26-29, 2009</td>
<td>Health Care Compliance Association HCCA Compliance Institute</td>
<td>Las Vegas, NV</td>
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<td>June 14-17, 2009</td>
<td>California Health Information Association CHIA State Convention &amp; Exhibit</td>
<td>Indian Wells, CA</td>
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<td>June 14-17, 2009</td>
<td>Healthcare Financial Management Association HFMA Annual Institute</td>
<td>Seattle, WA</td>
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<td>July 23-25, 2009</td>
<td>American Hospital Association AHA Leadership Summit National Conference</td>
<td>San Francisco, CA</td>
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<tr>
<td>October 3-8, 2009</td>
<td>American Health Information Management Association AHIMA Convention &amp; Exhibit</td>
<td>Grapevine, TX</td>
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**Coding Tip of the Month**

By:  Beth Amara, CCS, CCP, Senior Health Information Partners Auditor

**Posttraumatic Wound Infection**

Coders have been confused throughout the years on when and where to use code 958.3 - Posttraumatic Wound Infection, NEC. Coding Clinic November-December 1984 (shown below for your reference) directed the coder to code both the wound and the posttraumatic wound infection.

Posttraumatic Wound Infection excludes note has been updated with the new October 1st, 2008 updates. Coders need to be aware of the new excludes note on code 958.3.

958.3 Posttraumatic wound infection, not Elsewhere classified

**Excludes:** infected open wounds - code to complicated open wound of site

This new indexing changes the coding of Posttraumatic wound infections with open wounds - the new indexing directs the coder to code only the complicated open wound. This can cause coding errors as Posttraumatic wound infection is a CC and could effect accuracy and reimbursement if the new excludes note is not followed explicitly.

Appropriate physician documentation is necessary to assign this code to a record. Physician education and the query process will be beneficial to the physician as well as the facility.

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**Previous Coding Clinic:**

**Posttraumatic wound infection**

Coding Clinic, November - December 1984 Page: 20

**Question:**

Please explain when 958.3, Posttraumatic wound infection, NEC, is used.

**Answer:**

- Patient is admitted with a wound that has not been treated and the wound is now infected. Code both the wound and the posttraumatic wound infection.
- Patient’s wound was treated and patient now returns with infection at wound site due to failure to follow instructions on care of wound, failure to keep follow-up appointments, or due to the nature of the wound and the initial treatment, which did not entirely cleanse the wound.
10 Reasons Why New Years Resolutions Fail!

By: Mr. Peter Bolan

Below are 10 of the most common reasons why people don’t stick to their New Year’s resolutions.

The top five are about the kind of goals you choose and how you manage them. If this is where you come unstuck, using some straightforward goal management techniques could make a big difference to your resolutions this year.

The second five are about your attitude to making changes in your life. If these are the reasons your goals drift away on you, it’s time to take stock. Set aside some time to review your past goal setting behavior – notice what worked for you and what didn’t. And maybe it’s time to find out what you really want rather than following the herd.

1. Your resolution is about ‘not doing’ something.
   It is said that we create more of what we put our attention on. Resolutions that focus on stopping something put your attention exactly where you don’t want it. Instead, think about what you do want and how you will get it. [See SMART goals below]

2. Your resolutions aren’t written down or captured
   Many resolutions are forgotten the next day or the week after. Write your goals down or record them in some way that will make it easier for you to be reminded of them.

   S.M.A.R.T. goals are
   - Specific,
   - Measurable,
   - Achievable by you,
   - Realistic, and
   - Time framed.

   For example, rather than thinking about ‘losing weight’ get more specific about what you want to achieve and how you will measure your results: e.g. I want to be able to run for 45 minutes without stopping. Even better, make your goal the behavior that will create the result you want: e.g. I will go to the gym three times a week for at least 30 minutes each time.

4. You’re trying to eat an elephant in one bite.
   Often people take on an ‘elephant-sized goal’, stand back, look at it, feel overwhelmed and then don’t even start. Break your goal down into smaller stepping stones. Some people find it helpful to make them the smallest steps you can take – steps so small that you don’t feel any resistance to doing them. Instead of ‘working out for 90 minutes every day at the gym’, it might be ‘go to the gym and use the sauna for a quiet rest’. Let yourself experience success – it’s essential in order to make success a habit.

5. You check on your resolutions once a year.
   Some people only think about their goals on New Year’s Eve. If you want to succeed you need a plan with reviews built in to it. Create deadlines for checking in on your progress throughout the year.
And on the bright side of not quite getting there...

Change doesn’t have to be an all or nothing affair. Any movement in the direction of positive lifestyle change is good and worthwhile just in itself. Even if you haven’t completely kicked a bad habit, pat yourself on the back for the positive changes you have made. And keep going...

Little slips along the way are normal and are opportunities to learn more about the change you’re making. Use them to learn more about staying on track and avoiding those pitfalls.

H.I.P. New PTO Policy

Health Information Partners will adopt a new Paid Time Off (PTO) policy that will replace the vacation and sick leave accrual policies, effective January 1, 2009. PTO provides eligible employees with a “bank” of time off to use for vacation, sick leave, and other personal reasons requiring time off during work hours. This new program will give the employee more freedom in how to use their paid time off.

Full-time employees are eligible for PTO. Part-time, Regular Part-Time, and Per Diem employees are not eligible for PTO benefits. Please view the employee manual posted on the company website under the employment link for further details on PTO or contact the human resources department with your inquiries. The employee will begin to accrue on your date of hire and new employees will have a 90 day waiting period before PTO may be used. Employees may rollover up to 40 hours of PTO each year. Any accrual in excess of 40 hours will be paid to the employee at the end of the calendar year.
Gaza Crisis:

Bombing in the Gaza Strip has left many residents in need of food, water and basic healthcare supplies. Catholic Relief Services (CRS) and partners on the ground have already begun helping civilians affected by the airstrikes.

The Israeli military began the Gaza airstrikes Saturday, December 27, in retaliation for repeated Gaza-based rocket attacks on civilian targets in Israel since December 19.

On Saturday, January 3, before the airstrikes intensified, CRS coordinated delivery of a limited supply of bottled water, cooking gas, diapers and food to partners in Gaza who work with handicapped children.

CRS is working quickly to assess urgent needs and coordinate a possible delivery of supplies like rice, sugar, cooking oil and tuna to Gazans.

“There’s a real crisis [in Gaza]. Most stores, including supermarkets and banks are closed. Because there’s no flour, cooking oil or cooking gas, residents are forced to live as they did in the ’50s and ’60s,” says CRS Gaza Field Manager Omar Shaban. “What makes this situation worse is that people cannot go out of their homes.” Gaza is a densely populated Palestinian territory with about 1.5 million residents, many of whom live in high-rise buildings. “So you can imagine how people can live without any electricity trying to make it to and from high floors,” says CRS.

According to CRS staff reports, there is very little movement on the streets. More and more people, fearing Israeli airstrikes will continue, are lining up in front of bakeries and supermarkets hoping to secure essential supplies.

CRS has offices in the Gaza Strip, Jerusalem and the West Bank. From the onset of fighting, CRS has coordinated safety and security information within Gaza. CRS staff remains in contact with local clergy and humanitarian partners.

H.I.P. staff members interested in donating money to assist with food, water, medicine and basic survival needs are invited to send checks made out to: Catholic Relief Services attn: Denise Rodgers C/O U.S. Healthcare Partners, Inc. PO Box 10129 Newport Beach, CA 92658. Thank you.
Smothered Pork Chops Recipe
www.soulfoodandsoutherncooking.com

1 – 4 pork chops, 3/4 to 1 inch thick
1 – Vidalia or sweet onion, thinly sliced
2 - teaspoons seasoned salt
2 - teaspoons garlic powder
1/2 - teaspoon black pepper
1/2 - teaspoon paprika
1/2 – cup self rising flour
1/2 – cup vegetable oil
2 – cups water

Cookware and Utensils:
1 - large heavy or cast iron skillet
1 - measuring spoons

Recipe Instructions:
Start off by giving your pork chops a good rinsing in cold water. Next pat your pork chops dry with paper towels and set aside.

In a small bowl form your seasoning mixture by combining and mixing together seasoned salt, garlic powder, black pepper and paprika.

Rub about 3/4 teaspoon of seasoning on each pork chop. Next thoroughly coat each piece of meat with flour and set aside. Save all leftover seasoning for later use in onion gravy.

Heat vegetable oil in heavy skillet over medium-high heat. When the skillet is hot enough add pork chops and brown on each side for about three minutes. Once your meat is browned remove it from the skillet and allow to cool on a plate covered with paper towels.

Now it’s time to form the onion gravy. Without removing any dripping add sliced onions to the skillet and cook until browned. Add remaining flour to the skillet and a very small amount of water if necessary. Stir the onions and flour together until golden brown, paying careful attention not to burn the gravy.

Add two cups water to the onion gravy and stir. Bring to a boil over medium high heat. Return pork chops to skillet, reduce heat to simmer, cover and cook for about 1 hour. The meat is done when it’s tender. Add additional season to taste if necessary.

Serve the smothered pork chops over cooked rice with your and cornbread.

Enjoy your meal!

Exciting news!!! As of January 2009, Health Information Partners is now offering dental coverage to eligible full-time employees who reside throughout the U.S. through Delta Dental. Please contact, Denise A. Rodgers, Director of Human Resources for additional information.

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