Committee Standard Operating Procedures
FY18

Definitions
Statement of Inclusiveness
HIMSS is an egalitarian group – we endeavor to find a place for all members who wish to serve. Anyone who is a current member of HIMSS is eligible to serve.

Committees are small groups of highly qualified volunteers executing the Society’s strategic initiatives via a Board-approved annual plan. Committee members actively engage in work efforts, resulting in tangible, valuable resources each year. Committees also recommend the hierarchy of any Task Forces and Work Groups needed to realize the Society’s vision, and oversee these groups’ work to ensure consistency with the Society’s strategic plan. There is no expectation of Task Forces or Work Groups being created; only if the Committee compliment cannot accommodate the entire scope of work as laid out in the Board-approved annual plan. Committees can also be set up as collaborative endeavors between HIMSS and another organization. Committees and their members serve at the discretion of the Chairperson of the HIMSS North America Board of Directors.

Sub-Committees are small groups made up entirely of volunteers from a parent committee. At the direction of the Committee Chairperson, they come together to work on committee projects and then disband.

Task Forces are groups of volunteers gathering together to work on narrow-issue projects for the Society. Task Forces convene for a particular period of time to work on
the project and then disband. Task Forces serve at the discretion of the Chair of the HIMSS North America Board of Directors and nearly always function under the auspices of a HIMSS Committee.

**Work Groups** are similar to Task Forces in that they are groups of volunteers that gather together for a particular period of time and then disband. Work Groups differ in that they gather to work on time-sensitive or single-issue projects for the Society. Work Groups always function under the auspices of a HIMSS Committee. Further, Work Groups can only be created on the authority of a Committee or the Board of Directors.

**Roundtables** are Board-created groups focusing on strategic subjects and/or audiences for the Society. Each Roundtable has a specific core constituency – for example, chapter liaisons focusing on state legislative and regulatory issues. Roundtables and their Chairs serve at the discretion of the Chair of the HIMSS North America Board of Directors.

**Communities** bring together like-minded colleagues to connect, learn and lead our national initiatives. HIMSS communities offer peer-to-peer networking, problem solving, solution sharing and education. It is through the process of sharing information and experiences that members learn from each other and have an opportunity to apply their learnings to their daily environments. In this way, all are equipped to play an active role in positively transforming health and healthcare through the best use of IT.

**Volunteer Service Criteria and Statements of Purpose**

**Committees**
Any member¹ who has belonged to HIMSS for more than the past 12 consecutive months from the date nominations open and is not currently serving in a leadership position (ex. Board of Directors), nor has a current Committee appointment within the Society, may apply for a Committee appointment. Committees are populated through an application process in which the Chairperson-Elect of the HIMSS North America Board of Directors creates a complement of volunteers that represent the Society’s constituencies and have relevant skills and talents needed to achieve the year’s goals. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a current member who has been a member of HIMSS less than 12 consecutive months.

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¹ Eligible member types: Individual, Corporate (Diamond/Platinum/Gold/Emerald), Non-Profit Partner, Organizational Affiliate, CHIME, Student, International
Non-eligible member types: Online, Chapter only
Most committee appointments are two-year terms. Depending upon the cycle of the Committee’s work, the term will either be July 1 – June 30, or January 1 – December 31. Chair appointments are for a one-year term. To be considered for a Chair appointment, an individual must have maintained a current HIMSS membership for at least the previous consecutive 24 months, from the date nominations open.

Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may reappoint the same individual for a second one-year appointment. HIMSS and non-HIMSS members may be appointed in a one-year, non-voting capacity on a Committee to serve as an advisor or as a liaison with another group. Such an appointment is made by the Board Chair when it is beneficial to include the voice of a HIMSS collaborator (e.g., other associations, governmental agencies, etc.).

Committees serve primarily as a group to execute and realize the strategic initiatives and annual plans of the Society, within a clear scope of responsibility (ex: development of resources germane to ambulatory professionals). If the scope of work outlined in the Board-approved annual plan is beyond the Committee’s capacity to achieve, Committees have the ability to recommend Task Forces and/or Work Groups to address specific topics or tactics. These groups are accountable to the Committee for successful completion of a project. Most Committees convene via conference calls, although in-person meetings are occasionally scheduled as required. Scheduling of in-person meetings is subject to the approved annual budget and plan.

At the discretion of the Committee Chairperson, a Sub-Committee can be formed. Sub-Committees are made up entirely of members from the parent committee. Their function is to focus on specific issues facing the Committee, report their findings back to the parent Committee, and then disband.

**Task Forces and Work Groups**
Any member who is not currently serving in a leadership position (such as a Committee Chair or serving on the Board of Directors) within the Society is eligible to serve, depending upon the requirements needed to help the group achieve its stated purpose. Non-members may serve on these groups if they represent an organization or constituency that is typically not a member of HIMSS (e.g., other associations, governmental agencies, non-IT healthcare professionals, etc.). If a particular skill set is required but not represented by those who have volunteered to serve, the Chairperson or Staff Liaison is encouraged to recruit an eligible person.
Task Forces and Work Groups exist for a definite time period to achieve one to three goals. If this work exceeds 12 months, the Staff Liaison will work with the Committee Chairperson or HIMSS Chairperson-Elect to, as appropriate, infuse the group with a revised group of volunteers and appoint a new Chair. The Chair of a Task Force or Work Group serves for a one-year term. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may reappoint the same individual for a second one-year appointment. To be considered for an appointment as a Task Force chair, an individual must have maintained a current HIMSS membership for at least the previous 12 months or demonstrate unique experience that might not be readily found among individuals who have been members at least 12 months.

Task Forces and Work Groups meet exclusively by conference call. If an industry event takes place in which many of the members of a Task Force or Work Group are planning on being in attendance, a face-to-face meeting can be convened on an as-needed basis. HIMSS is not responsible for any travel or out-of-pocket expenses incurred by Task Force or Work Group members.

**Roundtables**

Members can serve in a leadership position within the Society and also on a Roundtable. Roundtables are chartered and disbanded by the Board of Directors, exist to strengthen a HIMSS strategic initiative, and represent a specific core constituency within the Society’s community. Roundtable Chairpersons are appointed by the Chairperson-Elect of the HIMSS North America Board of Directors.

To be considered a Chair appointment, an individual must have maintained a current HIMSS membership for at least the previous 24 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months. Roundtable members can remain with the group indefinitely, as long as they continue to meet the criteria (ex: current HIMSS member who works in a veteran, woman or minority-owned business). Chairs are appointed for one year starting on July 1 and ending on June 30. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may reappoint the same individual for a second one-year appointment.

**Communities**

Members can serve in a leadership position within the Society and also on a Community. Communities exist to strengthen a HIMSS strategic initiative, and they represent a specific core constituency within the Society’s membership. Staff liaisons for
Communities that have a Chairperson will submit their recommendation to HIMSS Board Chair-Elect for appointment.

To be considered for a Community Chairperson position, an individual must have maintained a current HIMSS membership for at least the previous 12 months. Infrequently, to achieve the desired complement of skills and talents, it is necessary to appoint a Chair who has been a member of HIMSS less than 12 months. Chairs are appointed for one year starting on July 1 and ending on June 30. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may be reappointed for a second one-year appointment. HIMSS Communities are not required to have appointed Chairpersons.

**Roles & Responsibilities**

**Role of the Chairperson**

The Chairs of the various HIMSS volunteer groups serve a crucial leadership role. Chairs are considered experts in the topic area of the volunteer group, demonstrate strong leadership roles, and show significant interest in the topic. It is a distinct advantage if the Chairperson also has substantive health sector connections to link the work of the volunteer group to other initiatives and entities.

Specifically, the Chairperson is expected to:

1. Lead all group meetings
2. Bring the group to consensus regarding the Board-approved annual plan, scope of work, priorities, white papers, position papers, etc.
3. Ensure that group members feel appreciated, valued and involved
4. Ensure that no one group member – or small group of members – dominates the discussions or the scope of work
5. Keep the group engaged, motivated and focused on outcomes to achieve the group’s charter in a timely manner
6. Recognize that a volunteer leader role is public, and all comments made surrounding the group’s work must be made carefully in context with the larger HIMSS strategic vision
7. Upon reasonable request by HIMSS leadership, offer public comments on behalf of the Society (ex: provide testimony, give a presentation, be interviewed by a journalist, etc.)
8. Committee Chairs only: Participate in semi-annual conference calls of all the Chairs of HIMSS Committees
Role of the Vice Chairperson
If deemed appropriate for the Committee, the HIMSS Board Chairperson may, on occasion, appoint a Vice Chair. Serving as Vice Chair is a one-year appointment with no implied or overt intent to step into a future role as Chairperson. Vice Chairs, in the absence of the Chair, run meetings and may also lead a Committee effort on a particular topic or area.

Role of the Volunteer Participants
The volunteers of the many HIMSS initiatives are keys to the success of the organization. Their value cannot be overestimated, and their input is welcomed and encouraged at every level within HIMSS.

Specifically, volunteers are expected to:
1. Actively participate in all group meetings and events
2. Volunteer to perform specific duties that enable the group to achieve its goals
3. Complete volunteer work within the given scope and timeline
4. Work as a member of a collaborative team, balancing the interests of HIMSS with each person’s interests for professional development, learning and contributions
5. Focus on the “win” for healthcare, rather than a sale for a corporation or benefit for an organization or individual
6. Maintain an active membership for the duration of their term. If the membership lapses beyond the 30-day grace period, the member will no longer be a voting committee member in good standing and will be asked to resign until membership is renewed.

Responsibilities of Volunteers
As a Society, HIMSS is devoted to providing any interested current member with a way to serve. Volunteers bring many unique characteristics, talents and skills to Society activities. A volunteer is expected to actively participate throughout the term of service, while maintaining a current membership in the Society.

Second, there is a culture within the volunteer groups that calls for a collaborative style. Volunteers are expected to comply with the HIMSS Code of Ethics, adopted by the Board of Directors in 1994. While providers, vendors, consultants, clinicians, administrators, staff, end-users, etc. serve side-by-side in volunteer groups within HIMSS, all are expected to set aside their competitive or personal agendas. It is inappropriate for a vendor or consultant to try and sell a product or service, or to influence a group towards a position that would favor one vendor or consulting firm.
Conversely, it is inappropriate for an end user to influence the group towards projects that would benefit their own organization.

Third, for volunteer groups to create excellent work, an atmosphere of trust must exist. To engender trust within various groups, HIMSS has established a Statement of Confidentiality. Information obtained during the natural course of discussions during any conference calls and/or meetings are for the sole purpose of the group's activities. Transcripts, summaries of discussions, minutes and work products are to remain private unless explicit written authorization is secured from HIMSS. Volunteers representing their group in a public forum will submit all materials (presentations, opinion pieces, status reports, etc.) to their staff liaison for approval prior to the event.

If a member of a volunteer group does not comply with the HIMSS Code of Ethics, the HIMSS collaborative culture, or the Confidentiality Statement, they will receive a call from their Chairperson to discuss the situation. If, upon conclusion of the intervention, the situation is not rectified, the member will be removed from the group.

Committee Responsibilities
At the Committee level, there is a formal application process. If selected, the volunteer is expected to fully participate in the group and to volunteer to perform needed duties. If, after joining, the volunteer finds that they will not be able to honor their commitment to the Committee, that individual is expected to formally resign from the group in a timely manner.

If a Chairperson of a Committee misses any combination of two meetings, events, deadlines or commitments, they will receive a call from the HIMSS Staff Liaison or Executive Vice President to confirm that they are still able and willing to serve as Chairperson. If the Chairperson misses one additional meeting, event, deadline or commitment, the HIMSS Board Chairperson will remove this individual from their position and appoint a replacement.

If a member of a Committee misses two meetings, events, deadlines or commitments, they will receive a call from the Chairperson of the group to confirm that they are still able and willing to serve. If they miss one additional meeting, event, deadline or commitment, the HIMSS Board Chairperson will remove this individual from the group and appoint a replacement.

HIMSS leadership understands that life and work situations can change dramatically, making it impossible to honor the commitment to a HIMSS Committee. In these cases, the Board Chair will name a replacement appointee. If, in the future, the individual...
believes they have regained the ability to assume the responsibilities of a volunteer, HIMSS encourages him/her to contact the staff liaison assigned to the Committee to which they were originally appointed. HIMSS will examine the situation and make a reappointment, if possible.

**Task Force & Work Group Responsibilities**
Any current Task Force or Work Group member is eligible to serve, depending upon the requirements needed to help the group achieve its stated purpose and the requirements of membership tenure (if any). If, after joining, the volunteer finds that there is not a clear fit, the volunteer is under no obligation to remain involved in the group. As a professional courtesy, it is expected that the volunteer will contact the group’s Chairperson to formally resign from the group.

**Roundtable Responsibilities**
Once an individual is appointed to a Roundtable based upon the eligibility criteria outlined earlier in this document, they are expected to actively participate. If the member misses two meetings, events, deadlines or commitments, they will receive a call from the Chairperson of the group to confirm that they are still able and willing to serve. If they miss one additional meeting, event, deadline or commitment, the staff liaison will reach out to the Corporate Member or Chapter responsible for this individual’s participation to ensure that the Corporate Member/Chapter is still interested in participating in the Roundtable. If not, a replacement will be recommended to the HIMSS Chairperson of the Board.

**Community Responsibilities**
Any current member, except a chapter-only or online member, is eligible to participate in a Community. A member can join a Community by opting in through the Members-Only Section of the website or reaching out to the Staff liaison, who will add the community to their member profile. Community members are expected to share information, viewpoints and experiences with other community members on the topic or area of profession being addressed. Members’ level of engagement is up to them, and they may opt-out at any time. Community members can remain with the group indefinitely, as long as they continue to be a member in good standing and meet any criteria specific to that community (ex: must be a physician to be a member of the physician community). Members can elect to participate in multiple communities.

**HIMSS Position Statement Creation & Approval Process**
Through the normal course of their work, HIMSS volunteer groups occasionally undertake the effort to create a document that may result in being adopted as an official position of the Society. To assist groups in their efforts, the Society developed a seven-
step process. This process was ratified by the HIMSS Board of Directors in December 2005.

1. HIMSS Communities (i.e., Chapters, SIGs) may take regional positions that are not in conflict with an existing Society position. Prior to release, such positions need to be reviewed and approved by the HNA Executive Vice President to ensure they are consistent with the national goals and objectives of the Society.

2. Any member or Community of HIMSS can suggest a national topic on which they would like the Society to comment on regarding a healthcare IT and management systems issue. The HNA Board of Directors is the single governing entity with the authority to approve a position statement on a national topic on behalf of HIMSS.

3. All such suggestions are to be sent to appropriate HIMSS staff liaison, who will forward the request to the appropriate Committee (i.e., Physician, etc.) for review and recommendation.

4. The Committee will validate that the proposed position topic is consistent with the national goals and objectives of the Society. If it is, the Committee will then draft a position statement and communicate back with the submitting group. The originator is encouraged to suggest communication and implementation strategies.

5. The Staff Liaison will then circulate a working consensus position statement to other appropriate Committees for comment. Once a final consensus statement has been crafted, the HIMSS Executive Management team will review it prior to submission to the HNA Board of Directors. The submitter of the proposed position will be kept in communications throughout this process.

6. Normally, position statements are reviewed during a regular meeting of the Board of Directors. If there is a special need, the Board can expedite position statements for approval.

7. If approved, HIMSS teams prepare the position statement for external communication and implementation of other activities, as needed. The submitting group is also notified at the same time that the position has been adopted by HIMSS.
The HIMSS EHR Association may adopt position statements pertaining directly to its topic area for which a consensus may not have been achieved. The following identifies the alternative process by which such actions can be taken:

**Alternative Process**

5. (alt.) In the event, during step 5, no consensus can be achieved, the process shall follow this alternative procedure for these two groups:
   a. The staff liaison shall facilitate a conversation between the Chair of the originating group and the HIMSS Board Chair to attempt to reconcile differences.
      i. If common ground is reached, the proposed statement as agreed upon shall be submitted to the HNA Board of Directors for approval as an official position of HIMSS.
      ii. If reconciliation of views cannot be achieved:
         1. The group’s Chair may submit the issue to the HNA Board of Directors for resolution; or
         2. The group’s Chair may initiate a vote of the group’s membership to solicit the group’s approval of the position as originated by the group. At least 75% of the group’s membership must participate, and the statement shall be adopted as the group’s position with a 51% affirmative vote.

6. (alt). If adopted by the group, the Chair develops a written communication to the Board of Directors clearly articulating the outcome and rationale for the decision.

7. (alt). The position statement is communicated externally as a position of the originating group, and the group implements other activities as needed.

**Committee Balance and Rotation**

There is an appointment process for Committees. Task Forces, Work Groups, Roundtables and Communities do not appoint volunteers; all members are eligible to serve (some requirements for membership tenure may apply to leadership roles). It is up to the Chairperson to ensure that the groups’ complement both represents HIMSS membership constituencies and has the necessary skills and talents to achieve its goals.

**Committees**

*Achieving Equity in Rotation and Balance*: 
HIMSS has designed its Committees in such a way that approximately 50% of the volunteers on each Committee rotate annually. This results in approximately 4–7
openings for new volunteers to be selected for an appointment on each Committee, allowing for an influx of new volunteers while preserving some measure of continuity in a Committee's work.

Annually, HIMSS encourages all members who have been members for at least 12 months to apply for service on a Committee. Once the Committee application period has closed, all applications are carefully reviewed. The complement of volunteers who will remain on the Committee for the following fiscal year is assessed and any needs are identified (such as a lack of clinician participation).

Members can be appointed to one Committee at a time. Their appointment is for a two-year term. If a member is currently serving on a Committee, that individual is not eligible for a second appointment.

Chairs are appointed for a one-year term and must have been HIMSS members for at least the previous 24 months, from the date nominations open. If a particular skill set is required of the Chair, and no new candidates meet the requirements, the Chairperson may reappoint the same individual for a second one-year appointment. Infrequently, to achieve the desired complement of skills and talents for the group, it is necessary to appoint a Chair who has been a member of HIMSS less than 24 months.

**Annual Conference Education Committee Standard Operating Procedures**

**Committee Change Structure and HIMSS Membership Roles**

Committee member terms run from July 1–June 30, with the new Committee Chair taking office on July 1. HIMSS Standard Operating Procedures for the “committee selection process,” “committee selection criteria,” and “roles and responsibilities” apply to ACEC appointees. However, in addition to the standard selection criteria, applicants are chosen by taking into consideration their topic category expertise and their years of experience within a specific industry. Finally, to be considered for ACEC, applicants must have served as an Annual Conference Reviewer for at least two years, not necessarily consecutively.

**Purpose:**
- To identify key topics for the Call for Proposal process.
- From the pool of eligible presentation proposals, recommend high-quality sessions for the HIMSS Annual Conference & Exhibition. This work is performed in conjunction with, and with recommendations from, Annual Conference reviewers.
The planning year for the ACEC runs from July 1 – June 30; the Committee meets face-to-face twice a year – once at Annual Conference and once during proposal selection, typically in August. Additional calls are held on a monthly basis.

To assist the ACEC in its task to select high-quality presentations for the Annual Conference, proposals are first reviewed and discussed by a team of Annual Conference Reviewers; input is also received from ACEC Liaisons and HIMSS staff. Each member of ACEC is appointed to chair a Topic Category Work Group(s), guide that group’s work, and present the group’s recommendations to the ACEC.

**ACEC Committee Appointees and Structure**

**ACEC Committee Chair Appointment:**
In addition to standard criteria for service as Chair to any HIMSS Committee, to be eligible for the role of ACEC Chair, volunteers must have participated as an Annual Conference Reviewer for at least two years, not necessarily consecutively; and must have participated on the ACEC for at least one Annual Conference cycle before applying for the position.

**ACEC Members:**
In addition to the standard criteria for service on any HIMSS Committee, ACEC appointees’ selection is based on topic category expertise, years of experience within industry, and service as an Annual Conference Reviewer for at least two years, not necessarily consecutively. To ensure adherence to the ACCME’s guidelines for continuing education, no appointments will be made where there is a commercial interest, i.e., vendor, consultant or otherwise.

**ACEC Liaisons:**
In addition to the members of the ACEC, liaisons may also be asked to serve. Liaisons are added to the ACEC to represent emerging audiences that are not represented among the appointed ACEC members. These are non-voting members who may serve up to two years in this capacity. Liaisons are approved by the HIMSS Board of Directors and must be HIMSS members.

Other than non-voting, Liaisons serve the same function as other ACEC members. They are highly involved in the proposal selection process and must be present for all ACEC face-to-face meetings and conference calls.
Other Roles Involved in the ACEC
To ensure that the call for proposals is fair, unbiased and commensurate with the strategic goals of HIMSS, several different communities are engaged in the ACEC process.

Annual Conference Reviewers:
To facilitate proposal selection by the ACEC, each proposal is first reviewed and scored by a panel of Annual Conference Reviewers.

Annual Conference Reviewers are HIMSS members who lend their time and expertise to review proposals submitted to HIMSS through its call for proposal process. Their reviews are based on defined criteria, and there is a reviewer panel for each topic category. A member of ACEC facilitates each reviewer panel.

Each reviewer panel is responsible for the review of all proposals in their topic category, which they evaluate through an online system. Each proposal is reviewed at least three times by at least three different reviewers specializing in that topic category. Reviewers score proposals and provide constructive feedback to the proposal submitters.

During a series of reviewer conference calls, scheduled prior to the ACEC face-to-face conference planning meeting, the panel works to produce a list of proposal selection recommendations. During these calls, the panel also identifies any gaps in the proposal pool preventing the panel from offering a robust, comprehensive set of recommendations meeting the criteria of the topic.

At the ACEC planning meeting, the reviewers’ recommendations are discussed in detail before a determination is made regarding each proposal. ACEC members have the authority to override the reviewers’ recommendations as necessary to achieve a robust, comprehensive educational agenda.

Once proposals have been selected by the ACEC, reviewers may be assigned to:
- Mentor presenters
- Assist speakers in developing optimal presentations
- Evaluate presentation materials in advance of Annual Conference
- Evaluate sessions on-site

The Calls for Reviewers is published annually. Reviewers are selected by the ACEC. To qualify, an individual must be a current HIMSS member who has not submitted a presentation proposal in the topic category for which they will be reviewing.
Reviewers may continue to serve indefinitely, once selected, as long as they continue to meet the above two criteria.

*Continuing Education Accrediting Agency Representative [Post-Graduate Institute for Medicine (PIM)]:*
A PIM Staff Member may attend both face-to-face meetings of the ACEC as a non-voting member who serves in a continuing education consultant role.

**HIMSS Annual Conference: Conflict of Interest/Recusal Procedures**

**ACEC Members – Proposal Submission to Annual Conference**
- To avoid any conflict of interest or perceptions of conflict of interest, ACEC members will not be allowed to submit proposals for any HIMSS Annual Conferences with oversight by the ACEC.
  - If a current ACEC member submits a proposal, the proposal must be withdrawn.
  - Alternatively, the ACEC member can resign from the ACEC and keep the proposal in the review process.

**ACEC Members – Recusal Process**
- The recusal period is for the length of the Committee member’s term and is applied toward the current annual conference year.
- Notice will be provided on future ACEC applications and on the HIMSS ACEC website.
- Should these recusal guidelines not be followed, and the subject-matter expertise is compromised, the ACEC member will be removed from the committee.
- There are four situations requiring the recusal of ACEC Committee members:
  1. If an ACEC member is employed by the same organization or corporate structure as a proposal submitter, that member must recuse themselves from reviewing, scoring, commenting or recommending that proposal.
  2. If an ACEC member holds a professional and/or personal relationship with a proposal submitter, that member must recuse themselves from reviewing, scoring, commenting or recommending that proposal.
  3. If an ACEC Committee member is employed by a potentially competitive entity (i.e., same geographic area, similar population pool, or performs consulting services for a facility that competes with an applicant’s entity), that member must recuse themselves from that proposal. The ACEC Members, with HIMSS Staff oversight, will determine if ACEC Members are employed by a competitive entity.
4. If an ACEC Committee member changes jobs or engages in a consulting arrangement, and the member’s new employer/client submits a proposal, the member must recuse themselves from that proposal.

Reviewers – Recusal Process
- HIMSS members may apply to become Reviewers and submit a proposal for the Annual Conference through the call for proposals.
- The recusal period is for as long as the Reviewer’s term and is applied toward the current Annual Conference year. Notice will be provided on future Reviewer applications and on the HIMSS Reviewer website.
- Should these recusal guidelines not be followed and the subject-matter expertise is compromised, the Reviewer will be removed from the Annual Conference proposal submission and review process.
- There are five situations requiring the recusal of Reviewers:
  1. Reviewers must recuse themselves from reviewing the same topic category in which they submitted a call for proposal to avoid conflict of interest.
  2. If a current Reviewer submits a proposal and is assigned to review the same topic category, the proposal must be withdrawn or the Reviewer must be switched to review another topic category.
  3. If a Reviewer is employed by the same organization or corporate structure as a proposal submitter, that Reviewer must recuse themselves from reviewing, scoring, commenting or recommending that proposal.
  4. If a Reviewer holds a professional and/or personal relationship with a proposal submitter, that Reviewer must recuse themselves from reviewing, commenting or recommending that proposal.
  5. If Reviewer changes jobs or engages in a consulting arrangement, and the new employer/client submits an AC proposal, the Reviewer must recuse themselves from reviewing scoring, commenting or recommending that proposal.

HIMSS Board Members
If a proposal is submitted by a member of the HIMSS Board, that proposal is subject to the same proposal review process as any other individual proposal review.

HIMSS Staff
HIMSS Staff are permitted to submit proposals, subject to the same proposal review process as any other individual proposal review. If a HIMSS Staff Liaison is participating on a proposal-topic- review call as a subject matter expert, that individual is not to participate on the call during review of the liaison’s proposal (no
scoring, commenting, voting or actual attendance on the call during the conversation of their own proposal).

**HIMSS Annual Conference: ACEC and Reviewer – Review Participation**

**Review Participation**

1. Prior to group discussion, it is mandatory for all members of the ACEC Committee and all other Reviewers to submit their completed scores and constructive comments.
2. Only those members who complete and submit their scores are eligible to participate in the discussion and recommendations for that topic category.
3. Participation on the Reviewer conference calls is mandatory. If a Reviewer fails to submit scores and participate in the Reviewer calls, then that Reviewer will not be entitled to the Reviewer conference discount; they will not be included in conference recognition; and they will be excluded from participation as a Reviewer for the next review year. If a Reviewer provides a written notice of substantial reason for not attending, an exception will be considered on a case-by-case basis.
4. For a proposal–topic-category discussion to happen, a quorum of at least 50% of the proposal reviewers must be present. No proxy choices will be accepted.
5. Proposal-topic-category leadership (ACEC Committee Member) must be present to facilitate the call and must remain on the call for the entire duration.

**HIMSS Annual Conference: Rules for Proposal Submission/Speaker Acceptance**

1. In review of a proposal, changes in primary or secondary speakers cannot be recommended, as the proposal is accepted on how it was originally submitted.
2. If a speaker submits a proposal, and the proposal is accepted, and the speaker subsequently leaves the organization they represent, they may no longer present on behalf of that organization, unless the speaker receives written permission from the CEO of their former organization.
3. If a primary speaker and a secondary speaker submit a proposal together, and the primary speaker is no longer available to present, if the secondary speaker is able to present without degradation to the session, the proposal will be permitted to move forward.
4. If a primary speaker and a secondary speaker submit a proposal together, and the secondary speaker is no longer available to present, the primary speaker must present the session on their own, or the proposal will be declined.
5. HIMSS Professional Development reserves the right to make all final decisions on the acceptance or decline of submitted proposals.
6. HIMSS Professional Development reserves the right to change the format of a
submitted proposal from a live lecture to a Roundtable or other session type to ensure the best balance of educational programming for attendees.

**HIMSS Annual Conference: Rules for Multiple Submissions by One Organization**

If an organization submits multiple proposals, that organization will be limited to the total number of proposals that can be accepted across all topic categories for Annual Conference to a maximum number determined by the ACEC (a specific number is not set, as each situation is unique).