(Formerly Hospital Management Systems Society)

Written by the HIMSS Legacy Workgroup
Preface

In summer 2006, HIMSS Board Chair George Hickman, FHIMSS, asked for the creation of a Legacy Workgroup. This group fit into the Fellows Council structure because the Fellows represented the more senior members of the Society and more specifically, Lifetime Members who would be able to tell the legacy of HIMSS since its seeding in the late 1950s and its inception as the Hospital Management Systems Society (HMSS) in 1961.

The Legacy Workgroup was given the charter for documenting the Society’s colorful history from its very roots of fewer than 50 members representing practicing hospital management engineers, hospital administrators, consultants, and academicians. The objective of this endeavor was to provide the anchor for a work-in-progress history. It is expected that the work done by the Legacy Workgroup will be amended each year with new information about the Society’s activities, achievements, etc. As such, the goal was to provide more contemporary HIMSS members and future generations of members with an understanding as to how and why the Society began and how it evolved. The Legacy Workgroup wants this documented history to serve as a way to pass along our saga to future members.

The foundation of the Legacy Workgroup’s activity was a document that had been prepared by past Society Director, Richard P. Covert, PhD. Over the years, Dick meticulously extracted information from published Society newsletters. This document was annually updated and appeared in the annual membership directory; the last directory published for the year 2000-2001. The Legacy Workgroup supplemented Dick Covert’s work by adding information, with sources such as personal experience (from those who lived the history) and historical documents.

I would like to acknowledge two primary sources for a wealth of new knowledge that was incorporated into the history document. First, there was Ed Gerner who had worked with the late Dr. Harold Smalley to plant the seed for HIMSS. Both were founders of the Society: Ed was its first president (1961-1963) and Harold was the first Executive Director. Ed provided previously unknown information.

Second, John Freeman, PhD, FHIMSS, was a continuous source of information. John, another founding father, co-authored with Smalley the book, Hospital Industrial Engineering, which became the bible for hospital management systems professionals. John also is noted for his generous contributions to the Legacy Exhibit which was first unveiled at the 2007 Annual HIMSS Conference & Exhibition in New Orleans.
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I wish to also acknowledge and thank others who contributed their efforts to this document. They are: Bob Durej, FHIMSS; Richard Friedland, FHIMSS; Alan Goldberg, FHIMSS; Dennis L’Heureux, FHIMSS; Frank Milewski, FHIMSS; Justin Myrick, FHIMSS; Frank Overfelt, FHIMSS; Jeff Suszkowski, FHIMSS; and Mark Tepping, FHIMSS. I also want to thank John Werner and Jack Gilbert, EdD, former members and past HMSS Board of Directors' members for their input.

As noted above, those who contributed to this effort lived the HMSS/HIMSS history, particularly for the period of the Society’s genesis through 1993. It is our hope that this is the first stage of a work-in-progress and that the same degree of exuberance will be demonstrated by the more contemporary members to continue documenting the HMSS/HIMSS Legacy.

Barry T. Ross, FHIMSS, Lifetime Member
Chairman, Legacy Workgroup
July, 2007
Dedication

August 6, 1924 – May 11, 2007

This work is dedicated to the memory of Edward J. Gerner. Ed was pursuing his industrial engineering studies at the University of Pittsburgh while working in the steel industry. Concurrently, Harold E. Smalley was working on his PhD at Pitt when he introduced methods improvement concepts and industrial engineering techniques to Children’s Hospital of Pittsburgh. The hospital, as a result, desired to pursue these concepts and Ed Gerner was selected for the job in 1956. This began the strong Smalley-Gerner bond that transcended Smalley’s move to Georgia Tech in 1958.

As co-founder of the Hospital Management Systems Society (HMSS) and as its first president, he contributed significantly to the Society’s legacy, guiding it through its formative years that included relationship development with the American Hospital Association. As a pioneer in hospital management engineering, his belief was that there needed to be a means for networking among practitioners to share experiences and knowledge . . . the tenet upon which the Hospital Management Systems Society was founded.

He developed the first known hospital Management Engineering department in the country at Children’s Hospital of Pittsburgh and provided his services to hospitals around Western Pennsylvania, thereby helping spread the management systems profession in hospitals. As a hospital administrator in Pittsburgh and a Fellow in the American College of Healthcare Executives, he understood, appreciated, and fully supported the importance of hospital management systems.

Twenty-one years after creating HMSS, he and three other practitioners formed the Western Pennsylvania chapter of HMSS in 1982.

Ed was eager to become an active participant in the legacy documentation initiative. He contributed information that would have been forever lost without his involvement. Ed desired to see the finished product but his untimely passing did not permit this.

Without Ed’s foresight, initiative, and close relationship with Harold Smalley, we would not have had this legacy to write about. HMSS/HIMSS was Ed’s labor of love.
Pre-1961 – The Formation Years for the Hospital Management Systems Society

The Healthcare Information and Management Systems Society (HIMSS) was organized in 1961 as the Hospital Management Systems Society (HMSS), an independent, unincorporated, nonprofit, voluntary association of individuals.

**Purpose:** HMSS was founded on the thesis that an organized exchange of experience among members and other interested parties could promote a better understanding of the principles underlying hospital management systems and could develop new principles for improving the skills of the person who directs hospital programs and the practitioner who analyzes, designs, or improves hospital systems. The purpose of the Society as stated in the original constitution was “to promote the continual improvement of hospital management systems through organized programs of research, education, and professional practice.”

**Management Engineering Activity in the 1950s:** The formation of the Society was preceded by increasing amounts of management engineering activity in healthcare, for the 1950s were years in which the teachings of Taylor and Gilbreth began to attract the attention of hospital leaders. During this decade, isolated attempts to improve hospital methods and procedures were converted into an organized methods improvement movement. In 1952, three major events occurred. The American Hospital Association (AHA) established its Committee on Methods Improvement; Lillian M. Gilbreth, Ruth P. Kuehn, and Harold E. Smalley organized and conducted a two-week workshop on hospital work simplification at the University of Connecticut; and Earl J. Frederick became the first full-time hospital management engineer when he was employed jointly by the Cleveland Clinic and St. Luke’s Hospital. The goal of these early efforts, which served as a foundation for HMSS for years, was the improvement of services to patients and the reduction of costs.

Drs. Harold Smalley, Lillian Gilbreth, and John Freeman (Charter Member and Past President)
(February 1965)
AHA’s Committee on Methods Improvement: This committee reviewed and publicized early methods improvement activities, and during the late 1950s, the AHA Committee conducted a series of basic institutes in various parts of the country to familiarize those in the field with methods improvement principles and techniques.

First Hospital Management Engineering Department: Harold E. Smalley, who had conducted the Connecticut workshop in 1952 and had been a member of the AHA Committee on Methods Improvement while at the University of Pittsburgh Health Center, served as the Assistant to the Vice Chancellor of Health Professions. He conducted methods improvement work at Children’s Hospital of Pittsburgh and, as a result and at the behest of the Assistant Executive Director of the hospital, recruited Edward Gerner from J&L Steel in 1956. This distinguished Gerner as the second hospital management engineer in the country and the first to establish a management engineering department.

During the period of 1956 through 1960, hospital management engineering practitioners were seeking an avenue to allow easy exchange of ideas, particularly to encourage discussions of project studies and approaches among them while the AHA focused on marketing the profession to hospital administrators. This difference in approaching the profession stimulated sowing the seed for HMSS.

New Profession: With an interest in the newly founded profession, Harold Smalley, Ed Gerner, Dick Dudek (industrial engineering professor from Texas Tech), and a few others met several times over the years in Baltimore and Atlantic City, in conjunction with the annual Middle Atlantic Health Congress in the late 1950s. These meetings became organizational development sessions for what was to become HMSS. The organization was founded in 1961 to foster the continual improvement of healthcare management systems through organized programs of research, education, and professional practice. Dr. Smalley moved from the University of Pittsburgh to Georgia Tech in 1958.

AHA Conference for Hospital Management Engineers: In 1960, the AHA Committee began to de-emphasize basic institutes in favor of a program to cooperate with and assist hospitals that had established professional methods improvement programs. Specifically, the AHA Committee sponsored an Invitational Conference of hospital management engineers in Chicago in May, 1960, followed by the first annual three-day Advanced Institute which was held at AHA Headquarters in Chicago in March, 1961.

1961 – HMSS Constitution Drafted

Foundation of HMSS: In collaboration with information and management colleagues at Georgia Tech, including Howard W. Woods, John R. Freeman, A.D. Joseph Emerzian (University of Connecticut), and Pamela M. Hendrix, Dr. Smalley designed a questionnaire to test the extent of interest in forming a new society. In
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May, 1961, this questionnaire was sent to 50 persons known to be involved in hospital management engineering, and favorable responses from 37 practitioners and educators led to the decision to proceed with preliminary plans for a new society. Using the information from the questionnaire responses and from other contacts and sources, ad hoc committees were formed to draft provisions of a constitution.

Participating in this committee work were William T. Delamar, Edward J. Gerner, Carl F. Thielmann, Frank A. Sorad, A.D. Joseph Emerzian, and Howard W. Woods. Significant input was also received from John R. Freeman, Fred W. Green, George L. Deschambeau, and Gerald Nadler.

**Constitution Drafted:** During October, 1961, a constitution was drafted and circulated for review and comment. The Constitution of the Healthcare Management Systems Society was certified at Society headquarters on the campus of the Georgia Institute of Technology on November 1, 1961, with a proviso that persons admitted to membership within two months of that date would be considered to be Charter Members.

**Membership Categories:** Membership application forms were sent from the Atlanta headquarters to all persons believed to be interested in this new society. The first application was received on November 6, 1961, from Edward S. Ferrell, who was admitted as a Full Member on November 22, 1961. Initially, there were five membership categories: Full, Associate, Affiliate, Honorary, and Commercial. Only Full and Associate Members (graduate industrial engineers) had the right to vote. Overtures were made by the American Institute of Industrial Engineers (AIIE) in 1961 for the new organization to affiliate with the Institute.


**First HMSS President:** Agreeing to serve as temporary officers of HMSS until the first national convention were president-Edward J. Gerner, Jr.; vice-president-Edward H. Noroian; secretary-Joseph V. McKenna; treasurer-George L. Deschambeau; executive director-Harold Smalley; Membership Committee-George Strode and Howard W. Woods Jr.; Program Committee-Leo M. Cavanaugh; Nominating Committee-George Bird, William T. Delamar (chairman), and Edward S. Ferrell; Election Committee-Frank A. Sorad, and Carl R. Thielmann.
1962 – First National Convention Held in Baltimore

The Charter Membership classification was closed January 1, 1962. The official Constitution with, the names of the forty-five Charter Members1 who were admitted, was distributed on January 31, 1962.

Between then and March 31, 1962, 9 more members were admitted, making a grand total of 54 members. They were classified as 26 Full Members, 8 Associate Members, 14 Affiliate Members, 6 Commercial Members, and no Honorary Members.

Publications - Newsletter: An interim newsletter was issued by the executive director to the membership on March 5, 1962. Items covered were the executive director’s trips to Pittsburgh and Chicago to discuss Society business with its members, plans for the forthcoming national convention and AHA Advanced Institute, and internal Society operations.

Topics under discussion were the possible affiliation with the American Institute of Industrial Engineers (AIIE) and the American Hospital Association (AHA), and committee appointments for 1962-63. The first issue of the official newsletter, edited by J. V. McKenna, was distributed to the membership in late March, 1962. (The Society has published an official newsletter on a quarterly, or more frequent basis since then.)

National Convention: The first National Convention was conducted on April 1, 1962, at the Emerson Hotel in Baltimore in conjunction with the AHA Advanced Institute on Methods Improvement. Edward J. Gerner was elected president for 1962-63, and Harold E. Smalley was elected executive director. Other national officers elected for that year were Edward H. Noroian, vice president; J. V. McKenna, secretary; and George L. Deschambeau, treasurer. Officers served from the National Convention at which they were elected until the following National Convention.

Baltimore Resolution: The primary topic of importance at this meeting was the adoption of the “Baltimore Resolution”2 which established a special committee to negotiate with the AHA concerning affiliation. This committee was to request that AHA establish a personal membership department for “management systems” and to allow the Society to maintain maximum autonomy of membership requirements and admissions. The committee was also to contact the AIIE concerning affiliation with that organization.

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1 There is a discrepancy in the number of Charter Members as provided by the original history document (47) and as provided by the proceedings of the April 1, 1962 National Convention (45). One might surmise that because there were 47 who joined between November and December, 1961 and 45 as of January 1, 1962 that perhaps of the original 47, two dropped out prior to 1962. Unfortunately, attempts made to determine the reason for this difference did not result with an answer.

2 The full text of the resolution can be found in Appendix I.
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**HMSS Seal:** Under the leadership of Frank T. Kubic, the Seal Committee was responsible for developing a seal for the Society. Dr. Smalley asked that a seal be selected that would be simple and dignified and be compatible with the tone of the “management improvement movement and the Society.” There were a number of suggested seal designs and one was selected. It was agreed to refer the elements of this choice to Natalie Emerzian (wife of A. D. Joseph Emerzian) for design of the Society’s original official seal, which was adopted in August, 1962. The symbols displayed on the seal were the lamp of knowledge, the cross representing the hospital field, and an orbit of process chart symbols denoting modern professional practice in the age of electronics.

**Treasurer’s Report:** George L. Deschambeau gave the Treasurer’s report for the period of October 4, 1961 through March 31, 1962. Income was $670.00 and expenses were $82.97 for a net of $587.03. Based on a dues structure of $20 for full members, $15 for associate members, and $10 for affiliate members, there was $476.00 in receivables.
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Hospital Management Systems Society

225 North Avenue, N. W.
Atlanta 13, Georgia

OFFICIAL SEAL ADOPTED 6/62
The lamp is the lamp of knowledge representing the emphasis placed upon research and education as applied to the hospital field represented by the cross. The process chart symbols represent industrial engineering and the orbiting of the symbols denote modern professional practice in the age of electronics. The symbolism is tied together suggesting the systems approach in the solution of hospital problems.

NATIONAL OFFICERS 1962-63:

Edward J. Gerner, Jr.
PRESIDENT

Edward H. Norcian
VICE-PRESIDENT

J. V. McKenna
SECRETARY

George L. Deschambeau
TREASURER

Harold E. Smalley
EXECUTIVE DIRECTOR
HIMSS Roster: The official HIMSS roster, dated April 25, 1962, indicated 59 members with representation by states as shown below.

Number Members - April 1962
Total = 59

Membership Composition by Classification
April 25, 1962

NOTE: Affiliates were administrators and nurses with a serious interest in methods improvement in hospitals
1963 – HMSS Holds Second National Convention

The second National Convention was held in Chicago in May, 1963, in conjunction with the AHA Advanced Institute on Methods Improvement. George Deschambeau was installed as president for 1963-64. Other officers included Fred W. Green, vice president; Edward S. Ferrell, secretary; Frank A. Sorad, treasurer. Harold E. Smalley continued as executive director.

The Society was heavily engaged in dealing with growing pains.
- John Freeman reported that the national office in Atlanta had handled more than 6,000 items of correspondence and mailing.
- Karl Bartscht was asked to inquire about the interest of the University of Michigan in establishing an information center to work with the Society in providing a repository for management engineering reports.

Publications: The first research bulletin was published in 1963, and through its publication committee, other research results were issued periodically.

1964 – National Headquarters Moved to Chicago

The National Headquarters move from Georgia Tech to offices of the Chicago Hospital Council in the AHA Headquarters building on April 1, 1964, was announced to the members.

At the third National Convention in New York City in June, 1964, the elected officers were William T. Delamar, president; Edward H. Burnet, vice president; L. Thomas Wilburn, secretary; Edward S. Ferrell, treasurer; and Harold E. Smalley, executive director. Dr. Ruth Keuhn was unanimously elected as the first Honorary Member of the Society.

Code of Ethics: A code of ethics was developed by the Professional Practice Committee at this meeting and accepted by the members on March 8, 1965 (see Appendix II). Twenty-three proposed constitutional amendments were approved.

Collaborative Efforts: The announcement of the formation of the "Cooperative Information Center for Hospital Management Studies" at the University of Michigan under a grant from the W. K. Kellogg Foundation was welcomed. Society members would receive free copies of its publications during its first year. The Society during this period was active in assisting in the formation of the Hospital Division of AIIE, which was officially established on May 15, 1964, under the leadership of Fred W. Green.

AHA Affiliation: Efforts to become affiliated with the AHA were less successful than other collaborative initiatives established this year. After considerable discussion, AHA notified the Society in 1964 that there was no budget or personnel to accept additional affiliated societies. Nevertheless, the Society continued, as it had since its
formation, to cosponsor AHA Advanced Institutes on Methods Improvement, which
were held at the same time as the national conventions.

1965 – National Convention in Chicago

The Fourth Annual National Convention was held in Chicago in May, 1965. The
following officers were elected for the 1965-66 term: Edward H. Burnet, president;
Addison C. Bennett, vice president; Karl G. Bartscht, secretary; Edward S. Ferrell,
treasurer; and George Deschambeau, executive director.

The newsletter and the employment opportunities service continued to be
conducted from Dr. Smalley’s office at Georgia Tech, with John Freeman as
newsletter editor. Matthew F. McNulty Jr., was elected the second Honorary
Member.

1966 – HMSS Affiliates with the American Hospital Association

San Francisco Resolution: At the Fifth Annual National Convention held at the
Fairmont Hotel in San Francisco in May, 1966, it was announced that the AHA
Committee on Personnel Administration had joined other AHA committees to
encourage the Society’s affiliation. Affiliation with AHA was now a definite
possibility.

As a result, the pros and cons of affiliation were discussed during the meeting. The
“San Francisco Resolution” reaffirmed the Society’s posture as previously stated in
the “Baltimore Resolution” and a new committee was appointed to pursue the
negotiations with AHA. Advantages identified included paid staff, while difficulties included having to work
within a bureaucracy, having to give up an independent treasury, and possibility
altering the organizational structure. The Society wanted to able to establish its own
requirements for membership, subject to approval of the AHA.

National Officers: Edward Gerner, the Society’s first president, and Harold Smalley
were recognized for their leadership roles during the conference. The national
officers elected were Fred W. Green, president; Karl G. Bartscht, vice president;
John R. Freeman, secretary; Addison C. Bennett, treasurer; and George L.
Deschambeau, executive director. In other action at the meeting, full membership
in the Society was opened to include consultants who qualified for AHA
memberships and to analysts and technicians who successfully completed an
approved course of study. Lillian M. Gilbreth was named the third Honorary
Member.

AHA Affiliation: On December 15, 1966, the Board of Trustees of AHA accepted the
petition of the Society for affiliation. Members of the Society who were not also
members of AHA were sent applications forms for AHA membership. Dual
memberships were maintained for two years before a single membership
application was adopted. Affiliation with AHA gave the Society strength and
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stability, and together with a relaxation of membership requirements, a broader membership base.

1967 – Bylaws, Rules and Regulations of HMSS Approved

The Bylaws, Rules, and Regulations of the HMSS of AHA were approved May 9, 1967, by the independent Society with the understanding that certain provisions of its constitution would be respected even though such provisions were not stated in the Bylaws.

In May 1967, the Sixth Annual National Convention was held in Toronto, Ontario. A plaque was presented to Harold Smalley in appreciation for his efforts in the formation of the Society. The first paid secretary of the Society, replacing the voluntary executive director position, was William J. Van Cleve, director of the Division of Personnel Management at AHA. The 1967-68 national officers and board members were George Deschambeau, president; John R. Freeman, president-elect; Karl G. Bartscht, Addison C. Bennett, Patric E. Ludwig, and L. Thomas Wilburn Jr., board members.

1968 - New York Becomes First Affiliated Chapter

The Seventh Annual National Convention was held in Tampa, Fla., in May, 1968. The national officers and board members consisted of John R. Freeman, president; Addison C. Bennett, president-elect; William T. Delamar, George Deschambeau, Fred W. Green, Patric E. Ludwig, and David R. Shaw, board members.

New York Chapter: The formation in New York of the first officially recognized affiliated chapter of HMSS, the Hospital Management Systems Society of Greater New York, was announced. The chapter was also an affiliate of the American Institute of Industrial Engineers – Hospital Division (Tappan Zee Chapter). Bill Staib served as its first president. Its members were from the boroughs of New York City, Long Island, and New Jersey.

The official affiliation agreement was signed with the AHA on October 21, 1968.

Publications: It was announced that the AIEE Book of the Year Award went to Harold E. Smalley and John R. Freeman for Hospital Industrial Engineering.

1969 – Full Membership Requirements Broadened

The Eighth Annual National Convention was conducted in Houston in May, 1969. The elected officers and board members were Addison C. Bennett, president; Patric E. Ludwig, president-elect; Karl G. Bartscht, John R. Freeman, Richard M. Grimes, David H. Harris, and David R. Shaw, board members.
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Highlights of this convention included a change in the name of the Advanced Institute on Methods Improvement to the Institute on Hospital Management Engineering. Full membership requirements were broadened to include any person, regardless of educational qualifications, who was actively and substantially engaged in programs of research, education, or professional practice in the field of hospital management systems.

1970 – HMSS Fiscal Year Goes to Calendar Year

The Ninth Annual National Convention was held in February, 1970 in New Orleans. Through a change in the Bylaws, the Society’s year was changed to coincide with the calendar year. Consequently, the 1969-70 officers continued in office through calendar year 1970.

HMSS and AIIE Programming: Between 1964 and 1970, one of the major activities of the Hospital Division of AIIE was to conduct technical programs as a part of the AIIE Annual Conference held in May of each year. In 1970, the Division held the first Divisional Conference within the AIIE program. This meeting was held in New Orleans just prior to the HMSS-sponsored Institute on Hospital Management Systems. Thus was spawned the beginning of a pattern of Annual Systems Conferences, jointly sponsored by the two organizations.

The opportunity to attend a full week of hospital-oriented technical papers caused this joint annual conference to become the major technical meeting in the field of hospital management engineering. Activities of the previous year recounted at this meeting included the

- Publication by the AHA of Management Engineering in Hospitals;
- A description of hospital management engineering written by members of the Society; and
- Development of the Multi-hospital Management Engineering Program Directors Committee and their sponsorship of an International Conference for Directors of Multi-hospital Programs.

Awards: At this convention, the first Literature Award was presented.

1971 – HMSS Has Two Affiliated Chapters

The 10th Annual National Convention was held in Denver in February, 1971. The 1971 officers and board members consisted of Patric E. Ludwig, president; David H. Harris, president-elect; Addison C. Bennett, Richard M. Bramblett, Richard M. Grimes, Ben W. Latimer, and James B. Mathews, board members.

Programs and People: The Education Committee reported that it had worked with AHA educational coordinators on six institutes in addition to the Institute on Hospital Management Systems. John R. Freeman announced that he could no longer edit the newsletter. Steven Friedman, the new secretary replacing William J. Van Cleve,
was appointed as editor of the newsletter. The Society now had two affiliated chapters, and eight others were in various stages of being implemented.

1972 – HMSS Membership Criteria Expands

The 11th Annual National Convention was held in San Francisco in February, 1972. The 1972 officers and board members were David H. Harris, president; Ben W. Latimer, president-elect; and Richard M. Bramblett, Barton R. Burkhalter, Patric E. Ludwig, James B. Mathews, and Kenneth Pierce, board members.

Members in Computer Information Systems: The primary discussion focused on whether the AHA should actively pursue the development of the Society for Computer Information Systems. A subcommittee was appointed to look into hospital productivity. The committee later reported that a separate Society was not needed and that these individuals could be attracted to the existing Society.

National Cooperative Services Center: Colin Churchill, director of the Hospital Research and Educational Trust, announced to the members that the W. K. Kellogg Foundation had agreed to fund a modified version of the proposal submitted by the Society to develop a National Cooperative Services Center for Hospital Management Engineering.

Member Services: New criteria for the formation and approval of affiliated chapters were mandated by the board of directors. These criteria were developed to clarify the role of affiliated chapters and their relationship to the national Society, as well as to ensure reasonable uniformity and consistency in chapter organization and recognition.

1973 – Educational Meeting Name Changed

The 12th National Convention was held in February, 1973 in Atlanta. The national officers and board members were Ben W. Latimer, president; Barton R. Burkhalter, president-elect; Robert N. Davis, William T. Delamar, Julius Spivack, and Wilson L. Williams, board members. The name for the HMSS portion of the joint educational meeting was changed from the Institute on Management Systems to the First Annual Systems Conference.

1974 – Bylaws Change to Institute Regional Directors for HMSS Board

The 13th Annual Convention was held in Houston in February, 1974.

Bylaws Change: The bylaws were changed again to reflect the concept of regional directors as a result of concern for a geographical imbalance on the board of directors when everyone was elected at large. The board was to consist of president, president-elect, two directors at large and four regional directors. The 1974 officers and directors at large elected were Barton R. Burkhalter, president; Julius Spivack, president-elect; Anthony F. Licata, secretary; Robert N. Davis and
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Wilson L. Williams, board members. The regional directors were Region I-William G. Flagg; Region II-John F. Roche; Region III-Michael J. May; and Region IV-John H. Eaton.

Southeast Wisconsin Chapter: The Southeast Wisconsin Chapter became an affiliated chapter in 1974. It began in 1972 as the Society of Hospital Management Engineering by co-founders Joe Steiner and Mohan Kirtane and meetings were held at the University of Wisconsin, Milwaukee.

Delaware Valley Hospital Management Systems Society: The Delaware Valley Hospital Management Systems Society (DVHMSS) was created in 1974 through the vision of Peter Ryerson (Pennsylvania Hospital) and the support of several directors of management engineering/systems in the Delaware Valley region (southeastern Pennsylvania, southern and central New Jersey and the state of Delaware, including John Werner (Graduate Hospital), Reid Hoadley (Albert Einstein), Fred Neulander (Univ. of Pennsylvania), Doug Bly (Medical Center of Delaware), Frank Milewski (Thomas Jefferson University), Bruce Herpich (Temple University), and Tony Finnamore (Lehigh Valley Medical Center).

This group was comprised largely of members of HMSS. It developed close relationships with the Delaware Valley Hospital Council, Blue Cross of Greater Philadelphia, the consulting services division of the Hospital Association of Pennsylvania, and the Management Engineering and Cost Control Services (MECCS) of the New Jersey Hospital Association. Several guest speakers were provided from these organizations.

1975 – Task Force on Society Structure Appointed

The 14th Annual Convention was held in Long Beach, Calif., in February, 1975.

Board of Directors: The board of directors for 1975 were Julius Spivack, president; William G. Flagg, president-elect; John H. Eaton, as director at large; and Louis E. Placella, Gerald C. Macks, Louis E. Freund, and Larry D. Grandia as regional directors. It was announced that Glenn C. Anderson had replaced Anthony F. Licata as secretary, but had resigned just prior to the annual meeting. After a brief interim appointment of Donald Tichenor as acting secretary, Robert C. Buldak was appointed secretary in summer, 1975.

President’s Objectives: Due to the relative inactivity of previous years, the president announced as his objectives for the year: appointing a task force on Society structure; having the president-elect develop a 1976 budget; and promoting the Society as an advocate of management engineers in the field.

Professional Practice Considerations: The Professional Practice Committee surveyed the membership and announced salary and other statistical information. The same committee also raised the question of certification of management engineers, feeling that the professional license for engineering was not adequate to define practitioners in the field.


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The 15th Annual Convention was held in Colorado Springs, Colo., in February, 1976. William G. Flagg became president, and the new officers were elected as follows: Louis E. Placella, president-elect; Louis E. Freund, director at large; and John E. Rueckert, W. Thomas Winn, Nat Goodman, and Ronald D. Ellingson as regional directors. John Eaton continued as director at large. A committee was appointed to work at strengthening the relations with AIIE.

**Proceedings from Conference:** For the first time, the papers presented at the conference were published as proceedings available to conference participants.

**Annual Essay Contest:** The First Annual Essay Contest sponsored by the Society was won by Karl G. Bartscht. About 150 members attended the conference.

**Center for Hospital Management Effectiveness:** On March 1, 1976, the National Cooperative Services Center for Hospital Management Engineering was consolidated with the AHA Division of Management Effectiveness under Richard P. Covert, PhD, to become the Center for Hospital Management Engineering within AHA. As the Society was also in the Division of Management Effectiveness, increased cooperation was anticipated. The Society’s Public Relations Committee established a speakers’ bureau, organized by subject and region.

**Annual Salary Survey:** The original Annual Salary Survey was conducted for the Society by the Yale-New Haven Hospital Management Engineering Department of which Mark Tepping was Director. This resource continued to produce the survey for the next several years.

**Chapters:** As of April 25, 1976, there were 11 active affiliated chapters. The 11 chapters were Atlanta, Greater Chicago, Greater New York, Indiana, Iowa, Intermountain (based in Salt Lake City, UT), Kansas City, Minnesota, South Florida, Tennessee, and Wisconsin.

1977 – Chicago and Indiana Chapters Establish Annual Midwest Conference

The 16th Annual Convention was held in St. Petersburg, Fla., in 1977.

**Board of Directors:** The officers were Louis E. Placella, president; John E. Rueckert, president-elect; Ronald D. Ellington, director at large; and Alan J. Goldberg, Leonard B. Fox, III, Ronald T. Upham, and Chester W. Bradley as regional directors. Louis E. Freund continued as director at large. Bruce J. Tianen joined the staff of AHA in March, 1977 as staff specialist in the Department of Management Resources with appointment as director (formerly secretary) for the Society and staff for the Center for Hospital Management Engineering.

**Publications:** The AHA published Selections and Employment of Health Care Consultants, a booklet written by the Proprietary Consultants Committee of the Society.
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**Member Services:** The Chicago and Indiana chapters held the First Annual Midwest Conference in fall, 1977. The board of directors had contracted with Opinion Research Corporation of Chicago for an in-depth survey of member attitudes and needs.

The Society developed and implemented an aggressive marketing campaign to grow the membership, and printed 20,000 brochures. This was the first campaign in four years. Before the campaign the Society had 1,100 members with the following category classification:

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<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Management Engineering</td>
<td>37.9%</td>
</tr>
<tr>
<td>Hospital Administration</td>
<td>23.1%</td>
</tr>
<tr>
<td>Health Care Consultants</td>
<td>14.8%</td>
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<tr>
<td>Information Systems/Data Processing</td>
<td>11.5%</td>
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<td>Health Care Planning</td>
<td>4.7%</td>
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<tr>
<td>Financial Management</td>
<td>3.5%</td>
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<tr>
<td>University Professors</td>
<td>1.9%</td>
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<tr>
<td>Other</td>
<td>2.6%</td>
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**1978 – Richard P. Covert Appointed Director of Society**

The 17th Annual Convention was held in Biloxi, Miss., in February, 1978.

**Board of Directors:** The president was John E. Rueckert. New board members consisted of Alan J. Goldberg, president-elect; Ronald D. Ellingson, director at large; and Raymond J. Hanson, Jr. Harold E. Smalley, PhD, Thomas C. Waterman, and Paul O. Allen as regional directors. Leonard B. Fox, III was the carry-over director at large.

**Long-range Planning:** The board of directors, recognizing the need for long-range planning, spent much time developing a mission statement and goals for the Society. The board, by necessity, had spent much time on meeting planning to improve an AHA-led process that had resulted in hotel selections being made without up-to-date information. The new process reached out to other AHA societies to establish a database of recent experiences and involved society members who lived in the city where the meeting was planned.

**Society Director:** Bruce J. Tianen resigned from his position as director in August, 1978. Richard P. Covert, PhD, became acting Society director until December 21, 1978, when he was appointed director of the Society as well as director of the AHA Center for Hospital Management Engineering.

**Chapters:** The seed was sown for a new chapter to serve central and western Wisconsin with the promulgation of hospital management engineering and the trend for more communities, in addition to large metropolitan areas, to embrace the discipline. The Dairyland Chapter (formerly chartered as the Greater Madison Chapter) began in Madison. Barry T. Ross served as its first president. Early members came from four non-federal Madison hospitals, hospitals in LaCrosse and Eau Claire, and students from the University of Wisconsin.
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1979 – HMSS Goes to Tucson for Convention

The 18th Annual Convention was held in Tucson, Ariz., in 1979.

**Board of Directors:** As a result of the election, the board for 1979 was Alan J. Goldberg, president; Raymond J. Hanson, president-elect; Thomas C. Waterman and Ronald D. Ellingson, directors at large; and regional directors, Peter J. Ryerson, Howard Mintz, Merrill W. Leman, and W. John Watts.

1980 – Planning Begins for Future Expansion

The 19th Annual Convention was hosted in Lake Buena Vista, Fla., in February, 1980.

**Board of Directors:** Joining president Raymond J. Hanson, Jr., and director at large Thomas C. Waterman were president-elect Merrill W. Lehman; director at large W. John Watts; and regional directors Mark Tepping, Justin A. Myrick, PhD, Alvaro E. Pertuz, and Eugene J. O’Hea. The consultant’s referral service of the Proprietary Consultants Committee became operational in 1980, and more than 500 requests for departmental listings were sent out.

**Code of Ethics:** The code of ethics was revised in July, 1980.

**Growth of the Society:** As 1980 ended, the Society appeared ready for another spurt of activity and growth. An effort was planned to reach the professionals interested in management information systems. The board discussed ways to institute regional conferences, and a long-range planning committee extended the mission of the Society (as developed by the 1977 and 1978 board of directors) into a continuous, three-year-long-range plan of activity.

**AHA Non-deficit Budget:** The AHA required that the societies present and maintain each year a non-deficit budget and financial condition. While the Society had maintained such a position since 1977, there was no question that it strongly influenced the decisions of the board of directors and, hence, the direction of the Society. Also, nine of the Society presidents from 1971-80 either currently or previously had worked for state hospital associations. These state associations had their own or endorsed management engineering programs which dominated the field in the 1970s. The state hospital associations were aligned with AHA, thereby putting additional pressure on the Society leadership to meet this non-deficit budget directive.

1981 - Impetus for Information Systems Recognition

**20th Anniversary:** November, 1981 marked the 20th anniversary of the formation of the Hospital Management Systems Society. Although the possibility of special activities at the Twentieth Annual Convention held in New Orleans in February, 1981 was discussed, no special notice of this anniversary was celebrated.
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IS Systems in Hospitals: However, the emergence of information systems in hospitals was recognized. Ned Simpson and Tom Durel introduced a “Where’s Moses?” campaign. The significance of this catch phrase campaign was the need for a leader to bring the small, scattered pockets of hospital IS professionals to the Promised Land, i.e., HMSS.

Board of Directors: The board that year consisted of Merrill W. Lehman, president, assisted by president-elect Justin A. Myrick, PhD; directors at large Mark Tepping and W. John Watts; and regional directors Dennis P. L’Heureux, Barbara Gerhardt, Robert J. Durej, and Larry E. Shear, PhD. The primary discussion of the board in 1981 was the growing importance of management information systems and the relation of persons responsible for their installation and operation to the Society. Somewhat predicative of this discussion was the appointment of Dennis L’Heureux, a management systems engineer, as CIO of UMASS Medical Center later that year. Dennis may have represented the first CIO to serve on a HMSS board.

IS Task Force: The Task Force on Information Systems pointed out that IS professionals have different needs from practicing management engineers, and the board of directors reaffirmed the multi-disciplinary nature of the Society. The board noted the Society’s and its members’ continued involvement in both use of computers and in development of information systems. The task force provided the subsequent conference program director a track on information systems for the 10th Annual Systems Conference held in conjunction with the 21st Annual Convention and meeting in San Diego, Calif. in February, 1982.

Management Engineering Committee: In other activity during the year, the in-house Management Engineering Committee developed a “Resource Hotline” consisting of individuals who were willing to be consulted by telephone on specific hospital topics.

1982 – Society Committees Restructured

The 21st annual convention was held in San Diego in February, 1982.

Board of Directors: The board of directors for 1982, led by president Justin A. Myrick, PhD, included returning director at large Mark Tepping and president-elect Robert J. Durej; director at large Dennis L’Heureux; and regional directors John P. Werner, Charles W. Overstreet, Barry T. Ross, and Steven Pettigrew.

Committee Restructuring: President Myrick restructured the committees for the Society, combining committees that dealt in similar concepts and recognizing that some committees no longer performed viable functions. A bylaws revision committee was established to make necessary change—both those requested by the AHA, and those resulting from member dissatisfaction with the nomination and election procedures for the board of directors. They proposed, for member approval in 1983, a nine-member board of directors with eight members elected for two-year terms on a staggered basis.
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**Education:** The Society added to its educational programs by offering the College of American Pathology’s Workload Recording Methodology to cover the costs of the Society’s representative on the CAP Workload Recording Committee and by holding a two-day regional conference in conjunction with the Delaware Valley Hospital Management Systems Society.

**Publications:** The Society published *Hospital Departmental Profiles*, edited by Alan J. Goldberg, the first Society publication since 1978. In August, 1,500 copies were printed and 1,300 copies sold by January, 1983, which exceeded expectations. The first edition sold 4,000 copies. The second edition expanded the book with an initial press run of 3,000 books published in 1986. The third edition of the book was published in 1990, which doubled in length and had a total press run of 7,500.

**Chapters:** Due to an outward migration of hospital management engineering practitioners from the New York City area, the first affiliated chapter, the Greater New York Chapter, had become defunct.

As of February, 1982, HMSS had 15 affiliated chapters:

- Atlanta
- Greater Chicago
- Indiana
- Kansas City
- Southern California
- Greater Australia
- Greater Houston
- Greater Intermountain
- Greater Michgan
- Greater Tennessee
- Greater Greater Madison (later renamed Dairyland)
- Greater Iowa
- Greater Minnesota
- Greater Wisconsin

**Midwest Conference:** In summer, 1982, the Annual Midwest Conference was held in Chicago. The collaborative event was co-sponsored by the Indiana, Chicago, Southeastern Wisconsin, Greater Madison (WI), and Minnesota affiliated chapters.

**Chapters:** The Western Pennsylvania chapter was formed in Pittsburgh in 1982 by Ed Gerner, Tom Gentile, Al Allison, and Walt Ditmer, who were engaged in hospital administration and management engineering in Pittsburgh hospitals. Ed Gerner was a Charter Member of the Society and served as the first HMSS president in 1962. Tom Gentile served as the Chapter’s first president.

The Delaware Valley Hospital Management Systems Society (DVHMSS) that was founded in 1974 formally became an affiliated chapter of HMSS in 1982. The chapter also began to attract the interest and attention of local Directors of Information Systems and Healthcare Administrators.

**1983 – First Formal Long-range Plan Developed**

**Annual Convention:** In 1983, the 22nd Annual Convention, held February 8-10 in Atlanta, was followed by regional meetings in Detroit in July and in Salt Lake City in September. At the regional meeting in Salt Lake City, one of the first exchanges of data among multi-hospital management engineering programs took place.
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The 1983 annual conference in Atlanta marked the first time that vendors were invited to exhibit. Ten vendors had table top exhibits. Included were tools for cost accounting.

**Board of Directors:** The 1983 board of directors consisted of Robert J. Durej, president; Dennis P. L’Heureux and John P. Werner, directors at large; Barry T. Ross, president-elect; and newly elected directors Jack A. Gilbert, Roger S. Hendry, Peter J. Ryerson, and Robert B. McDonald.

**Board Restructured:** In 1983, members overwhelmingly approved the amendments to restructure the board that were proposed by the Bylaws Revision Committee in 1982 to increase regional representation.

As a result, the board was transformed to one consisting of:
- The president;
- One director from each of eight regions, elected for two years on a staggered basis; and
- Four incumbent directors who would be candidates for president-elect and the newly formed position of vice president, during their second year in office.

**Chapters:** Additionally, an amendment to Article 10 of the HMSS bylaws was approved by the membership to strengthen the ties between HMSS and its affiliated chapters. A methodology was developed and adapted to select the “Chapter of the Year.”

**First Long-range Plan:** Throughout 1983 and through the coordination and vision of the president-elect, the Society developed its first formal set of long-range plans:
- The bylaws revisions assigned the president-elect to head the long-range planning efforts, which led to the need for a vice president to assist the president with the other Society activities.
- It became the responsibility of the president-elect to execute the plan for his/her year serving as president.

The plans included goals:
- To increase the Society’s fiscal viability;
- To increase the benefits of belonging to the Society; and
- To stress the multidisciplinary role of the Society by meeting the needs of and recruiting all types of professionals in health care systems.

Specific objectives of the first long-range plan included:
- Establishing a student scholarship;
- Implementing a recognition program for member contributions to the Society;
- Developing stronger relationships with affiliated chapters;
- Being an advocate for hospital management systems, which included strategic partnerships with other groups; and
- Establishing a home for the developing IS constituency.
Scholarship Program: Since it was felt that the future of the Society and the health management systems disciplines would be in the hands of future members, the plan called for encouraging growth in student involvement. The plan identified several initiatives to achieve this, including implementation of a scholarship program.

Recognition Program: Deliberation occurred as to the form the recognition program should assume, i.e., purely recognition for service to the Society, chapters, and the profession versus attesting to a member’s expertise through credentialing. For a variety of reasons, it was decided that recognition for service would be the option.

This rationale was based on factors including the AHA’s position on credentialing due in part to potential legal issues, the time and expense associated with an effective credentialing program, and who the subject experts would be since the Society had many long-time, experienced professionals and these individuals would determine whether other qualified, experienced practitioners should be credentialled.

IS Committee: Heretofore, there had been no formal representation of the growing IS constituency. As a result, an IS Committee was identified by the plan to parallel the existing Management Engineering Committee.

CHME: In September, 1983, the AHA placed the Center for Hospital Management Engineering in HMSS, and, as a consequence of other organizational changes, also gave HMSS full responsibility for the CHME proceedings and information clearinghouse activities, and the resulting revenue.

Publications: The Management Engineering Committee published “Establishing an In-House Management Engineering Function” to assist hospital administrators who were considering establishing management engineering departments. Co-authors were Mitchell P. Perlin, Mark A. Tepping, Barry T. Ross, and Richard Gendel.

1984 – HMSS Enacts Membership Levels and Scholarship Programs

The annual meeting in 1984 was held in San Francisco on February 8-10. Cost accounting in healthcare was received special attention at the conference. With the 1983 Prospective Payment System under President Reagan, it was becoming more important that providers have a means to determine their costs.

Board of Directors: The 1984 board of directors, installed at the 1984 annual meeting in San Francisco, consisted of Barry T. Ross, president; Peter J. Ryerson, president-elect; John P. Werner and Roger S. Hendry, directors at large; and regional directors Robert A. Harris, Diane Harrison, Robert D. Gunn, and Phillip W. Herren. This board executed the first year’s activities specified in the long-range plan.

Special Interest Groups: In terms of structure, special interest groups (SIGs) were created for groups of whose constituents shared a common professional interest. The SIGs were established within the Management Engineering (ME) Committee.
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and the newly established Information Systems Committee. Examples were the multi-hospital ME SIG (ME Committee) and the micro-computer SIG (IS Committee). Dennis L’Heureux and Dennis Daly were appointed as co-chairs of the new IS Committee and Ed Howell was appointed as the ME Committee Chair.

Member Recognition Program: The board planned and approved a Levels of Membership Recognition Program consisting of four levels of membership, Student, Regular, Senior Member, and Fellow. The Society director was charged with reviewing applications against the criteria and point system developed and to recommend those who qualified for Fellow status. The Society board president worked with the Director to adjudicate applicant qualification issues.

Fellows: The Board appointed 31 members as honorary Fellows who would be responsible for detailing and implementing the Fellow and Senior member criteria. The honorary Fellows, who were determined in 1984 and officially recognized at the 1985 annual conference, are shown below. Julius Spivack was appointed in 1984 to serve as the first Fellows Chairperson. He led the Fellows in 1985.1

Honorary Fellows (1985 Induction)

<table>
<thead>
<tr>
<th>James M. Brislin, Jr.</th>
<th>Charles W. Overstreet</th>
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<td>Peter T. Cabban</td>
<td>Steven L. Pettigrew</td>
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<td>James G. Campbell</td>
<td>Duke K. Rohe</td>
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<td>David Z. Cowan</td>
<td>Barry T. Ross</td>
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<td>Robert M. Davis</td>
<td>John E. Ruekert</td>
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<td>Don Galimore</td>
<td>Richard L. Rydell</td>
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<td>Wayne M. Gray</td>
<td>Vinod K. Sahney, PhD</td>
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<td>Alan J. Goldberg</td>
<td>William R. Schramm</td>
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<td>John G. Hackel, PhD</td>
<td>Harold E. Smalley, PhD</td>
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<td>Doreen Hagerly</td>
<td>Arthur R. Smith</td>
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<td>Roger S. Hendry</td>
<td>Kathryn Smith</td>
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<td>James E. Hosking</td>
<td>Julius Spivack</td>
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<td>Gerald C. Macks</td>
<td>Mark A. Tepping</td>
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<td>Frank J. Milewski, Jr.</td>
<td>William J. Watts</td>
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<td>Howard Mintz</td>
<td>George W. Whetsell</td>
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<tr>
<td>Justin A. Myrick, PhD</td>
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Richard P. Covert Scholarship: To promote and recognize healthcare systems excellence in education, the Society founded the annual Richard P. Covert Scholarship. The annual scholarship ($1,000) and an all-expense-paid trip to the annual conference were to be awarded to a selected student member at the annual conference.

Personal Membership Committee: The AHA instituted the Personal Membership Committee (PMC) in 1984 to recognize the personal membership groups (i.e., societies of the Association and to improve collaborative efforts among them). The PMC provided the Society with a stronger voice within AHA and it served to help AHA

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1 Refer to Appendix V for a listing of Fellows Committee/Council Chairs
formulate positions and policies. Robert Durej, as immediate past president (1983) served as the Society’s first PMC representative in 1984. Barry Ross served as the HMSS representative to the PMC (1985-1986).

Collaborating with Healthcare Professional Organizations: In addition to strengthening relations with its affiliated chapters, HMSS initiated collaboration with other healthcare professional organizations. These groups included the American Hospital Radiology Administrators (AHRA), College of American Pathologists (CAP), Southern California Health Care Marketing Association, Health Care Internal Audit Group, and the American Society for Quality Control (ASQC).

Education: The Society took a new direction in education in 1984 by adapting the Sony International Management Game to healthcare, and conducted the program for approximately 100 administrators and financial managers from healthcare organizations throughout the country. This program signified the Society’s commitment to growing as the healthcare field changes under prospective pricing and as membership expands to administrative and financial areas.

Chapters: Although HMSS members had been meeting all over New England since the 1970s, it was not until 1984 that the New England chapter was formally chartered and recognized as an affiliated chapter of HMSS. The Chapter’s first president, Dennis L’Heureux, presided over its inaugural meeting in Kennebunkport, Maine.

1985 – Endowment Fund Established for Scholarship

Board of Directors: The 1985 board, officially installed at the 24th Annual Conference in San Antonio, consisted of Peter J. Ryerson, president; and directors from the eight Society regions: Robert A. Harris, Region 1; and vice president; Frank J. Milewski, Region 2; Roger S. Hendry, Region 3 (elected to fill the position of Diane Harrison, who resigned); Pamela A. Wilcox, Region 4; Phillip W. Herren, Region 5; Jon A. Wennermark, region 6; Robert D. Gunn, Region 7 and president-elect; and Richard Correll, region 8.

Education: The Society was again involved in new ventures in 1985. In the area of education, the Society, along with Community Systems Foundation Australia, the Hospital Research and Educational Trust, and the W. K. Kellogg Foundation, organized and conducted a three-day invitational conference entitled “Knowing, Learning, and Sharing Management Tools in Health Care.” Sixty-five persons from 5 continents and 14 countries heard and discussed 16 papers presented by attendees. There was general consensus that there was a great need for increased international knowledge sharing as the problems of healthcare were similar worldwide.

Publications: In the area of publications, the Society completed the second edition of Hospital Departmental Profiles and a new book, Working with Consultants, which replaced the 1977 HMSS publication, The Selection and Employment of Health Care Consultants.

Communications: In the area of communication, the board contracted for an electronic mailbox network among the board as a trial for this form of communication.
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American College of Healthcare Executives (ACHE): In 1985, the Society was invited to participate in the American College of Healthcare Executives’ examination confederation. Barry Ross was appointed as the HMSS representative to the confederation. The objective of the confederation, which included a number of healthcare professional associations, was to provide input and test a restructured ACHE advancement examination. The new examination was to have a profession-specific component (that was developed by each represented association for its discipline) and a generic component. HMSS provided the input for hospital management systems to ensure that the revised examination would reflect HMSS’ member backgrounds; this was accomplished through the efforts of Gerald Macks, Justin Myrick, Charles Overstreet, and Richard Rydell.

Scholarships: The board elected to give two Richard P. Covert scholarships and to start the process to endow the scholarship by establishing an endowment fund. The board also authorized the publishing of an annual report to summarize the highlights of 1985 activities through a formal document. The report was sent to members in March, 1986.

1986 – HMSS Becomes HIMSS - Healthcare Information and Management Systems Society

The 1986 conference and meeting were held in Lake Buena Vista, Fla.

Board of Directors: The 1986 board of directors consisted of Robert D. Gunn, president; and the regionally nominated directors James Turnbull, Region 1; Frank J. Milewski, Region 2; Gerald C. Macks, Region 3; Pamela A. Wilcox, Region 4; and vice president; Rodney L. Wiggins, Region 5; Jon A. Wennermark, Region 6; Robert J. Zamen, Region 7; and Richard Correll, Region 8 and president-elect.

New Name: HMSS moves to encompass information systems and telecommunications professionals, changing its name to the Healthcare Information and Management Systems Society (HIMSS).

Information Systems Professionals as Members: The Long Range Planning Committee, under the direction of Richard A. Correll, president-elect, developed plans for 1987 and beyond. It became apparent that there was no professional Society within healthcare for information systems professionals, and that the growth of the position of chief information officer would create a need for a Society that could embrace all of the professionals who should report to such a position.

As the Society had been presenting educational tracks and programs directed at information systems professionals for about five years, it seemed logical that the HMSS could fill that role. After a number of meetings of task forces and advisory committees, Mr. Correll recommended to the board that the name of the Society be changed to the Healthcare Information and Management Systems Society (HIMSS) and that the Society move to encompass information systems professionals.

In a subsequent vote of the membership on the name change, more than 80 percent of the 1,000 members who voted were in favor of the change.
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Center for Healthcare Information Management: With the change in name, a second organization was established within the AHA to assist in the expansion of the Society. This organization, the Center for Healthcare Information Management (CHIM), was established to utilize funds donated by vendors and consultants who supported the expansion of the Society. Richard A. Correll resigned as president-elect to become director of CHIM at the end of 1986.

Telecommunications Professionals: As the efforts of the Society were approved by the AHA, it became apparent that the telecommunications professionals also belonged within this organization. At the end of the year, discussions about a merger were undertaken with the telecommunications group of the American Society for Hospital Engineers (ASAE), of which it was a part. This was precipitated by the fact that prior to the advance of IT, hospital telecommunications typically were focused on switchboard operations, which generally reported to the engineering department. Directors of plant engineering were represented by the ASHE, another AHA personal membership group.

Fellows as Facilitators: The Fellows recommended and were asked to facilitate appointing Fellows as moderators for the annual conferences. Fellows chairman, Barry Ross, developed guidelines for Fellows to serve as moderators and coordinated assignments of moderators for each conference educational session.

1987 – Nominations Committee Revised

The 1987 conference was held at the Riviera Hotel in Las Vegas.

Board of Directors: The 1987 board of directors included Pamela A. Wilcox, president, and regionally nominated directors Jim Turnbull, president-elect and Region 1; Ned J. Simpson, Region 2; Gerald C. Macks, Region 3; Cheryl Wyatt, Region 4; Rodney L. Wiggins, vice president and Region 5; Doreen C. Hagerty, Region 6; Robert J. Zamen, Region 7; and Frank Overfelt, Region 8.

Member Services: It was a year of change and growth. HIMSS reached out to new constituencies in addition to its traditional core group of management engineers. With the creation of CHIM, HIMSS reached out to information systems professionals, and through its agreement with the ASHE, HIMSS also reached out to telecommunications professionals. Concurrently, the HIMSS Nominations Committee composition was revised to emphasize functional divisions. As a result of these and other efforts, the Society grew by 50%.

1988 – Annual Conference Grows by 50%

The 1988 conference, held at the Fountainbleu Hotel in Miami Beach, also had a 50% growth rate, as well as doubling the number of vendor exhibitors for the third consecutive year.

Board of Directors: The 1988 board of directors included Jim Turnbull, president, Richard Rydell, Regions 1 and 3; Ned Simpson, president-elect and Region 2; Cheryl Wyatt, Region 4; William Schramm, Jr., Regions 5 and 7; and Frank Overfelt, Vice President,
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representing Region 8. The functional nominated directors were G. Malcolm Murray, information systems, and Debbie Green, telecommunications. The ex-officio members were Hubert Austin, PhD, (information systems) and Toni Baych (telecommunications).

1989 – CHIM Becomes Independent Organization

The 1989 Annual Systems Conference and Meeting was held at the Anaheim Hilton and Towers, Anaheim, Calif. Registration totaled 1,225 people, another 50% jump in attendance. The information management exhibition had 128 vendors, filling the space available at the facility.

CHIM: This was also the last year of the original CHIM agreement, which thereafter became an independent organization with offices in Ann Arbor, Mich.

Board of Directors: The 1989 board of directors were Ned J. Simpson, president, and regionally nominated directors Richard L. Rydell, president-elect and Regions 1 and 3; Everett Hines, Region 2; Laurel Renegar, Region 4; William Schramm, Jr., Regions 5 and 7; Michael Collins, Region 6; Sharon Garrett, Region 8; G. Malcolm Murray, vice president and information systems; and Debbie Green, telecommunications.

Publications: Discussions regarding how the Society’s journal should be published continued with AHA, with the Society wishing to cover some or all of the costs of the publication through advertising. The publishing subsidiary of AHA, American Hospital Publishing, Inc., concluded, after a lengthy study, that there was not enough advertising support for it to publish the journal with advertising.

However, the Society continued its working relationship with American Hospital Publishing and the book, Productivity and Performance Management in Health Care Institutions was published. The book was sponsored by HIMSS, the American Society for Healthcare Human Resources Administration, and the Personal Membership Committee of AHA. Mark McDougall, Richard Covert, and V. Brandon Melton were editors and contributors included Alan Goldberg, John Werner, Vin Sahney, and others.

New HIMSS Director: Richard P. Covert, PhD, director of the Society since 1978, asked that he be relieved of his duties as director and continue as associate director with responsibility for educational programs. This transaction was completed when James W. Civik started as director in November 1989.

1990 – Monthly HIMSS News Newsletter Introduced and the Rebirth of a Chapter

The 1990 Annual HIMSS Conference, again cosponsored by the Society for Health Systems of the Institute for Industrial Engineers, was held February 19-22, in New Orleans. The conference continued to grow, with 128 exhibitors using 215 booth spaces, 1,605 registered attendees, and over 200 persons registered as guests for social functions.

Board of Directors: At the annual meeting, it was announced that the president for 1990 was Richard L. Rydell; with John P. Glaser, PhD, president-elect; Laurel P. Renegar, vice president; and Everett Hines and Michael Collins returning board members. New board members were Dennis P. L’Heureux, Region 1; Marion J. Ball, EdD, Region 3; John A. Page, Region 5; and Richard Peterson, Region 7.
Publications: In June 1990, a monthly newsletter, HIMSS News, was introduced to supplement the quarterly journal, and plans were made to introduce additional member services as the details were completed. Also, the third and final edition of the book Hospital Departmental Profiles, edited by Alan J. Goldberg, was published with a press run of 5,000 copies and a second printing of 2,500 copies in 1992. This book was double the original in size with 37 chapters.

Member Services: The Society had also grown, with approximately 3,700 members at year’s end.

Chapters: Upon his return to New York City, Barry Ross discovered that the relationships and communications among healthcare management systems professionals no longer existed as they had in the late 1960s and 1970s. He and Ed Snyder (both at New York City major teaching medical centers) identified the benefits to and interests of others to form a professional association. As a result, a new chapter, the Greater New York Chapter (now the New York State Chapter) was formed and became an affiliated chapter in 1991. It quickly grew as health information technology (HIT) began to blossom. Ross served as its first president and Snyder was the first vice president.

In 1990, the Colorado Chapter was organized through the efforts of Richard Friedland. It took three years until the chapter affiliated with HIMSS.

1991 – HIMSS Operates at a Financial Deficit

The 1991 Annual Conference, the Society’s 30th, was held in the Moscone Convention Center in San Francisco, with a registered attendance of more than 1,800 persons. In addition, there were more than 100 persons registered for the exhibits only, and at least 100 additional guests. The exhibition grew again, with 260 booths and 164 exhibiting companies.

The conference that year was cosponsored by both the Society for Health Systems of the Institute for Industrial Engineers and CHIM. In addition, the Society and the Society for Health Systems cosponsored for the second time a fall conference titled “Quest for Quality” which drew over 500 registrants.

Board of Directors: The 1991 board of directors consisted of John P. Glaser, PhD, president; Richard L. Rydell, past president; John A. Page, president-elect and Region 5; Laurel P. Renegar, vice president and Region 4; Marion J. Ball, EdD, vice president-elect and Region 3; Dennis P. L'Heureux, Region 1; William C. Reed, Region 2; Chloe Miller-Haynes, Region 6; Richard C. Peterson, Region 7; Robert L. Hanson, Region 8; Dean R. Campbell, appointed to represent information systems; Richard A. Correll, appointed to represent CHIM; and Louis E. Freund, PhD, appointed to represent the Society for Health Systems, Institute of Industrial Engineers.

New Director: For the first time in its recent history, the Society was operating at a financial deficit. In April, James Civik resigned as director, and Richard P. Covert, PhD, was appointed acting director until a new director could be found.
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In June, 1991, president-elect John A. Page accepted appointment to the position of executive director of the Society. It marked the first time that an elected officer of the Society received such an appointment. As a result of the vacancy created, President John Glaser, PhD, appointed second-year board member Dennis L’Heureux to fill the president-elect’s role.

**Board Strategic Planning:** A board strategic planning retreat was held to develop a formal planning document and direction for the Society. The results of a comprehensive membership survey were the basis for many decisions and plans made.

A special roast was held in Dr. Covert’s honor at the 1991 Annual Conference to commemorate his years of service to HMSS/HIMSS; it was emceed by Bob Durej. In September, 1991, Dr. Covert retired from the Society after a long and distinguished period of service to the HIMSS membership.

**1992 – HIMSS Bylaws Revised to Reflect Growth**

The 1992 Annual HIMSS Conference & Exhibition was held in Tampa, Fla. Total attendance approached 2,400, with 169 exhibiting companies. As during the previous year, the conference was cosponsored by the Society for Health Systems of the Institute of Industrial Engineers and CHIM.

**Logo Introduced:** The Society’s new identifier—three circles enclosed in a fourth circle representing HIMSS’ core disciplines within the healthcare delivery team—was unveiled at the conference. That year also marked the 25th anniversary of HIMSS’ affiliation with the AHA. In addition, the Society and the Society for Health Systems again cosponsored a fall conference entitled “Quest for Quality,” drawing 400 registrants.

**Board of Directors:** The 1992 board of directors consisted of Dennis P. L’Heureux, president; John P. Glaser, PhD, past president; Marion J. Ball, EdD, vice president; William C. Reed, president-elect; Kathryn F. Smith, vice president-elect; and board members Randal E. Carson, Pamela A. M. Cocavessis, Robert L. Hanson, Geoffrey J. Suszkowski, Ph.D., Chloe Miller-Haynes, George Levesque, and Richard A. Correll, representing CHIM.

**Bylaws Revised:** During the first meeting of the 1992 board of directors, the bylaws were revised to reflect HIMSS’ growth, the diversification of its members’ interests, and the intent to foster an organization that supports meeting the needs of its members through the integration of common interests while still recognizing individual interests. Members cast a landslide majority vote in favor of these changes in spring, 1992. Approved changes included reorganization of the board and changes to the nominations and elections process.

**Staff Added:** To support the Society’s new directions and enhancements to membership services, the following vacancies were filled: Lyn Hopmayer, assistant director for programs and meetings; Andrew Pasternack, assistant director for publications; and Pamela Barrett, associate director. These well-qualified staff members provided the resources needed to dramatically enhance HIMSS’ publications, educational programming, and membership services.
AHA Restructuring: National interest in healthcare reform also reached a peak that year. President L’Heureux’s fall journal message in support of AHA’s reform vision brought a warm letter of appreciation from AHA President Richard Davidson. The year ended with a change in AHA’s structure that made HIMSS a part of the Division of Information Resources, reporting to the Division of Policy.

1993 - HIMSS Becomes a Separate, Independent Organization

Conference: The 1993 Annual HIMSS Conference and Exhibition was held March 1-4, 1993 in San Diego. The conference drew 4,400 attendees and 195 exhibitors, breaking records for attendance and exhibition size. In another first, the conference proceedings were prepared in a multi-volume boxed set. Also, copies of the newly redesigned HIMSS journal, *Healthcare Information Management* were distributed to attendees as well as to all members.

Among the most newsworthy events of the conference were a keynote session by Steven Jobs, founder of Next Computer and cofounder of Apple Computer, and a general session by James Carville, chief strategist for Bill Clinton during his successful 1992 campaign for president.

Board of Directors: The 1993 board of directors were William C. Reed, Kathryn F. Smith, vice president, George E. Levesque, president-elect, and Geoffrey J. Suszkowski, PhD, vice president-elect; and board members Nancy E. Aldrich, Randal E. Carson, Robert L. Hanson, RN, Teresa J. Jacobsen, RN, MS, Chloe A. Miller-Haynes, Walter C. Perrin, representing CHIM, A. Charles Platt, John Schreier, and Pamela A. Wolff.

Independent HIMSS: HIMSS and AHA began to examine the possibility of an independent HIMSS. During 1992 and into 1993, AHA began a process of restructuring triggered by AHA President Richard Davidson. That restructuring would eventually see a reduction in the 1,000-person AHA workforce of about 30 percent and planning for relocation from its historic Chicago Streeterville district headquarters to another, smaller office space.

As part of that restructuring, AHA began probing options for its personal membership groups, of which HIMSS was among the most likely to be able to survive as an independent entity.

On Its Own: Seizing the moment, HIMSS and AHA agreed in the spring of 1993 to examine the possibility of HIMSS becoming independent. In the aftermath of the conference’s success, as well as the Society’s continuing membership growth, AHA and HIMSS agreed to dissolve the 27-year affiliation between the two organizations. The separation occurred on September 10, 1993, when HIMSS became an independent, not-for-profit 501(c)(6) corporation.

New Headquarters: HIMSS moved into new headquarters one month later at 230 E. Ohio Street in Chicago’s Streeterville neighborhood, a location within walking distance of both the Blue Cross/Blue Shield Association and the American Medical Association.
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Education: Within days of the move, the 1993 Annual HIMSS Fall Communications Conference and Exhibition was held October 13-15, 1993 in Pittsburgh. The conference, attracting several hundred attendees, featured a keynote address by Henry “Harry” Hirsch, president and chief operating officer of communications giant WilTel Communications, Houston.

Chapters: In another sign of growth, by year end there were nearly 40 HIMSS-affiliated chapters. Also during 1993, HIMSS members in voice/data/image communications voted to officially designate this area as “telecommunications.”

Fellows: The Fellows Organization, which had fallen into neglect the previous two years, was resurrected and Frank Overfelt installed as chair.1

Healthcare Reform Related to HIS: Parallel to HIMSS' steady growth and evolution were several developments that placed information and management systems at the forefront of the healthcare reform dialogue. Among them were the following:

- President Clinton's Health Security Act, unveiled in September, 1993, featured a section on the role of information systems.
- Legislation was introduced that same month by Senator Christopher (Kit) Bond (R-MO) that proposed the development of wide-area healthcare information networks with which to streamline administration of healthcare financial and clinical operations.
- During 1993-94, other legislation was introduced calling for funding of test bed healthcare information networks and telemedicine pilot projects by Senator Tom Harkin (D-IA), Representative Rick Boucher (D-9th VA), Representative Larry La Rocco (D-1st ID) and others.
- The Joint Commission on Accreditation of Healthcare Organizations added standards regarding hospitals’ information management functions to its 1994 accreditation manual. (A number of HIMSS members were reviewers of early drafts of the standard.)
- The Workgroup on Electronic Data Interchange published a revised (upwardly) estimated savings from healthcare EDI in its October, 1993, report (a follow-up to its July 1992 report) on the use of information technology in healthcare.

In this setting, HIMSS once again seemed to be heading for a major success with its annual conference—a critical milestone for the now-independent Society. By mid-December, 1993, exhibition space for the 1994 Annual HIMSS Conference and Exhibition in Phoenix was nearly sold out.

1994 – “Clinical Systems” Voted a Membership Constituency

The annual conference was held February 13-16 in Phoenix. By conference time, the exhibition floor had sold out, with 248 exhibitors and a waiting list of 40 vendors. Total attendance hit 6,300, another record.

1 Refer to Appendix V
Publications: At the conference, HIMSS distributed copies of *Guide to Effective Health Care Information and Management Systems and the Role of the Chief Information Officer*, a completely revised and expanded version of an earlier book first published in 1987. The publication was the first of a planned series of new HIMSS “Guide to” books.

Board of Directors: The 1994 board of directors were George Levesque, president, Geoffrey J. Suszkowski, PhD, vice president, Nancy Aldrich, president-elect, A. Charles Platt, vice president-elect, and board members Richard C. Howe, Richard Reynolds, Toni Baych, Robbie G. Trussell, RPh, Randy Carson, Teresa J. Jacobsen, RN, MS, John Schreier, and Pamela A. Wolff.

Member Services: In May, 1994, HIMSS members overwhelmingly voted to make “clinical systems” a formal membership constituency (along with information systems, management engineering, and telecommunications).

Bylaws Change: HIMSS members also voted to adopt a change in how the HIMSS Board of Directors selected its leadership. These bylaws changes were put into operation on July 1, 1994, consistent with the beginning of the corporate fiscal year.

On October 29, 1994, Harold E. Smalley, PhD, passed away. He will always be remembered for his foresight to lay the groundwork for the development of healthcare management systems professionals and for founding the Society representing them. Smalley served the Society well as founder, Charter Member, and first Executive Director.

1995 – Transition to New Committee Structure Completed

More than 10,000 attendees and 372 exhibitors were on hand for the 1995 Annual HIMSS Conference, February 12-16, in San Antonio.

Deemed the “hottest annual meeting in healthcare” by Modern Healthcare, the conference’s growth paralleled a key finding of the 1995 HIMSS/HP Leadership Survey, *Trends in Health Care Computing*: projected major increases in information spending during the next two years.

Anticipation of increased spending for healthcare automation drew top executives from three of the country’s largest technology developers, all anxious to grab the attention of HIMSS ’95 attendees:

- Bill Gates, founder and CEO of Microsoft;
- James Buckley, president and general manager of Apple USA; and
- Charles Wang, president and CEO of Computer Associates.

New Fiscal Year Set-Up: The final transition of officers from the calendar to fiscal year occurred in 1995. Nancy Aldrich and Charles Platt became president and vice-president, respectively, on January 1, 1995. They would be the first officers of the Society to serve for more than twelve months since HIMSS’ earliest days. George Levesque and Geoff Suszkowski, PhD, along with Randy Carson and Pamela Wolff, continued to serve
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as members of the board through June 30, 1995. With the institution of a new, six-month orientation period, four new Directors-elect also worked with the board during this period.

Board of Directors: On July 1, 1995, the 1995/96 board of directors officially took office. Included were: Nancy Aldrich, president; Charles Platt, vice president; Richard C. Howe, PhD, president-elect; Richard Reynolds, vice president-elect; and directors Toni Baych, Ron Contrado, Deborah Krau, Teresa Jacobsen, RN, John Schreier, Cindy Spurr, MBA, RN, Cheryl Turner, and Robbie G. Trussell, RPh.

New Committee Structure: The transition to a new committee structure, one in which volunteers serve for a two-year term, had been accomplished. The new structure provided for adequate continuity and improved leadership on the committee by ensuring that not more than half the committee members retire each year.

In addition, committee chairs were now selected from among those that would be second-year committee members. A committee “leadership triad,” consisting of the volunteer chair, a liaison from the board and a staff representative was developed for each committee. The purpose of the new structure was to ensure that progress toward the goals established by the board was maintained.

Committee chairs for 1995/96 included John Templin - Education, Gary Kurtz - Publications, Mary Alice Annecherico, RN - Professional Development, and Julie Glen, RN - Membership Services and Marketing.

New Strategic Committees: In order to better enable the board to achieve its strategic mission for the Society, several new strategic committees of the board were developed. Among these were Collaborative Relations, Community, Image, Leadership, and Technology. As part of the newly created volunteer/leadership orientation program, charters were developed for all HIMSS committees and constituency advisory boards.

Education: Besides the annual conference, HIMSS sponsored other educational events throughout the year including Access Telemedicine and the CEO Symposium. NetCon '95, the 1995 Annual HIMSS Networks Conference, was held in Keystone, Colo.

Following the board’s newly approved direction of encouraging co-sponsorship of HIMSS programs with regional affiliated chapters, the Colorado HIMSS chapter was named an official cosponsor of NetCon '95. The expansion of HIMSS educational efforts also began to bear fruit during 1995/96 with the introduction of the Long Term Care Information Systems Conference in Philadelphia, in the spring of 1996. The conference was cosponsored with the Delaware Valley HIMSS Chapter.

Planning for HIMSS '96: The planning process began immediately after the HIMSS '95 in San Antonio for the 1996 annual conference. As with all HIMSS operating/mission committees, a volunteer chair was appointed by President Aldrich. LaVone Neal served as Chair of the 1996 Annual Conference Planning Committee. The committee maintained its multi-constituency makeup while, for the first time, assembling educational sessions within broader themed tracks intended to serve the
multidisciplinary management needs of HIMSS’ continually diversifying membership. The Georgia HIMSS chapter was named the official host chapter of HIMSS ‘96 in Atlanta.

Publications: HIMSS published Guide to Effective Health Care Management Engineering to promote the value of the profession. Eight long-time members contributed to this booklet.

1996 - Membership Reaches 7,500

A new attendance record was set with more than 12,800 persons attending the 1996 Annual Conference & Exhibition, March 3-7, 1996. The publication, Tradeshow Week 200, ranked the 1996 Annual HIMSS Conference and Exhibition, Atlanta, Ga., as one of the top 200 tradeshows in the United States.

Those in attendance were treated to an all-star lineup of speakers:
- Gen. Colin Powell;
- Senator George Mitchell; and
- Gordon Moore, Intel Corp. founder and Chairman of the Board.

The exhibition hall continued its recent growth to more than 425 exhibiting companies. More than 1,200 professionals participated in the seventh annual HIMSS/HP Leadership Survey, Trends in Health Care Computing. A new, automated registration system, with self registering terminals on-site and pre-registration through the Internet, was used for the first time in Atlanta. The development of a true, ongoing HIMSS presence on the World Wide Web was accomplished in the fall of 1995.

Collaborative Efforts: Expansion and formalization of collaborative relations began to take shape with the signing of multi-year cooperative agreements with the College of Healthcare Information Management Executives (CHIME) and CHIM. HIMSS also cosponsored activities with the American Medical Informatics Association (AMIA) and American Health Information Management Association (AHIMA). In addition, first steps began toward the development of a joint industry alliance of not-for-profit organizations within our field.

Publications: HIMSS’ publications efforts were also active in 1995/96 with the release of the third and fourth in the HIMSS handbook series: Guide to Effective Health Care Clinical Systems and Guide to Effective Health Care Telecommunications. Healthcare Information Management as well with a broader distribution channel through an agreement with Jossey-Bass Publishers. The Annual Conference Proceedings also received a redesigned, more compact 7 x 10-inch format as well as a full text-searchable version on CD-ROM.

Member Services: Professional development efforts saw an increase in the number of advanced members as well as the development of two new categories of membership:
- Retired member (for those retired from the field with 10 or more years of continuous membership)
- Life member (for those with 30+ years of continuous membership)
HIMSS Student Chapters: With HIMSS’ encouragement, Barry T. Ross helped create the first student chapter as a model. This chapter was formed at Duquesne University in Pittsburgh. The first president was Don Kuhn and the faculty advisor was HIMSS member, Kathleen Begler. Another HIMSS member, Joan Kiel, PhD, served as Chair of the Health Management Systems program.

Richard P. Covert, PhD, long time director of the Society for whom the Covert Scholarship is named, was honored by being named an honorary Fellow of HIMSS in addition to his status as a member emeritus.

Membership Numbers and Satisfaction: The year closed with membership satisfaction continuing to increase and total membership closing the year at an all time high of more than 7,500.

HIMSS Foundation: The development of the HIMSS Foundation, a separate, non-profit 501(c) (3) educational foundation, completed the final outstanding transition of the Society from the AHA. A silent auction held at HIMSS ’96 in Atlanta to benefit the HIMSS Foundation successfully raised more than $10,000 to be used to fund other student scholarships. Creation of the Foundation was prompted by the AHA practice that if the Society had a surplus at the end of the fiscal year (which was the case), whatever funds were not used would be transferred from the Society into the general fund of AHA.

Web Services: HIMSSLIST was introduced to allow HIMSS members and staff to communicate with each other. HIMSSLIST was an Internet e-mail list members could use to exchange ideas and experiences that related to their day-to-day work. HIMSS staff could use the list to announce events and to monitor the content to better understand members’ needs.

With the Society financial position improving for the fifth straight year and membership increasing, the HIMSS Board of Directors, volunteers and staff wasted no time in ensuring that HIMSS continued to provide leadership for the management of system, information and change well into the next millennium by focusing on goals related to the strategic plan developed by the board.

1997 – Joint Healthcare Information Technology Alliance (JHITA) Established

The 1997 Annual HIMSS Conference and Exhibition, February 16-20, San Diego, attracted a record 15,800 attendees, 408 exhibitors, and presented 13 educational tracks.

Keynote speakers:
- James Carville and Mary Matalin opened the conference by sharing their views on the federal government and healthcare;
- Reginald Ballantyne, III, President, American Hospital Association, presented his views on the future of healthcare delivery;
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- Scott Adams, creator and writer of the Dilbert comic strip, related his lifelong dream of becoming a cartoonist;
- Maya Angelou, 1992 Poet Laureate, recited inspirational poems, stories, and songs; and
- Tony Alessandra, PhD, presented the platinum rule and techniques for interacting with others more successfully.

Other highlights of the conference included the following:

- New to HIMSS ‘97 were Conference Orientation Sessions. Three sessions were held to allow attendees to gain insight on the conference from several members including Fellows, Senior Members, various committee members, and exhibitor representatives.
- The Department of Defense (DoD), Health Affairs became an official cosponsor for HIMSS ‘97, holding 15 educational sessions. The DoD hosted a demonstration area where more than 25 projects and systems were online.
- Attendees were able to view the HUMVEE M3V (Mobile Medic Motoring Vehicle) and the DART (Deployable Aeromedical Readiness Team) vehicles to better understand how the military applies technology to medical care in action.
- For the first time ever, members and conference attendees received pre-conference information through the HIMSS web site via the Virtual Tradeshow and Virtual Education Catalog. The Virtual Tradeshow provided members with access to companies exhibiting at HIMSS ‘97 based on product and service categories. A completed search supplied booth number, contact name, address, and phone, a list of products or services and, if available, a hot link to the company’s website for additional information.
- The Virtual Education Catalog allowed members to find sessions matching a specified topic or key word. A completed search gave the session title, abstract, date, time, and room number. Members could also search for sessions by speakers.

Joint Healthcare Information Technology Alliance Formed: The leadership of HIMSS, CHIME, and CHIM joined together to form JHITA, an organization to address concerns such as pending federal legislation and regulation, and the lack of understanding about IT’s capabilities and limitations among top health care executives.

JHITA’s goal was to advance healthcare delivery through smart use of information technologies. JHITA published and distributed information papers so that members of HIMSS, CHIME, and CHIM could keep abreast of legislation that would affect the future of the profession.

Member Services: The HIMSS Board reviewed 98 applications for advancement to Senior Member and Fellow, a 24% increase over the previous year. In July, formally recognizing the contribution the Fellows made to the Society, a motion to establish the Fellows Advisory Council was adopted and the Council was formed. Comprised of all HIMSS Fellows, the Council served in an advisory capacity to the Professional Development Committee. Richard Friedland, FHIMSS, was chair, and Robert Gunn, FHIMSS, was chair-elect.
HIMSS members identified five topic-oriented groups for participation in the Networking Group pilot program: academicians, managed care, computer-based patient record, outcomes, and reengineering and performance improvement. Providing members with the opportunity for a regular exchange of ideas and current information and a vehicle for informal discussion were some of the groups’ objectives.

**HIMSS Foundation:** The HIMSS Foundation Board elected to increase the cash award of the Richard P. Covert Scholarship to $2,500 per award per year. In addition, the HIMSS Board agreed to underwrite the awards and expenses associated with the scholarships for three years (through the 2000 awards) to allow the scholarship funds to remain untouched during the “200K by 2K” fundraising program.

The HIMSS Foundation Board also unanimously approved the establishment of a goal to increase the Foundation’s scholarship endowment funds to $200,000 by HIMSS 2000. This goal of “200K by 2K” would provide sufficient funds for the HIMSS Foundation to permanently award at least $10,000 in scholarships annually.

The 1997 recipients were Michele Puetz, BSIE, Iowa State University, and Mike Furukawa, MSHS, PhD.

**Publications:** Adding to member benefits, HIMSS introduced a *Hands on Guide to HIMSS* as part of a campaign to communicate benefits of membership more effectively to members, and published *Guide to Nursing Informatics*, the newest addition to the HIMSS guide series. HIMSS also entered into an agreement with *Advance for Health Information Management Executives* magazine to bring industry news to members.

**Education:** The regional education project team presented a series of educational offerings including a new program, Introduction to Healthcare Information and Management Systems Workshop. The workshop provided an overview of each of four system divisions: clinical systems, information systems, management engineering, and telecommunications. Ongoing regional programs included Long Term Care Information Systems Conference and Telehealth: Steps to Successful Implementation.

As membership totals raced toward 10,000, annual conference participation at an all-time high, and consistently high and improving member satisfaction ratings, HIMSS was set to undertake a period of expansion unlike any in its history. With the direction of the HIMSS Board and the dedication of the expanding HIMSS staff, the Society was preparing to move into the 21st century.

**1998 – HIMSS ’98 Attendees and Exhibitors Aid Central Florida Tornado Victims**

More than 19,500 attendees and 615 exhibitors gathered to “Imagine the Future” at the 1998 Annual HIMSS Conference & Exhibition, February 22-26 in Orlando.

The theme of HIMSS ’98 encouraged attendees to imagine the future, but the reality of a series of devastating tornadoes in Central Florida allowed everyone to open their hearts and provide support for the victims. HIMSS quickly established a disaster relief fund and within hours of the devastation, attendees and vendors began contributing
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thousands of dollars. At the end of the conference, HIMSS was proud to present a check of cash contributions and pledges of more than $20,000 to Thursday morning’s general session speaker, Elizabeth Dole, president of the Red Cross.

Attendees were treated to a wide variety of keynote and general session speakers at HIMSS ’98.

Keynote speakers included the following individuals.

- Bill Bradley shared stories from his many experiences as a three-term Senator, author, and successful college and NBA basketball player;
- John T. Chambers, president and chief executive officer of Cisco Systems, provided his opinions on the current and future trends of technology and healthcare;
- Lou Holtz, former head football coach of the University of Notre Dame, presented a motivational speech highlighting the importance of attitude and care in overcoming challenges;
- Elizabeth Dole shared her thoughts on the future of America; and
- Charles Lauer, publisher of Modern Healthcare, closed the conference with his thoughts on having a positive, hardworking mindset.

New to HIMSS ’98 was Career Development Day. The sessions chosen for Career Development Day were intended to provide attendees with professional development and career management information. Sessions included introductory tutorials covering clinical systems, information systems, management engineering, and telecommunications; a professional development and career planning workshop cosponsored by HIMSS and SHS; and a workshop describing publishing opportunities.

HIMSS Leadership Survey: The Ninth Annual HIMSS Leadership Survey, Trends in Healthcare Computing, sponsored by IBM, was conducted via the Internet for the first time. This allowed all HIMSS members to complete the survey, whether or not they attended HIMSS ’98. In addition, the searchable results were made available on the HIMSS Web site. The survey was also enhanced by a blue ribbon panel of 15 prominent members of the healthcare information and management systems community who better focused the survey on areas of industry concern to further define the framework of the healthcare computing and technologies industries.

Nursing Informatics: A new education program, Nursing Informatics- Components for Success, debuted in 1998. Topics covered in this workshop were developed by nursing practitioners, and included a nursing informatics practice overview, system analysis and design, system selection and vendor negotiations, data and outcomes management, and nursing informatics networking resources.

Member Services: Honoring its founder, Harold E. Smalley, PhD, and a former Regents Professor Emeritus of Georgia Institute of Technology, HIMSS presented a gift of $25,000 to the Georgia Institute of Technology Foundation. The endowment was to help fund the Harold E. Smalley Health Systems Endowed Chair in the School of Industrial and Systems Engineering.
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Life Members: The Professional Development Committee recognized HIMSS’ first two Life Members, William Andrew and Richard Friedland. The committee advanced 56 members to Senior Member status and 15 members to Fellow status.

HIMSS Headquarters: This year HIMSS purchased the building that had served as its Chicago headquarters since 1993. The purchase allowed HIMSS the space options to accommodate a larger staff and build for the future. The HIMSS staff completed its move to newly renovated offices on the 5th floor in early January.

Integrating the Healthcare Enterprise: HIMSS and the Radiological Society of North America (RSNA) collaborated to create an initiative called Integrating the Healthcare Enterprise (IHE), intended to stimulate the integration of disparate information systems, imaging, and other software components and resources for healthcare. HIMSS and RSNA planned to sponsor the development of a phased series of public demonstrations of increasing connectivity and systems integration. The meetings would take place over the next several years.

JHITA: The American Health Information Management Association (AHIMA) and the American Medical Informatics Association (AMIA) joined the Joint Healthcare Information Technology Alliance (JHITA), bringing the total number of associations to five. AHIMA and AMIA join the Center for Healthcare Information Management (CHIM), the College for Healthcare Information Management Executives (CHIME), and HIMSS.

HIMSS Joins ACEHSA: HIMSS became a member of the Accrediting Commission on Education for Health Services Administration (ACEHSA). ACESHA is a corporation organized exclusively for educational and scientific purposes. The accreditation program of ACEHSA is designed to foster high-quality professional education for health services administration.

Continuing Ed Credit for Nurses: HIMSS was also approved as a provider of continuing education in nursing by the Illinois Nurses Association, Continuing Education Approver Unit, which is accredited as an approver of continuing education in nursing by the American Nurses Credentialing Center’s Commission on Accreditation. HIMSS was now able to give continuing education credit to those educational activities they provide or co-provide for a period of two years, ending December, 2000.

1999 – Emphasizing Synergy through Partnerships

HIMSS ‘99, with the theme of “Discover the Synergy,” featured more than 150 panel, poster, and technical sessions; a job fair; keynote speakers; entertainment; networking opportunities; and nearly 500 vendors showcasing a wide variety of healthcare information-related products and services.

Keynote speakers included
- Former President George Bush, discussing success and the meaning of leadership;

1 Refer to Appendix IV for a list of Lifetime Members
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- Captain James Lovell, spacecraft commander of Apollo 13 and president of Lovell Communications, talking also about leadership, teamwork, and overcoming challenges; and
- Howard Rubin, PhD, an expert in the field of Y2K solutions, to speak at a Y2K General Session.

Other topics of interest for the approximately 17,000 attendees included:
- Emerging technologies;
- New uses for the Internet; and
- Department of Defense (DoD)/Health Affairs on healthcare information systems and telemedicine in the military, including sessions on Internet/Intranet, computer-based patient records, emerging tools and concepts, and career development.

Job Fair and HIMSS/CHIME Career Match service provided attendees with numerous professional development opportunities. A total of 170 employers participated, posting more than 440 job openings. Applicants responded to these opportunities with more than 4,000 résumé submissions. A HIMSS Member Networking Lounge provided networking opportunities for member-attendees, as did group networking meetings scheduled throughout the conference.

Awards: Another feature at HIMSS '99 was the presentation of awards:
- Wei-Tih Cheng, PhD, FCHIME, vice president, Information Systems, Memorial Sloan-Kettering Cancer Center, New York, N.Y., received the 1999 HIMSS/CHIME John E. Gall, Jr. CIO of the Year award
- Richard P. Covert Scholarships, awarded to one undergraduate and one graduate student for efforts in the field of healthcare information and management systems, were presented to Melanie J. Anderson, Iowa State University, and Tamara Pomerantz, graduate student at the Medical University of South Carolina, Charleston.
- The award for outstanding service was presented to Cherryl A. Turner, project manager at HBO & Company, Atlanta.
- The 1998 Book of the Year Award was presented to Steven Goldman and Carol B. Graham for their book Agility in Healthcare: Strategies for Mastering Turbulent Markets. Lee Olson, Steven G. Peters, MD, and Jane Stewart received the award for article of the year for their work “Security and Confidentiality in an Electronic Medical Record.”
- The technical paper of the year was “The Opportunity of Chaos: The Future State of the CIO,” by Betsy Hersher.

Awards were also presented in each of the four HIMSS constituencies.
- Marian Celli, MS, RN, NC, received the award for clinical systems.
- John E. Haffy received the award for information systems.
- Rudolph A. Guerrero received the award for management engineering.
- Toni Baych received the award for telecommunications.
- Cherryl A. Turner was presented the award for outstanding service.
Leadership Survey: The 10th Annual Leadership Survey Sponsored by IBM Global Healthcare found that the most important IT priority for healthcare organizations over the next year, not surprisingly, was implementing a year 2000 conversion (44%). Integrating systems in a multi-vendor environment was the second most frequently cited IT priority, with 16% of responses. The survey, conducted February 21–24, 1999, polled on-site attendees and Web site respondents on IT issues, and featured the opinions of nearly 1,000 chief information officers and senior managers.

IHE Results at RSNA’s 85th Scientific Assembly and Annual Meeting: The results of the first year of the five-year program were initially presented at the 1999 IHE Symposium, part of RSNA’s 85th Scientific Assembly and Annual Meeting at Chicago’s McCormick Place November 28-December 3, and demonstrated the evolving state of the art in healthcare information systems integration. The focus of this initial vendor demonstration was on maintaining the continuity and integrity of data exchanged among information and imaging systems in radiology units.

Education: In September and October, two consecutive programs highlighted Information Technology Strategic Planning (September 29, 1999) and Implementing Security and Confidentiality Policies (September 30–October 1, 1999) at the Mandalay Bay Resort in Las Vegas.

- At the first workshop, James Martin, PhD, and Patrick Hagan, executive vice president and CEO, Children’s Hospital Regional Medical Center in Seattle, provided intensive analysis and discussion of the essential components of strategic planning, emerging information technologies, and the IT plan of a contemporary healthcare organization.
- At the second program, Dale Miller, director of consulting services at Irongate, Inc., San Rafael, Calif., discussed the security requirements that HIPAA will pose, as well as security issues raised by the Internet and electronic health record systems.

A two-and-one-half day workshop for management engineers entitled “Maximizing Your Professional Value” was offered November 4–6, 1999 in Dallas. Duke Rohe, FHIMSS, systems improvement specialist at MD Anderson Cancer Center in Houston, was among the presenters offering sessions on topics such as:

- Process improvement tools;
- Industrial benchmarks and large-scale change;
- ISO 9000 versus Joint Commission standards;
- Project and change management;
- Financial analysis and strategic planning; and
- How to market yourself and your department.

Member Services: Two new member-benefit magazines were added in 1999 to the growing list of publications that are part of HIMSS members of membership. Members could choose to receive Health Data Management and Healthcare Informatics magazine, in addition to Advance Magazine for Healthcare Executives and Modern Healthcare.
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New Chapter in Canada: HIMSS welcomed a new international chapter in 1999, the Ontario Healthcare Management Information Systems Association, a 70-member chapter serving hospitals within the province.

Healthcare Information Management Systems Week: HIMSS sponsored Healthcare Information Management Systems (IMS) Week, November 2–6, to focus on changes in healthcare for the year 2000. The purpose of IMS Week was to recognize colleagues in the information and management systems field and educate coworkers outside of those areas about how information and management systems professionals contribute to their respective organizations and the healthcare industry.

The week’s activities included encouraging HIMSS members to write articles in their organization newsletters explaining IMS week, host departmental open houses, show department unity by wearing IMS T-shirts, and give demonstrations highlighting how technology enhances the healthcare delivery system. CHIM, CHIME, and Society for Health Systems of the Institute of Industrial Engineers (SHS) joined HIMSS in sponsoring IMS week.

Publications: The Journal of Healthcare Information Management covered the following four topics in the 1999 editorial year:

- Healthcare Call Centers, guest edited by Toni Baych;
- Information Systems Supporting Integrated Delivery Networks, guest edited by Pamela V. Matthews;
- The Computer-Based Patient Record, guest edited by Nancy Stetson; and
- Long Term Care Information Systems, with guest editor Jake McQueen, CHE.

HIMSS News: In September, 1999, HIMSS members received HIMSS News with a brand-new face, as HIMSS introduced a redesigned monthly newsletter. At the same time, HIMSS News rolled out two new columns to meet member needs: Industry News, which provided news clips of events relevant to the healthcare/IT industries; and Legislative News, which profiled industry-related events in Congress.

Readership Survey: HIMSS conducted its first ever readership survey in 1999, and found that the vast majority of HIMSS members believe the Society is “keeping up the good work,” by continuing to produce high-quality publications. The survey also found that 28% of respondents typically read half the journal. The “emerging issues” and “industry information” sections were considered the most helpful parts of HIMSS News by most of the 324 HIMSS members responding to the survey. Ninety-seven percent of respondents found computer-based patient records the most useful topic presented by the journal.

Resignation of Executive Director: After eight years John Page resigned his position as HIMSS executive director in July, 1999. R. Norris Orms, CAE, HIMSS chief operating officer, was named acting executive director in interim, until a new chief executive was hired.
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2000 - Healthcare Made the Transition to Y2K

HIMSS 2000 attracted approximately 17,300 people to the Dallas Convention Center, April 9-13. CIOs turned out in all-time high numbers—a total of 696, an increase of 27% over 1999.

Exhibitors also came to HIMSS 2000 in record numbers: 643 companies sent representatives to the conference, up 31% from 1999. Onsite booth selection for HIMSS 2001 was available for the first time at the 2000 conference. Of the exhibiting companies, more than 300 participated in the selection process. More than 46% of the available exhibit space for HIMSS 2001 was reserved by the close of HIMSS 2000.

Conference attendees heard keynote speeches by:

- Former presidential candidate Ross Perot, discussing the human aspect of technology;
- NFL coach and pro-football Hall-of-Famer Mike Ditka, talking about the importance of teamwork and leadership; and
- Ian Morrison, PhD, internationally known author of such healthcare and business books as *Healthcare in the New Millennium: Vision, Values, and Leadership*, and the bestselling *The Second Curve - Managing the Velocity of Change*, provided the industry keynote session, speaking about the driving forces for change in healthcare.

First Electronic Poster Sessions: The 2000 Annual HIMSS Conference & Exhibition featured a combination of education sessions, pre-conference workshops, meetings, roundtables, and networking opportunities. A new feature at the 2000 conference was electronic poster sessions accompanied by 20-minute live presentations.

Internet Viewing: Some 12 conference education sessions were made available over the Internet as live streaming audio to viewers around the world. Members and non-members who registered in advance could view sessions in real time from their home or office computers. The sessions were also available for viewing on the HIMSS Web site for one year after the conference.

CIO Forum: The CIO Forum was offered for the first time in 2000: a CIO lounge and business center, senior management-focused educational track, CIO reception, and series of CIO/CEO executive briefings.

The Second Annual HIMSS Foundation Open gave visitors to the exhibit floor the opportunity to mini-golf for a good cause, and the chance to win $500 each day and a $2,500 grand prize on the final day of the conference. Final proceeds of more than $20,000 went to the Richard P. Covert Scholarship fund.

Richard P. Covert Scholarship Auction: A not-so-silent auction also raised funds for the Covert scholarship, awarded to one undergraduate and one graduate student for efforts in the field of healthcare information and management systems, and gave conference attendees a chance to bid on prizes such as airline tickets, footballs autographed by Mike Ditka and Gayle Sayers, digital cameras, and DVD players.
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The Integrating the Healthcare Enterprise (IHE) initiative demonstration was another special feature of HIMSS 2000. The demonstration’s purpose was to show attendees how different technology standards can be used in a healthcare environment to exchange information required to facilitate and support the patient care process without costly interfaces.

Awards: HIMSS awards were presented at the conference in a special evening ceremony.

- Stephanie Reel, chief information officer (CIO) and vice president, Johns Hopkins Hospital and Health System in Baltimore, received the John E. Gall/CIO of the Year Award.
- Richard P. Covert Scholarships were presented to Adam Wilcox, graduate student at Columbia University, New York, and Matt Raine, undergraduate at Iowa State University in Ames, Iowa.
- Article of the year awards were given to Leslie Perrault and Jane Metzger for their article “A Pragmatic Framework for Understanding Clinical Decision Support.”
- Stephen Veazie won for his article, “Computer-Based Patient Records Can Accelerate Software Component Commerce.”
- John Griffith, MBA, FACHE, received the award for book of the year for The Well Managed Healthcare Organization.
- Chapter Innovation Awards were presented to the HIMSS Georgia Chapter as both First Place Runner Up and Grand Prize Winner; and Central Florida Chapter of HIMSS as Second Place Runner Up.
- The Quality Management Award was presented to BJC Health Systems - The Center for Healthcare Quality and Effectiveness.
- Constituency Awards were presented to Pamela Matthews, in Clinical Systems; Deborah Krau, in Information Systems; E. June Logan, in Management Engineering; and Penny Hillyer, in Telecommunications.

Leadership Survey: The 11th Annual Leadership Survey, sponsored by IBM Global Healthcare, was available for completion online prior to the conference for the first time this year. Participants were able to complete the survey, beginning in mid-March, in addition to being able to complete it onsite at the conference. In fact, participation in the 2000 survey rose 11% over 1999, with 1,111 senior executives and managers from healthcare provider and vendor organizations around the world responding.

According to final survey results, the remainder of Year 2000 was spent gearing up for HIPAA and e-healthcare. Seventy percent of survey respondents indicated that they would concentrate on HIPAA compliance over the next two years, and 44% said they would also be working to develop e-health infrastructures and applications. Improving
efficiency was also an important future priority for 60% of survey respondents, and cost-cutting efforts for 55% of the interviewed healthcare providers.

**Member Services:**

**Special Interest Groups:** The HIMSS Board of Directors voted to institute a special interest group (SIG) structure for HIMSS members, to replace the old constituency model, and strengthen and enhance HIMSS' sense of community. Special Interest Groups became active July 1, 2000.

**United Dues Model:** Another change in the structure of HIMSS membership was a unified dues model. Beginning July 2001, HIMSS members would automatically become members of their local chapters when they joined HIMSS or renewed their membership. Individuals seeking membership could also choose limited chapter membership if they were not interested in HIMSS national benefits and services.

**First Future Chapter Leaders Workshop:** HIMSS held the first Future Chapter Leaders Workshop, September 17–18 in Chicago. Tracey Davenport and Cynthia McKinney presented an interactive session focusing on best practices and helpful hints for leading successful chapters. Philip Lesser, PhD, CAE, vice president of Bostrom Corporation, a Chicago management and consulting firm specializing in not-for-profit organizations, discussed association management. Paula Cozzi Goedert, a partner with the law firm Jenner & Black, provided explanation of tax and legal issues for chapter leaders.

**Chapter Leadership Training:** Via teleconference, HIMSS also began offering chapter leadership training in summer 2000, exploring such topics as membership campaigns, financial management, board communication, successful programs, and e-publicity.

**Mentoring Program:** HIMSS also instituted a mentoring program in 2000, through which HIMSS members seeking advancement could work with a HIMSS Fellow (FHIMSS).

**Chapters:** The Bluegrass Chapter of HIMSS, serving healthcare professionals in Kentucky, was approved by the HIMSS Board of Directors on August 13, 1999. The chapter represents 50 members in the clinical systems, information systems, management engineering, and telecommunications areas. On October 15, 1999 the HIMSS Board approved the South Carolina chapter of HIMSS to serve healthcare professionals in that state.

**JobMine:** A new online job posting and job search Web site, HIMSS JobMine®, was unveiled April 1, 2000. The search engine provided HIMSS members with a more sophisticated, industry-specific job search tool to compete with the proliferation of other recruitment Web sites.

**Member Benefits:** Two new member-benefit magazines were added in 2000 to the growing list of publications that are part of HIMSS’ benefits of membership. Members may choose to receive Managed Healthcare News and Hospitals & Health Networks magazine, in addition to ADVANCE Magazine for Healthcare Executives, Health Data Management, Healthcare Informatics, and Modern Healthcare.
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Education:
• The first HIMSS professional education program of 2000 was “A Comprehensive Look at Nursing Informatics” on February 4, 2000 at Cedars-Sinai Medical Center in Los Angeles.
• HIMSS participated in the 2000 Healthcare Symposium, March 6–8 in Orlando. Sessions explored such topics as informatics for outcomes management, physician profiling, corporate finance, and managing change in the 21st century. HIMSS sponsored a program titled “Using Information Technology to Improve Business Performance and Manage Growth.” The Symposium was jointly sponsored by HIMSS, the American College of Healthcare Executives (ACHE), American College of Physician Executives, and the Healthcare Financial Management Association.
• On March 9, 2000, HIMSS sponsored the Long-Term Care: Clinical and Financial Applications Conference at the Jewish Home in New York City. Sessions at the day-long conference included case studies, a regulatory update, and a vendor information session.

HI&T Week: Healthcare Information and Technology Week (HI&T Week), a program supported by all of the Joint Healthcare Information Technology Alliance (JHITA) organizations, recognizes information and management systems (IMS) professionals and offers education programs for information systems, management engineering, and telecommunications professionals. HIMSS and JHITA-partner members (CHIM, CHIME, AMIA, and AHIMA) were encouraged to promote HI&T Week at their organizations through various awareness-raising activities.

Publications:

The Journal of Healthcare Information Management published four issues in 2000:
• The Summer journal looked at Clinical Decision Support Systems, and was guest edited by Blackford Middleton, MD, vice president for clinical informatics, MedicaLogic.
• Marian Celli, LCDR, NC, USNR, deputy functional manager, CHCS II Program Office, Clinical Business Area, served as guest editor for the Fall journal on Clinical Systems Applications.
• The Winter journal, Telehealth: Changing Healthcare Delivery in the Twenty-First Century, was guest edited by Lieutenant Colonel Rosemary Nelson, program manager and CIO, Pacific Regional Program Office, U.S. Army Nurse Corps.
• The Spring journal looked at The Influence of the World Wide Web, and was guest edited by Deborah Kohn, MPH, RHIA.

Public policy outreach begins: The HIMSS Board approved the Advocacy Task Force’s recommendation in February, 2000 to allow HIMSS to become involved in public policy
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activities. The Advocacy Committee was formed in February 2000 under the chairmanship of Ijaz Bokhari.

**New president and CEO named:** In May, 2000, H. Stephen Lieber, CAE, became the new HIMSS president and chief executive officer.

**2001 – HIMSS Introduced Onsite Bookstore at Annual Conference**

The 2001 Annual HIMSS Conference & Exhibition was held from February 4-8 in New Orleans. The meeting attracted more than 17,000 healthcare professionals with 175 workshops and more than 725 exhibitors.

**Introduced at the Annual HIMSS Conference in New Orleans:**
- "Views from the Top" education sessions with nationally recognized speakers who are experts on key industry topics;
- HIMSS Bookstore with HIMSS publications at special prices for attendees; and
- New education tracks on e-Health, international, and patient safety.

**Member Services:**

**Chapters:** HIMSS welcomed the new Louisiana chapter in February.

**HIMSS Foundation Revamped:** After the resignation of John A. Page as Executive Director in 1999, a committee was established and charged with reexamining the role of the HIMSS Foundation. A number of meetings had taken place since that time to rewrite the Foundation’s bylaws. As a result, a more active Foundation Board was established and Richard Covert became the first president of the new Foundation in 2001.1

**Awards:** The Leadership Award was established in 2001. The 2001 Awards Dinner was held at the Fairmont Hotel with HIMSS Chair, Walter R. Menning as the master of ceremonies.

**The awards announced at the event were:**

- The John E. Gall Jr./CIO of the Year Award was presented to Charles C. Emery, Jr., PhD, FCHIME.
- The John A. Page, Outstanding Service Award was presented to Justin A. Myrick.
- The Distinguished Fellows Service Award was presented to Nancy E. Aldrich and Justin A. Myrick.
- The Article of the Year Award was presented to Brian Pomeroy and Evan Crawford for “Putting the Web to Work at the Children’s Hospital of Philadelphia,” published in the *Journal of Healthcare Information Management*.
- The Book of the Year Award was presented to David Ellis for *Technology and the Future of Health Care*.

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1 The HIMSS presidents are listed in Appendix VI.
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- The Technical Paper of the Year Award was presented to Marianne S. Charbonneau and Paul Torrey for “Internet-Enabled Disease Management: A Provider/Patient Collaboration”; and to J. Peter Weil and Elaine Remmlinger for “Providers Beware: Commitments Are Compromised When Vendors and Consultants Hit Wall Street.”
- The Chapters Innovation Award was presented to the South Florida Chapter of HIMSS (Grand Prize); Minnesota Chapter of HIMSS (1st Place Runner Up); and Oregon Chapter of HIMSS (2nd Place Runner Up).
- Richard P. Covert Scholarships were presented to Jenny Peterson, University of Wisconsin (undergraduate); Eneida A. Mendonca, MD, Columbia University (graduate); and Elizabeth Crowell, Georgia Institute of Technology (graduate).
- Lifetime Membership Awards were presented to Richard J. Coffey, Barry T. Ross, Richard L. Rydell, and Robert N. Davis.

Research/HIMSS Leadership Survey: HIMSS conducted the 12th Annual HIMSS Leadership from December 20, 2000 – February 8, 2001. Key findings were based on 953 responses and included:
- Upgrading security of IT systems to meet federal HIPAA regulations was top priority for healthcare information technology in the next 12-24 months.
- Gearing up to meet new federal HIPAA regulations for security of patient information was the leading business issue facing healthcare management in the next two years.
- Although security and finances top the list of executive concerns, hospitals were prioritizing their capital spending starting with upgrades to clinical information systems.
- The most widely used information technology in healthcare was high-speed networks.

Research/HIMSS Member Satisfaction Survey: This survey was conducted August 2-31, 2001, by an outside organization, the HSM Group, Ltd.; 696 individuals responded. Key scores held steady in member satisfaction, perception of value and intent to renew membership. Nine out of 10 members indicated that they would renew their membership.

U.S. Healthcare Industry Quarterly HIPAA Survey Results: HIMSS conducted this survey with Phoenix Health Services, Inc., in fall, 2001. With 519 respondents, the survey’s key findings indicated:
- Over half of all survey participants, across all segments of the healthcare industry, reported that their organizations were actively working on HIPAA assessments and project planning.
- 16% of vendors and 7% of payers would not be ready to transmit or accept all transaction by the October 16, 2002 transactions deadline.
- Most frequently cited roadblock to compliance reported by providers was “not enough time.”

2001 Davies Award Recipients: The 2001 recipients of the Davies Award of Excellence were announced on July 13:
- The University of Illinois at Chicago Medical Center – Chicago, Ill.
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- Ohio State University Health System – Columbus, Ohio
- Heritage Behavioral Health Center, Inc. – Decatur, Ill.


HIMSS provided vendors with additional opportunities at the 2002 annual conference, held in Atlanta, Ga. on Jan. 27 – 31, by introducing the
- Exhibitor New Product Showcase, an exhibitor area with new products/services.
- Certification in Healthcare Information & Management Systems (CPHIMS) with a certification examination held at the annual conference.
- Research, Development & New Technology Center, a demo area with new IT solutions from new and start-up companies, research organizations and universities.
- Vendor Product Sessions, where healthcare IT companies present their solutions in a classroom environment.

HIMSS Summer Conference 2002: The Society introduced its HIMSS Summer Conference in Las Vegas in June, 2002. Almost 400 people attended this high-level conference that was designed to meet the needs of senior IT executives, senior operations executives, physicians, and IT managers from provider and supplier organizations. Educational sessions covered patient safety, CPOE, IT strategy, emerging technologies, and the electronic health record.

Member Services:
Center for Healthcare Information Management: HIMSS reunited with the Center for Healthcare Information Management (CHIM) in January following approval by both boards in May, 2001 and HIMSS members in July, 2001.

Membership: As of January 1, 2002, HIMSS membership totaled 11,714. HIMSS welcomed the Arkansas and Oklahoma chapters in February, 2002 and the Michigan and Tennessee chapters in June, 2002. In March, 2002, two new special interest groups were added: Senior Executive SIG and Supply Chain Management SIG.

Awards Dinner: The 2002 HIMSS Awards Dinner was held in the Grand Ballroom at the Georgian Terrace Hotel during the 2002 Annual HIMSS Conference. The master of ceremonies was Gregory Walton, FHIMSS, chair of the HIMSS Board of Directors. Awards presented were:
- The John E. Gall Jr./CIO of the Year Award was presented to Richard I Skinner.
- The John A. Page/Outstanding Service Award was presented to Paul R. Vegoda and T. Wayne Anderson.
- The Leadership Award (established in 2001) was presented to Rudolph A. Guerrero, Scott A. Klink, Katie G. Mazzuckelli, Pamela G. McNutt, Walter R. Menning, Rosemary Nelson, and John L. Templin.
- The Distinguished Fellows Service Award was presented to Peter J. Ryerson and John L. Templin, Jr.
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- The Article of the Year Award was presented for “Road Map for the Development of an E-Healthcare Strategy,” by Rene Gilbert, Edward S. Johnson, DDS, MBA, and Catherine Szenczy (JHIM Spring 2001).
- The Technical Paper of the Year Award was presented for “PatientSite: A Web-based Clinical Communication and Health Education Tool,” by Daniel Z. Sands, MD, MPH, John D. Halamka, MD, MS, and Dianne Pellat.
- The Outstanding SIG Member Award was presented to Joseph P. Brown, Telecommunications SIG; Major Drexel G. DeFord, Air Force CIOs SIG; Jason D. Oliveira, Data Warehousing/Data Mining SIG; and Roy F. Rada, HIPAA SIG.
- The Chapters Innovation Award was presented to the Minnesota Chapter (Grand Prize); Northern Ohio Chapter (1st Place Runner Up), and the Wisconsin Dairyland Chapter (2nd Place Runner Up).
- Richard P. Covert Scholarships were awarded to Christina D. Finger, North Dakota State University (undergraduate); and Mark D. Hiatt, CPHIMS, University of Virginia (graduate).
- HIMSS Foundation PhD Scholarship was awarded to James H. Ford II, FACHE, University of Wisconsin, Madison.
- Lifetime Membership Awards were presented to Andrew R. Ganti, William Richel, Howard E. Fagin, William R. Andrews, Chester S. Smith, and Larry D. Grandia.

Advocacy: HIMSS expanded its public affairs and advocacy efforts in 2002 with the addition of a Director of Public Affairs. The first HIMSS Advocacy Day was held in April, 2002 in Washington, D.C., with about 40 individuals attending this first event at the Marriott Hotel. HIMSS members made 16 visits to members of Congress or their staffs as part of this first advocacy event, which was designed to introduce the board and Advocacy Committee to this new activity.

Research:
13th Annual HIMSS Leadership Survey (CIO Results): HIMSS conducted its 13th Annual HIMSS Leadership Survey during the seven-week period beginning on November 19, 2001. Key findings, which are based on the responses of 355 individuals, include:

- Upgrading security on IT systems to meet HIPAA requirements was the top IT priority for today and the future.
- Clinical information systems ranked as the most important healthcare application for healthcare organizations in the next two years.
- Promoting patient safety/reducing medical errors was the second most pressing current IT issue identified by respondents.
- Wireless, hand-held devices, data security, and voice recognition all were high-priority technologies for the next two years.

13th Annual HIMSS Leadership Survey (CEO Vendor Results): The CEO Vendor Portion of the Leadership Survey was conducted during the same seven-week period beginning November 19, 2001. Key findings are based on the responses of 96 individuals and include:
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- Respondents reported that security upgrades on IT systems to meet HIPAA requirements was their clients’ top priority; it was projected to remain a priority in the next two years.
- Clinical information systems were identified most frequently as the most important healthcare application area for clients over the next two years.

HIMSS/Hersher Associates Job Satisfaction Survey: HIMSS and Hersher Associates, a healthcare search firm located in the Chicago area, conducted this survey from January 21 – February 22, 2002. The survey had 360 respondents and key findings indicated:
  - Respondents most frequently identified salary as an item they evaluate regarding satisfaction level with their current position. It also topped their list as the factor most likely to be used to evaluate whether they would accept a future position.
  - Respondents most frequently cited career growth as the reason they left their last position.
  - Nearly half of the respondents indicated that the ability to balance their career and family obligations was important in evaluating their job satisfaction.
  - Benefits and perks were not as important as other key factors, such as career growth and salary, in evaluating current job satisfaction.

2002 HIMSS Hot Topics Survey: HIMSS conducted this survey from January 27-31, 2002. With 619 respondents, key findings included:
  - September 11, 2001 acted as a wake-up call to Americans and a majority of survey respondents were reevaluating security in response to these events.
  - Over half of survey respondents had a plan in place for a bio-terrorism attack.
  - Based on the December, 2001 extension for compliance with HIPAA, one-third of respondents did not believe that the delay would affect their organizations.
  - Nearly three-quarters of respondents were turning their focus to using IT to improve patient safety.

2002 HIMSS Annual Compensation Survey: Conducted from March 18 – April 12, 2002, the survey resulted in 1,581 responses. Key findings were:
  - As of January 1, 2002, the average salary for all respondents was $91,267.70.
  - The majority of respondents indicated that the timeframe between their last salary increase and their next increase was 12 months.
  - Less than half of survey respondents received a bonus in 2002.
  - Nearly all respondents reported receiving some level of benefits from their employer.
  - Nearly half of all the respondents identified data security as the most important technology to their healthcare client.

U.S. Healthcare Industry Quarterly HIPAA Survey – Winter 2002: HIMSS conducted this quarterly survey with Phoenix Health Systems in early January, 2002 to gauge HIPAA compliance. Final results are based on the responses of 774 individuals. Key findings include:
  - Covered entities would not be ready to transmit HIPAA standard transactions by the original compliance deadline of October 16, 2002.
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- Vast majority of respondents reported that their organizations were continuing to build HIPAA awareness and had initiatives well “under aware” on HIPAA assessments, project planning and implementation.
- Reported provider budgets for 2002 were significantly higher than 2001 spending on HIPAA compliance.
- According to 75% of vendor representatives, the quality of their products would be improved as a result of HIPAA-related changes.

U.S. Healthcare Industry Quarterly HIPAA Survey, Spring 2002: HIMSS and Phoenix Health Systems conducted this survey during the first two weeks of April, 2002; there were 659 respondents. Key findings included:
- The proposed modifications of the Privacy Rule, by the Department of Health and Human Services, (HHS), were not expected to negatively impact implementation efforts or timeliness among industry segments.
- Most survey respondents planned to use a strategic approach to HIPAA compliance, as opposed to a minimum compliance approach.
- Reported budgets for 2002 were significantly higher than 2001 spending on HIPAA compliance.

U.S. Healthcare Industry Quarterly HIPAA Survey, Summer 2002: HIMSS and Phoenix Health Systems conducted this survey in early July, 2002 with 687 people responding. Key findings were:
- The survey no longer had to ask respondents if they have begun HIPAA initiatives; now questions could focus on how much work had been completed within the HIPAA compliance cycle.
- Largest roadblock to compliance came not from budget issues or other internal circumstances, but from difficulties in understanding and interpreting changing legal requirements.
- Although very few respondents had finished HIPAA remediation projects, respondents were making significant progress through gap assessment, and planning and implementation initiatives.

U.S. Healthcare Industry Quarterly HIPAA Survey, Fall 2002: HIMSS and Phoenix Health Systems conducted this survey early October, 2002; the survey had 965 respondents. Key findings were:
- HIPAA support from senior officers, initially difficult to achieve, remained generally strong.
- The healthcare industry was moving slowly toward achieving compliance. Major roadblocks to HIPAA compliance included interpretation of results and not enough time. Cost concerns, issues of state preemption, and lack of industry best practices were increasingly being cited.
- Over 80% of all respondents applied for the Transactions deadline extension from October, 2002 to October, 2003.
- Across the industry, HIPAA budgets were generally higher for 2003 than for 2002.

HIMSS/AstraZeneca Clinician Wireless Survey: This survey, conducted from August 8-26, 2002, resulted in 453 responses. Key findings were:
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• Nearly all of the physicians’ offices in the sample had at least one desktop and/or laptop computer. Almost three-quarters used handheld technology.
• Technology in physicians’ offices was most frequently used for administrative functions, rather than clinical functions.
• Only 20% of offices used e-mail to communicate with patients about clinical issues.
• Almost all respondents indicated that they would buy software, hardware, and other technology in 2002.

2002 HIMSS Individual Member Satisfaction Survey (not released to the public): This survey was conducted September 16-30, 2002 and had 830 respondents. Key findings were:
• Slight decline in member satisfaction; despite decline, most members did not feel that the value of their HIMSS membership had declined in the past year.
• Members validated the current strategic direction of HIMSS, as well as the Society’s future path.
• Respondents were also very much in-line with the efforts that HIMSS was making to become a leader in IT issues impacting the healthcare industry.

2003 – CPRI-Host Merged with HIMSS

2003 HIMSS Annual Conference & Exhibition: At the 2003 Annual HIMSS Conference & Exhibition, healthcare information technology (IT) and management professionals, vendors, providers, consultants and payers come together to learn more about the latest trends, new products, and healthcare IT innovations and solutions. The 2003 Annual Conference was held February 9-13 in San Diego, with more than 19,500 individual attendees and 686 exhibiting companies represented.

Keynote speakers included:
• Jeffrey R. Immelt, chairman of the board and CEO of General Electric;
• Rudolph Giuliani, former mayor of New York City, who led the city through the September 11th tragedy; and
• Patch Adams, a physician famous for his radical views of healing as a human interchange, not a business transaction.

New symposia introduced: The AMDIS Physicians Symposium and the International and Student Symposia were introduced at the 2003 conference to extend a unique educational opportunity to these audiences. Based on the success of these programs, HIMSS would offer them again at the 2004 Conference in Orlando, in addition to a new Nursing Informatics Symposium.

Fact finding hearing: Also at the 2003 Annual Conference, a public policy Fact Finding Hearing was held for the first time. At the hearing, expert witnesses provided testimony that was sent to federal governmental policy makers on the electronic health record.

Exhibits and sessions: More than 200 educational sessions were offered. Topics of interest included the Health Insurance Portability and Accountability Act (HIPAA), disaster preparedness, computerized provider order entry (CPOE), and patient safety. In addition, a special exhibition area for university degree programs in healthcare
informatics was offered, as well as areas for the Department of Defense/Military Health System, and Integrating the Healthcare Enterprise (IHE). The IHE Exhibit featured user success stories describing successful implementations of the IHE integration profiles, which have resulted in cross-vendor interoperability in radiology settings.

**HIMSS Summer Conference 2003:** The Society held its second summer meeting in June, 2003 in Chicago, with approximately 375 people attending. As part of the HIMSS Summer Conference 2003, the first HIMSS/Modern Healthcare CEO IT Achievement Award was presented to recognize healthcare industry chief executive officers who demonstrated leadership and commitment to using information technology to advance their healthcare organization’s strategic goals. The recipients of this first award were:

- George Vecchione, president and CEO, Lifespan in Providence, RI; and
- Pete Velez, executive director, Elmhurst (NY) Hospital Center, and senior vice president, Queens Health Network

**CITL – The Center for Information Technology Leadership (CITL):** CITL was founded by Boston-based Partners Healthcare to help healthcare providers maximize the value of their information technology investments and help technology firms improve the value proposition of their healthcare products. HIMSS entered into a strategic alliance in 2002 with the newly formed CITL, which provides unbiased research assessments of new clinical information technologies for the healthcare industry and disseminates the findings through published industry reports and symposia. The first CITL report, offering a model for investment analysis of ambulatory CPOE, was published. The first CITL symposium was held in Chicago in June, 2003, providing the healthcare industry with high-level research to maximize its information technology investments and ultimately, improve patient care.

**Advocacy efforts:** The Society expanded its national presence through a proactive visibility campaign that included the opening of an office in Washington, D.C., in 2003 to better serve its members and strengthen the Society’s position and relationships with key decision makers on public policy issues related to healthcare IT. In addition, the Society took formal positions on six key pieces of federal healthcare information technology legislation.

**New advocacy initiatives established in 2003 included:**

- Creating a HIMSS Government Relations Roundtable to give vendor members an opportunity to meet monthly to access and advocate industry positions with key federal leaders.
- Hosting annual HIMSS Advocacy Days on Capitol Hill to inform members and key federal leaders of the Society’s policy agenda and to give HIMSS members opportunities to visit their elected officials.
- Sponsoring HIMSS Advocacy Forums on top policy issues with government and industry executives to promote creative solutions to complex problems.
- Launching the HIMSS Advocacy Award. It was presented in 2003 to the Honorable Nancy Johnson, Chair of the U.S. House Ways and Means Health Subcommittee, for her outstanding leadership and collaboration with HIMSS.
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- Co-sponsoring congressional luncheon seminars and technology demonstrations to educate federal officials on the value of technology for bettering human health.
- Introducing the HIMSS Legislative Action Center to electronically connect members with leaders and issues in order to advocate the Society’s positions.
- Adding a Chapter level to HIMSS Advocacy Outreach Board position.

Advocacy Day on the Hill: The Second HIMSS Advocacy Day on the Hill was held in April, 2003 in Washington, D.C., at the Reserve Officers Association HQ building on Capitol Hill. About 120 individuals attended to hear former House Speaker Newt Gingrich and HHS Senior Advisor Bill Yasnoff speak on current issues. HIMSS members made 28 visits to members of Congress or their staffs.

The day ended with a Vendors Solutions Showcase in Rayburn House Office Building, Room B-339, from 5 – 7 p.m. with the following demonstrations: DoD, SAIC, IHE, Eclipsys, McKesson, Misys, PricewaterhouseCoopers, Siemens, Sun, Philips, Per-se, Symantec, and IDX. Over 150 individuals attended the reception, including Congressmen Dave Hobson, Jim Moran, and Nancy Johnson, and 30 congressional staff.

Public Policy Forum: The Society also launched the HIMSS Public Policy Forum, an annual event that looked at federal investment in the electronic healthcare information infrastructure.

Merger with CPRI-HOST: HIMSS and CPRI-HOST merged on July 1, 2002, to create a definitive information resources and expertise that helped the Society better target issues related to electronic health records, their design, implementation, and patient care impact.

Electronic Health Record: The merger of HIMSS and CPRI-HOST established HIMSS as the source for information and leadership on the electronic health record. HIMSS became the new sponsor of the Davies Awards of Excellence that recognize excellence in the implementation of the EHR.

Davies Award of Excellence program: In addition, the nationally acclaimed Nicholas E. Davies Award of Excellence program, which recognizes excellence in the field of EHRs, was continued with HIMSS’ backing. The Davies Organizational Award, which recognizes large healthcare organizations, was complemented by the addition in 2003 of the first Nicholas E. Davies Award for Independent Primary Care Practices. Both are awarded annually with winners of the Organizational Davies announced in September and winners of the Independent Primary Care Award announced in October.

EHR initiatives: The HIMSS EHR Committee was actively leading multiple efforts on this initiative. These included:

- The EHR Committee completed the HIMSS EHR Attributes, a document that described eight attributes of an electronic health record and the measures to determine if these attributes are fully implemented within a healthcare setting.
- HIMSS was the private sector sponsor, with the Centers for Medicare and Medicaid Services (CMS), Department of Veterans Affairs (VA) and Health Level Seven (HL7), of the Health Level Seven (HL7) Definitional Model. This model was
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a national standards-based effort to define the EHR. To help obtain provider input into this effort, HIMSS was an active member of the EHR Collaborative, which sponsored town hall meetings in six cities in August, 2003.

- HIMSS, in collaboration with ASTM International, the Massachusetts Medical Society and the American Academy of Family Physicians (AAFP), worked on developing a Continuity of Care Record (CCR), a standard for a minimal data set of patient-specific information.

2002 Davies Award Winners: With the merger of CPRI-HOST and HIMSS, the 2002 Organizational Davies Award of Excellence winners were announced later in the year on January 15, 2003. They were:

- Maimonides Medical Center – Brooklyn, NY.
- Queens Health Network – Queens and Elmhurst, NY.

Independent Primary Care Davies Award: HIMSS introduced the Independent Primary Care Davies Award of Excellence in May, 2003. The award was designed to recognize primary, independent care practices with no more than 32 physicians that have succeeded with implementations of electronic health records in their practices.

Formation of committees and work groups that focus on the electronic health record: HIMSS broadened its focus on the adoption of the electronic health record with the formation in 2003 of one committee and three work groups that addressed different elements of the EHR. Volunteer HIMSS members chaired each group. They were:

- **EHR Steering Committee** – February 2003 – Chair, Michael Glickman. The goal of the committee was to foster a wider acceptance of the EHR in the healthcare industry.

- **EHR Strategic Plan Work Group** – March 2003 – Lead, Jack Corley. Goal was to develop a strategic plan that would guide the work of the EHR Steering Committee, related Task Forces/Work Groups and collaborative efforts with additional groups that were working on fostering the growth and utilization of an EHR.

- **Definition and Attributes of the EHR Work Group** – March 2003 – Lead, Charlene Underwood. Goal was to develop the HIMSS’ perspective on EHR attributes and define essential features of an EHR.

- **The EHR Implementation Guide Work Group** – March 2003 – Lead, Joe Miller. Goal was to develop a guide to help organizations plan comprehensive EMR/EHR strategies.

- **The Minimum Emergency Data Set Work Group** – March 2003 – Lead, Jack Corley. Goal was to develop a white paper that identifies the minimum information needed in an emergency department and emergency response arena to support both public health and emergency care delivery needs.

- **The Voluntary Patient Identifier Work Group** – May 2003 – Lead, Rick Holtmeier. Goal was to address the problems involved in identifying patients to permit the sharing of medical information among providers.

Standards: HIMSS expanded its support of standards activities by accepting the appointment by the American National Standards Institute to be the Secretariat for the International Organization of Standardization Technical Committee for Health Informatics (ISO/TC 215) and administrator of the U.S. Technical Advisory Group.
Accepting this appointment followed the HIMSS strategic goal to expand the expertise and knowledge of healthcare information professionals who frame and lead healthcare legislation, regulations, policies, standards, and practices. These activities would provide opportunities for HIMSS members to contribute to the development of international healthcare informatics standards that affect the global enterprise and to work in collaboration with the most prominent healthcare informatics experts in the world.

**Research:** HIMSS collaborated with industry leaders on research throughout the year; topics addressed in 2002 and 2003 include industry compensation, job satisfaction, the use of technology in the ambulatory market, supply chain, staffing and technology and patient safety.

**14th Annual Leadership Survey, sponsored by Superior Consultant Company:** HIMSS released data from this survey in February, 2003 at the Annual HIMSS Conference & Exhibition. The survey allowed hospital CIOs, CEOs, and physician and nurse executives, as well as CEOs in the vendor community, to address the top technologies, priorities, and implementation barriers of the industry.

**Member Services:**

**Individual membership:** Individual members represented healthcare professionals in hospitals, corporate healthcare systems, clinical practice groups, healthcare information technology (HIT) supplier organizations, healthcare consulting firms, and government settings in professional levels ranging from senior staff to chief information officers (CIOs) to CEOs.

**Corporate membership:** More than 200 HIMSS corporate members included leading software and hardware suppliers, consultants, executive recruiters, publishers, ehealth, telecommunications firms, and other IT and healthcare industry professionals.

**Users Group Alliance Program:** HIMSS introduced the Users Group Alliance Program during 2003 to broaden its education and support offerings to users of various technology platforms in healthcare. As part of the program, Sun Microsystems formed its users group – SunSHINE (Sun Solutions for Healthcare: Information, Networking, Education) and MS-HUG (Microsoft Healthcare Users Group) unified with HIMSS as well during 2003. Members of HIMSS Users Group Alliance Programs were individual or corporate members of HIMSS, receiving full membership benefits; all HIMSS members also could participate in any of the user groups.

**Chapters:** HIMSS had 42 chapters throughout the United States and offered all members an opportunity to join special interest groups that brought together professionals with an interest in a special issue – or to serve on various committees.

**Education:**

**HIMSS audio conferences and on-line education:** Throughout the year, HIMSS offered various audio conferences on key and timely issues, such as HIPAA compliance and the EHR, with well-known speakers conducting the presentation and question-and-answer
session. Online education programs feature interactive tutorials, lectures, resource guides and quizzes. Courses were continually developed and updated to keep users current with the latest issues and body of knowledge with topics including career development, EHR, patient safety, HIPAA, and computerized order entry, to name a few.

**Online education:** HIMSS also entered into collaborations with two universities to extend the opportunity for higher-level education to members. The University of Connecticut and HIMSS launched their co-developed certificate program in healthcare information technology. Additionally, Oregon Health Sciences University extended its graduate level certificate program in healthcare information technology. Additionally, Oregon Health Sciences University extended its graduate level certificate program in healthcare information technology at a discount to HIMSS members who wish to gain formal education in healthcare informatics.

**Publications**

**Books from HIMSS:** The HIMSS publications department continued to provide the healthcare IT industry with leading book titles in the field. Three major titles released during 2003 were:

- *Effective Management of Healthcare Information: Leadership Roles, Challenges and Solutions*, by David S. Memel
- *Return on Investment: Maximizing the Value of Healthcare Information Technology*, by Pam Arlotto and Jim Oakes

**Peer-reviewed Journal:** *The Journal of Healthcare Information Management* provided members and other subscribers with a peer-reviewed publication covering key industry issues with the presentation of a current research as well as other articles. Each quarterly issue had a different theme: leadership in healthcare IT, managing technology, security, and return on investment were covered.

**New Initiative:**

**HIMSS Solutions Toolkit:** Launched at the 2003 Annual HIMSS Conference & Exhibition, Solutions Toolkit was a Web-based product containing competitive and strategic information for the healthcare IT industry. Solutions Toolkit gathered unbiased quantitative and qualitative data from the industry’s leading intelligence resources in a single, integrated data warehouse. Users could view healthcare IT product catalogs, side-by-side product comparisons, product peer reviews, IT department benchmarks, and hospital and healthcare system application profiles.

**2004 – Alliance for Nursing Informatics and HIMSS Analytics Formed**

During 2004, HIMSS focused on the adoption of an interoperable and portable electronic health record (EHR) as part of a national healthcare information infrastructure. This initiative was international in scope as the Society continued to be part of and learn from the health informatics community throughout the world.
2004 Annual HIMSS Conference & Exhibition: The Annual HIMSS Conference brought together more than 20,000 healthcare information and management systems professionals from all segments of the industry. Healthcare vendors, providers, consultants and payers converged on Orlando from February 22-26, 2004, to attend more than 200 education sessions, visit more than 700 exhibits and network with IT leaders in the healthcare industry.

Keynote speakers included:
• Newt Gingrich, former Speaker of the U.S. House of Representatives;
• Dr. Gro Harlem Brundtland, former Director-General of the World Health Organization;
• Congressman Patrick J. Kennedy (D-Rhode Island);
• Aron Ralston, mountaineer who shared his story of survival and patient rehabilitation; and
• Tom Wolfe, author.

Symposia: Recognizing the expanding and influential roles nurses play in clinical informatics, HIMSS introduced the Nursing Informatics Symposium, a one-day program designed by nurses for nurses and attended by more than 300 nursing informatics professionals. The Physicians’ IT Symposium and International Program returned to the 2004 Conference, providing these key audiences with IT information and insights.

Member communities: Two special conferences for members of the HIMSS’ users groups, Sun Solutions for Healthcare, Information, Networking and Education (SunSHINE) and Microsoft Healthcare Users Group (MS-HUG), offered education geared to developers and users of these vendor products.

New exhibit areas: To demonstrate IT solutions for implementation of electronic health records, HIMSS grouped exhibits and sessions together in two new exhibit areas - Product Pavilions and Emerging Technologies and Issues.

IHE/HL7 Collaboration: For the first time, Health Level Seven (HL7) and the Integrating the Healthcare Enterprise (IHE) collaborated in an interoperability demonstration to raise awareness of the importance of standards and the national health information infrastructure (NHII).

HIMSS Advocacy Committee Fact Finding Field Hearing: This session asked the question: “Should the Federal Government Help Accelerate Clinician Adoption of the Electronic Health Record?” The testimony of expert witnesses on this topic was provided to key government policy makers.

Alliance for Nursing Informatics: In October, 2004, 18 national and regional nursing informatics groups established the Alliance for Nursing Informatics (ANI). The boards of directors for both HIMSS and the American Medical Informatics Association (AMIA) agreed to provide ongoing support, coordination, and leadership for the Alliance.

The Alliance represents more than 2,000 nurses and brought together 18 distinct nursing informatics groups in the United States that function separately at local, regional, national and international levels and have established programs, publications and
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organizational structures for their members. The ANI Steering Team was formed with representatives of organizational groups that have a nursing informatics focus to guide the strategic goals and activities of the Alliance throughout the year.

**HIMSS Summer Conference 2004** – Held in Las Vegas, the two-day summer conference gathered almost 400 healthcare senior level executives to review key healthcare issues from a strategic management perspective.

The conference featured six education tracks: the business of IT; clinical information systems; new technology; outsourcing; adoption, analysis and outcomes; and achieving excellence.

**Keynote speakers were:**
- Paul C. Tang, MD, FCHIME, CMIO, Palo Alto Medical Foundation, who chaired the Institute of Medicine Committee on Data Standards for Patient Safety;
- Arnold Milstein MD, MPH, medical director, Pacific Business Group on Health, worldwide partner at Mercer Human Resource Consulting, and co-founder of the Leapfrog Group; and
- Robert Stevenson, MBA, former all-American athlete, corporate executive and author of *How to Soar Like an Eagle in a World Full of Turkeys.*

At the Innovative Technology sessions, attendees learned about vendor healthcare IT solutions, now implemented in the marketplace, for nursing documentation, staffing, return-on-investment, and medication management.

**Advocacy:** HIMSS continued public policy and advocacy outreach in Washington, D.C., and at the grassroots level by both educating policy makers and influencing key legislation related to healthcare information technology and the improved delivery of patient care. HIMSS reviewed over 20 separate legislative proposals involving patient safety, national health information infrastructure, offshore outsourcing, and electronic health records. Position statements were created on key legislative and regulation proposals.

**Advocacy Day:** At the annual HIMSS Advocacy Day in April, HIMSS members heard presentations from Representative Jim Greenwood (R-PA) and Dr. Rex Cowdry from the White House. Panels discussed key policy topics such as Voluntary Patient Identifiers and offshore outsourcing. The event was co-sponsored by eHealth Initiatives and AHIMA. Following the educational sessions, members visited with their respective legislators in Washington, D.C., to present the HIMSS policy agenda and discuss key health IT issues.

**HIMSS Advocacy Award:** At a congressional reception held in conjunction with the Vendors’ Solution Showcase, the Honorable Tommy Thompson, Secretary of the U.S. Department of Health and Human Services (HHS), received the HIMSS Advocacy Award for his leadership and initiative in promoting the adoption of the electronic health record at an evening reception and technology demonstration. U.S. Representative Patrick J. Kennedy (D-Rhode Island) also addressed the attendees.
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Public Policy Forum: At this year’s event, participants discussed solutions to overcoming IT barriers in ambulatory care.

HIMSS continued to grow and evolve as a national advocate for healthcare IT by providing monthly congressional updates for Capitol Hill staff on key issues of importance to the Society, visiting local HIMSS chapters to discuss advocacy, and collaborating with industry partners who share and can help deliver key input on health IT legislation.

21st Century Health Care Caucus: Working with key congressional staff and other associations, HIMSS helped launch the 21st Century Health Care Caucus, a bipartisan group of U.S. House members dedicated to improving healthcare using technology and management systems. HIMSS helped to recruit co-chairs, members, plan programs, and produce the monthly electronic newsletter.

Chapter Advocacy Liaison Roundtable: The Society launched this new grassroots effort of chapter advocates to promote advocacy and public policy at the chapter level.

Year-end Summary: HIMSS introduced an annual year-end event last year focused on summarizing current activities at the federal level surrounding health information technology issues and looking forward to new challenges. The first event was held jointly with the U.S. Medicine Institute Foundation policy forum in 2003, with a collaborative event planned with the 21st Century Health Care Caucus to review the effects of the November, 2004, U.S. elections on future health information technology policy.

New DC-area Office: HIMSS also opened a new Washington, D.C., area office at 901 King Street, Suite 400, in Alexandria, Va.

Federal Affairs: In addition to its advocacy initiatives, HIMSS expanded its outreach and staff to include federal affairs, the executive branch of the U.S. government. This effort was designed to positively affect the adoption of the electronic health record and leverage the collective HIMSS member expertise to assist the federal government’s development of priorities for health information technology implementation.

National Coordinator’s Office: The administration announced in September, 2004 its goal that most Americans have access to electronic health records within the next decade. David J. Brailer, MD, PhD, was appointed as the first National Coordinator for Health Information Technology, a position within HHS that HIMSS had also advocated as part of its advocacy agenda. Dr. Brailer released a Strategic Framework document that called for patient and clinician-centric education initiatives to achieve a national health information network.

HIMSS and its members were actively involved in the efforts to bring Dr. Brailer’s goals and actions to fruition, particularly the development of the Commission for the Certification of Health Information Technology.

Volunteer Member Involvement: HIMSS federal affairs efforts were supported by volunteer member involvement in the HIMSS National Health Information Infrastructure
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(NHII) Task Force, the National Preparedness and Response (NPR) Task Force, the HIMSS Government Relations Roundtable (HGRR), and the Chapter Advocacy Liaison Roundtable (CALR). These volunteer members have engaged federal agency representatives in policy discussions on such issues as disaster management, local health information exchange networks, and the potential impact federal efforts will have on health IT penetration.

Electronic Health Record: HIMSS continued to work for the passage of the Health Level Seven (HL7) Definitional Model for the electronic health record, which was a national standards-based effort to define the EHR. A mock ballot and education sessions provided attendees at the 2004 Annual HIMSS Conference with detailed information to better understand the benefits and positive impact of the HL7 definitional model. Following the conference and until summer 2004, when the draft standard was approved, HIMSS worked with the EHR Collaborative, other key health organizations, and stakeholders to ensure its passage.

Clinical Decision Support Implementers’ Workbook: This workbook was published in February, 2004, providing healthcare organizations guidance on developing and implementing clinical decision support (CDS) systems for clinical care. Developed by the HIMSS Clinical Decision Support Workbook Workgroup, the guide, including downloadable worksheet templates, was available on the HIMSS Web site. The second edition would be distributed in 2005 as an updated, printed workbook.

Clinical Information Systems (CIS) Benefits Database: The Society began work on a Clinical Information Systems Benefits Database to assist healthcare providers and organizations in the process of selecting CIS. By providing evaluations from organizations now using clinical information systems products, the database will focus on “advanced” CIS capabilities including computerized provider order entry (CPOE), CPOE-driven decision support, automated clinical documentation, electronic medical record (EMR) functionality and the ability to integrate ancillary systems. The HIMSS National CIS Benefits Database Task Force, led by an advisory group of national experts on CIS, planned to complete the development and introduction of the pilot version of the database in early 2005.

Continuity of Care (CCR) Record: HIMSS continued its efforts in support of the Continuity of Care Record (CCR), a standard for a core data set of the most relevant and timely facts about a patient’s healthcare. The ASTM International, Massachusetts Medical Society, American Academy of Family Physicians, American Academy of Pediatrics, American Medical Association, and Patient Safety Institute are sponsors of the Continuity of Care Record. The CCR ballot was scheduled for December, 2004.

Davies Award of Excellence: As manager of the Davies Award of Excellence, HIMSS awarded the first Primary Care Davies Award in 2003. Three recipients were chosen:
- Roswell Pediatric Center, Alpharetta and Cumming, Ga.;
- Cooper Pediatrics, Duluth, Ga.; and
- Evans Medical Group, Evans, Ga.

The recipient of the Organizational Davies Award was:
- Cincinnati Children’s Hospital Medical Center in Cincinnati.
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Public Health Davies Award: HIMSS introduced the Public Health Davies Award of Excellence in partnership with the Centers for Disease Control and Prevention (CDC), American Public Health Association (APHA), Association of State and Territorial Health Officials, Council of State and Territorial Epidemiologists (CSTE), National Association of City and County Health Officials (NACCHO), and the Association of Public Health Laboratories (APHL).

The award was open to any public health program, state or local and including tribal that improved the health of a defined community through health information management. Recipients of the award would be announced in November, 2004 at the American Public Health Association Annual Meeting and Exposition.

Ambulatory Care: The Society added a medical director to its staff in December, 2003 to lead HIMSS in its ambulatory care, or outpatient, initiatives for the adoption by physicians of the electronic health record.

Certification Commission for Healthcare IT: To address the challenge many physicians face when selecting an EHR system for their practices, HIMSS introduced the Certification Commission for Healthcare Information Technology in collaboration with the National Alliance of Health Information Technology (the Alliance) and American Health Information Management Association (AHIMA). Designed as a voluntary, private-sector certification of EHR systems, in support the direction of the U.S. Department of Health and Human Services, the program would let physicians and other healthcare professionals select and implement these products with greater speed and confidence, knowing that patient data could be securely exchanged in the nation’s developing health information infrastructure.

Physicians Adopting Computer Technology (PACT): In November, the Ambulatory Care Steering Committee launched a series of regional events designed to bring educational opportunities to physicians who wanted to computerize their practices while minimizing the interruption to their patient care schedules and those who want to maximize efficiencies of the installed systems. The program, PACT – Physicians Adopting Computer Technology, was conducted in Jacksonville, Florida, and Portland, Oregon. Physicians, who had successfully implemented healthcare IT in their practices, provided keynote presentations, followed by two education tracks and a demonstration of vendor IT solutions.

Integrating the Healthcare Enterprise (IHE): The Integrating the Healthcare Enterprise expanded this year to include two additional components for the application of IHE in healthcare delivery. The American College of Cardiology (ACC) introduced its technical framework in this clinical practice area. The initial three profiles, Retrieval of Electrocardiograms for Display, Echocardiography Workflow, and Cardiac Catheterization Workflow, can help improve patient care by providing a common approach to collecting, coordinating and sharing cardiology images and information related to cardiology.

The Cross Enterprise Document Sharing supplement, one of four supplements in the information technology infrastructure framework, facilitated the sharing across
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healthcare settings – from a private physician to a clinic to an acute care in-patient facility – of electronic documents with text and structured content. This supplement contributed to the foundation of a shared electronic health record, a key initiative for HIMSS and the healthcare industry in the U.S.

**Auto-ID Virtual Tour:** The HIMSS Bar Coding and Auto ID Task Force introduced the “Auto-ID Virtual Tour,” an online or CD-ROM review of the significant benefits that Auto-ID technologies bring to healthcare by taking a journey through a typical healthcare encounter.

**Standards - ISO TC 215:** As the secretariat for the Technical Committee 215 (TC 215) of the International Standards Organization (ISO), HIMSS continued its support of international standards activities for health informatics. The Society joined other international standards experts at a weeklong meeting in Washington, D.C., with 112 international delegates from 16 countries. Carolyn M. Clancy, MD, director of the Agency for Healthcare Research and Quality (AHRQ), was the speaker at a dinner sponsored by HIMSS.

New members joined the U.S. delegation to the international technical committee TC 215 that included (as of September 2004) AHRQ, the National Institutes of Health, Department of Veterans Affairs, and Department of Defense – Health Affairs participating with Siemens, Philips, GE Health solutions, Quadramed, Booz-Allen-Hamilton, Kaiser Permanente, United Health Care, and SNOMED and others.

**Standards Task Forces:** HIMSS launched two standards-related task forces this year. The Professional Practice Standards Task Force completed a business ethics standard while the Standards Task Force will provide an overview for all HIMSS standards initiatives and activities.

**Member Services:**

**HIMSS Membership:** HIMSS membership reached 15,000 individual and 250 corporate members during 2004. The Society provided a diverse range of high-quality resources, including education, professional advancement, and networking for its individual members that included executives such as chief executive officers (CEOs), chief information officers (CIOs), and chief operations officers (COOs), and senior executives, and industry specialists such as senior managers, IS technical staff, physicians, nurses, consultants, attorneys, financial advisors, technology vendors, academicians, management engineers and students.

**Corporate Members:** HIMSS corporate members included leading software and hardware suppliers, consultants, executive recruiters, publishers, e-health, telecommunications firms, and other IT and healthcare industry professionals.

**Chapters:** The Society had 40 chapters throughout the United States and Canada that provided local programming and networking for members.

**HIMSS Foundation:** The HIMSS Foundation, a separate non-for-profit corporation, remained the philanthropic arm of HIMSS, dedicated to inspiring charitable giving,
research, education and to enhancing the management and application of healthcare information and technology. The Foundation offered six scholarships to students at the undergraduate, graduate and doctoral level through Foundation and corporate support.

**Society for Health Systems:** HIMSS and the Society for Health Systems (SHS) affiliated to offer dual membership in and membership benefits of the two organizations. SHS members were healthcare management engineers and performance improvement professionals.

**Nursing Informatics Member Community:** The Midwest Alliance for Nursing Informatics (MANI) unified with HIMSS this year. HIMSS and MANI decided to unify since the two organizations share compatible goals: promoting education and networking to nurse informaticists and focusing on leadership in technology to improve the overall delivery of healthcare. MANI, founded in October, 1991, is a not-for-profit organization that serves as a resource for nursing informatics professionals throughout the Midwestern United States.

**New Special Interest Groups (SIGs):** HIMSS Special Interest Groups offered members an opportunity to participate in subject matter areas of interest. To better represent key initiatives and issues in healthcare, the Managed Care SIG changed its name to the Payer SIG and the Management Engineering and Re-Engineering & Performance Improvement SIG merged. In addition, the Society introduced a new SIG, Healthcare Security.

**Education:**

**HIMSS On-Line Education:** HIMSS continued to offer a wide variety of topics in its online education and audio conference programs. Online and distance education collaboration programs offered opportunities for HIMSS members throughout the world to earn healthcare IT certificates. The University of Connecticut and HIMSS continued to offer their co-developed certificate program in healthcare information technology. The Oregon Health Sciences University extended its graduate level certificate program in healthcare information technology at a discount to HIMSS members who wished to gain formal education in healthcare informatics.

**Audio Conferences:** Audio conferences, typically 60 to 90 minutes including time for questions to the presenter, offered continuing education credits for certification credentials. In 2004, the Society focused on the electronic health record for a three-session series. Other topics throughout the year included nursing informatics, return-on-investment, outsourcing, identity management and radio-frequency identification, HIPAA security, evidence-based medicine, clinical decision support, wireless nursing communication and incentives for clinical adoption of the EHR. Healthcare IT vendors/HIMSS members and providers were part of a new education offering from HIMSS in an audio conference series that illustrated real-world IT solutions in the delivery of healthcare.
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Publications:  
As a leader in providing the industry with content focused on the healthcare information technology, HIMSS published the following books in 2004:
- **Career Success in Healthcare Information Technology**, by Betsy S. Hersher and Linda B. Hodges;
- **The Physician-Computer Conundrum**, by William F. Bria, M.D, and Richard Rydell; and

Center for Information Technology Leadership (CITL):  
HIMSS continued its affiliation with the Center for Information Technology Leadership as publisher of CITL’s research report on standardized Healthcare Information Exchange and Interoperability (HIEI). Preliminary results of the CITL research, which was presented at the 2004 Annual HIMSS Conference, found that standardized healthcare information exchange between healthcare IT systems would deliver national savings of $77.8 billion annually after full implementation.

**HIMSS Insider:** The **HIMSS Insider** debuted in November, replacing **HIMSS News**, as the monthly newsletter for HIMSS members. The newsletter appeared within another new publication, Healthcare IT News, which was published by MedTech Publishing in partnership with HIMSS. This trade magazine was a monthly tabloid-sized newspaper for the healthcare IT field with a total circulation of almost 44,000.

**Peer-reviewed Journal:** The **Journal of Healthcare Information Management** continued to provide members and other subscribers with a peer-reviewed publication covering key industry issues with the presentation of current research as well as other articles. Each quarterly issue had a different theme: computerized physician order entry (Winter), HIPAA (Spring), clinical informatics (Summer), and new technology trends (Fall).

**Electronic Newsletters:** HIMSS published a number of electronic newsletters for its members and niche communities. **HIMSS E-News** published weekly for HIMSS individual and corporate members; the newsletter contained up-to-the-minute news of HIMSS activities and services and includes industry news briefs. Two monthly e-newsletters served HIMSS’ Microsoft and Sun Microsystems user group communities: the **MS HUG Connection** and **SunSHINE**. **Chapter Leader E-News** was published monthly for HIMSS chapter leaders, and **Exhibitor E-News** was published monthly for exhibitors to the Annual HIMSS Conference & Exhibition.

**HIMSS Analytics:**  
**Formation of Market Research Subsidiary:** Recognizing a need in the industry for quality and expanded market research services, the Society formed **HIMSS Analytics** in February, 2004, as a wholly owned, for-profit subsidiary, supporting the HIMSS’ mission of advancing the delivery of healthcare through the use of information technology.

The Society considered several options in developing the subsidiary, including exploring relationships with existing market research organizations and building a new enterprise. With approval from the HIMSS board of directors, HIMSS Analytics acquired the
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The subsidiary, was headquartered in Chicago, brought together a strategic and experienced senior leadership team with expertise in healthcare information technology, market research and consulting. Products and services offered by HIMSS Analytics support improved decision-making for healthcare organizations, healthcare IT companies, and consulting firms by delivering high quality data, information and analytical expertise.

The company collected and analyzed healthcare organization data relating to IT processes and environments, products, IS department composition and costs, IS department management metrics, healthcare delivery trends and purchasing related decisions. HIMSS Analytics also provides custom market research services to support strategic decision making in areas such as product planning, business and marketing strategy.

**HIMSS Research Initiatives:** The HIMSS research efforts, funded by the HIMSS Foundation, are now housed in HIMSS Analytics, positioning the subsidiary to be the single source for authoritative research in the healthcare information technology and management systems marketplaces.

**HIMSS Leadership Survey:** The Annual HIMSS Leadership Survey, sponsored by Superior Consultant Company, then in its 15th year, provided insight on the priorities, barriers and future of healthcare IT from a variety of perspectives, including CIOs, CEOs and physician and nursing executives. Other research topics addressed during 2004, in collaboration with industry leaders, included nursing informatics, national health information infrastructure, networking technology, national preparedness and response, ambulatory technology, and HIPAA compliance.
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2005 – Record-Breaking Attendance at Annual Conference

Annual HIMSS Conference & Exhibition: The 2005 Annual HIMSS Conference & Exhibition was held February 13-17, 2005 in Dallas, with 22,887 attendees, another record-breaking attendance with a 10% increase in registration from the 2004 conference.

Exhibitors: A total of 701 companies participated in the year’s exhibition, including 193 first-time exhibitors, using a total of 280,400 net square feet. An additional 29,300 net square feet included these demonstration areas: Product Pavilions, University Row, Interoperability Showcases, and Department of Defense.

Product Pavilion: The Product Pavilion demonstration areas featured 57 exhibitors showcasing products or services in the areas of Managing the Business of Healthcare, Patient Safety, Security, and Wireless & Mobility. In addition, 73 companies provided case study-based learning opportunities for attendees seeking to gain in-depth knowledge about various products(s) and the solutions they provided to healthcare IT challenges.

Keynote speakers included:
- John Chambers, president & CEO, Cisco Systems;
- Howard Putnam, former president/CEO, Southwest Airlines;
- Barbara Bush, Former First Lady, U.S.:
- David Brailer, MD, PhD, National Health Information Technology Coordinator;
- and
- Scott Adams, syndicated cartoonist & author, creator of Dilbert.

Professional Education: This year’s educational sessions included a Physicians’ IT Symposium, a Nursing Informatics Symposium with featured topics of Clinical Informatics; E-Enabled Applications; Electronic Health Record; Emerging Technologies; Health Data, Interoperability and Standards; IT Infrastructure and Architecture; IT Management; Leadership and Communication; Patient Safety; Legal, Regulatory and Risk Management; and Process Improvement.

Nursing Informatics Symposium: The 2005 symposium was attended by more than 400 nurses and was cosponsored by the Alliance for Nursing Informatics (ANI).

Physicians Symposium: The 2005 Symposium had almost 300 physicians and other industry professionals choosing from two educational tracks—one designed for the physician in the hospital or health system setting, the other for the physician office practice and ambulatory setting. The 2005 Physicians’ IT Symposium program was delivered by 13 experts in their respective fields and was presented in collaboration with the Association of Medical Directors of Information Systems (AMDIS), the American Medical Informatics Association (AMIA) and the Medical Group Management Association (MGMA).

Interoperability Showcases: Electronically tracking a personal health record (EHR) became a reality on the exhibit floor at HIMSS 2005 when more than 10%, or 2,300, attendees visited the Interoperability Showcases from February 14-17. They gained a
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glimpse of how caregivers can manage and share patient records across interoperable health care networks. Dr. David Brailer, MD, PhD, National Coordinator for Health Information Technology, attended HIMSS 2005 and received a private tour of the showcase.

Some 49 organizations participated in the Interoperability Showcases, including vendors, standards development organizations, EHR initiatives, academic health institutions, government agencies including the Department of Veterans Affairs Health System and others. The participating vendors assembled a virtual Regional Health Information Organization (RHIO) in which patient care records were efficiently created, stored, managed and accessed across a number of realistic care settings as attendees registered nearly 6,000 sample medical records in the RHIO.

Users Groups: The HIMSS Users Group Alliance Program was developed to create a variety of independent communities within HIMSS to provide environments for members to exchange technology-related ideas, challenges, and solutions. The 2005 SunSHINE Summit “Healthcare: Thinking Outside the Box,” was held on February 14 in conjunction with the annual conference. The MS-HUG Tech Forum 2005 attracted more than 300 attendees. With topics such as emerging technologies, interoperability, mobility and wireless, patient safety, data management and more, the Tech Forum featured presentations by the leading minds at Microsoft and industry experts.

Education:

HIMSS Summit: The 2005 HIMSS Summit: Achieving National Healthcare Transformation was held June 6-7 in New York City with 853 people attending. Michael O. Leavitt, HHS secretary, was the keynote speaker and announced the formation of the American Health Information Community (AHIC) at this conference. He held a press conference with Dr. David Brailer, MD, PhD, the ONC coordinator who was also a keynote presenter at the Summit. As a new federal advisory body, the AHIC was developed to make recommendations to the HHS Secretary on how to accelerate the development and adoption of health information technology.

At the HIMSS Summit, Dr. David Brailer announced the release of four request for proposals (RFPs) to achieve interoperability in healthcare. The RFPs focused on four specific areas in a contracting process that would support an interoperable National Health Information Network (NHIN).

Webinars and Audio Conferences: HIMSS education continued to provide ongoing educational efforts with webinars and audio conferences on key topic areas, such as clinical decision support, patient safety, ambulatory care, auto identification, nursing informatics and process improvement.

Member Services:

Membership: HIMSS individual membership grew by 7.6% in 2005 with membership at 17,500.

Corporate Members: HIMSS had more than 250 corporate members in 2005.
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**MS-HUG:** Membership in MS-HUG grew by 20% and SunSHINE by 141%.

**Chapters:** HIMSS also welcomed two new chapters: Austin, Texas and Red Rock, which includes Nevada and New Mexico.

**CEO IT Achievement Award:** The recipients of the 2005 award were:
- Joel Allison, President/CEO, Baylor Health Care System/Dallas;
- George Halvorson/Chairman/CEO/Kaiser Foundation/Health Plan and Hospitals/Oakland, Calif.; and
- Mark Neaman/President/CEO/Northwestern Healthcare/Evanston, Ill.

**Informatics:**

**HIMSS Nursing Informatics Community:** This new community welcomed 1,141 nurses as HIMSS members in 2005; this is a 66% increase from 2004.

**HIMSS Nursing Informatics Task Force:** The task force had 85 members in 2005. Workgroups were established for:
- Education;
- Web Site Tools & Resources;
- Nursing Informatics Awareness; and
- Nursing Informatics Task Force Survey.

**Health Information Technology Standards Panel:** HIMSS, the Advanced Technology Institute (ATI) and Booz Allen Hamilton were selected to serve as strategic partners with the American National Standards Institute (ANSI) in a new initiative to develop standards. A contract award was announced in October by HHS to support this new collaborative effort to harmonize healthcare information technology standards. Under the sponsorship of the ANSI, coordinator of the U.S. voluntary standardization system, the Healthcare Information Technology Standards Panel (HITSP) was formed to bring together a wide range of stakeholders to identify, select, and harmonize standards for communicating data throughout the healthcare spectrum.

**Integrating the Healthcare Enterprise/IHE:** As an industry-wide framework, IHE then had more than 100 vendors worldwide participating. IHE was also involved in the work of HITSP and was part of the standards harmonization effort awarded to ANSI with HIMSS, ATI and Booz Allen Hamilton.

**International Organization for Standards Development (ISO)/-ISO Technical Committee 215:** As the Secretariat for ISO TC-215, HIMSS participated in a Global HIT Standards Summit in Hamamatsu City, Japan, on September 12. This event was co-sponsored by HIMSS and ISO TC 215 with participants from 12 countries attending: Japan, Korea, Taiwan, Belgium, France, Germany, Netherlands, Sweden and the United Kingdom.

**HIMSS Certification:** The number of individuals with the CPHIMS - Certified Professional in Healthcare Information and Management Systems – certification grew in 2005 with 145 individuals sitting for the exam. A total of 631 health IT professionals then carried this
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credential. Individuals with the Certification in Healthcare Security or CHS credential totaled 101 with 25 people tested in 2005.

HLA Competency Directory: The Healthcare Leadership Alliance is comprised of the following organizations:
- American College of Healthcare Executives;
- American College of Physician Executives;
- American Organization of Nurse Executives;
- Healthcare Financial Management Association;
- Healthcare Information and Management Systems Society; and
- Medical Group Management Association and its certifying body, the American College of Medical Practice Executives.

EHR Initiatives:

Hurricane Katrina Outreach: When Hurricane Katrina hit the Gulf Region in August, 2005, HIMSS established an outreach to members in the area. HIMSS members donated more than $10,000 to charities for Katrina survivors and HIMSS matched this donation with $10,314.

HIMSS Katrina Phoenix Project: Following the hurricane, HIMSS also established a program to help rebuild medical practices in the area with EMR. The program identified practices in need and worked with other organizations to initiate this effort. They are:
- Health Level Seven;
- American Health Quality Association (AHQA);
- eHealth Initiative;
- Louisiana Health Care Review (LA QIO);
- Alabama Quality Assurance Foundation (AL QIO);
- Information and Quality Healthcare (MS – QIO);
- American College of Physicians;
- American Medical Association (AMA);
- Evans Medical Group;
- Pediatrics @ The Basin;
- North Fulton Family Medicine;
- University of Rochester Medical Center;
- Center for Health Information and Decision Systems University of Maryland; and
- HIMSS Electronic Health Record Vendors Association.

HIMSS Electronic Health Record Vendors Association (EHRVA): HIMSS formed the EHRVA to provide a forum for the EHR vendor community relative to standards development, the EHR certification process, interoperability, performance and quality measures, and other EHR issues that may become the subject of increasing government, insurance and physician association initiatives and requests.

As an active participant in the interoperability roadmap, the EHRVA was named to be part of the HITSP or Standards Harmonization panel. In addition, the group:
The History of HIMSS

- Responded to the Certification Commission for Health Information Technology (CCHIT);
- Developed the EHRVA Interoperability Roadmap;
- Participated in the HIMSS Katrina Phoenix Project; and
- Responded to the Centers for Medicare and Medicaid on Personal Health Records.

Nicholas E. Davies Awards of Excellence: The 2005 recipients of the Davies Award were:

- **Organizational Davies Award:** Citizens Memorial Healthcare/Bolivar, Mo.
- **Ambulatory Care Davies Award:** Wayne Obstetrics and Gynecology, Jesup, Georgia; Southeast Texas Medical Associates, Beaumont, Texas; and Sports Medicine & Orthopedic Specialists, Birmingham, Ala.
- **Public Health Davies Award:** North Carolina Disease Event Tracking and Epidemiological Collection Tool (NC DETECT), Chapel Hill, NC; Indian Health Services’ (IHS) Clinical Reporting System, Warm Springs, Ore.

Ambulatory Care Initiatives: HIMSS expanded its outreach to ambulatory care sites and physicians practicing in their own medical practice or clinic. Initiatives included:
- Physicians Adopting Computer Technology - PACT Conferences - held in Phoenix, New York and Chicago;
- American Health Quality Association (AHQA) collaboration; and
- Massachusetts eHealth Collaborative (MAeHC) educational conference.

Advocacy and Government Relations:

ASAE Honor Roll Award: The year 2005 was busy for HIMSS Advocacy and Government Relations. In December, 2005, the HIMSS Federal Legislation Tracker received the 2006 American Society of Association Executives (ASAE) Honor Roll award.

Advocacy Day: At the 4th Annual HIMSS Advocacy Day on Capitol Hill, members from 30 states representing almost half of all HIMSS chapters made more than 100 visits on Capitol Hill. For this event, 14 organizations signed on as co-sponsors:
- American Health Information Management Association (AHIMA)
- Center for Information Technology Leadership (CITL)
- Certification Commission on Health Information Technology (CCHIT)
- College of Healthcare Information Management Executives (CHIME)
- eHealth Initiative (eHI)
- EHR Vendor Association
- Information Technology Industry Council (ITIC)
- Internet2
- Medical Records Institute (MRI)
- Mobile Computing Alliance (MoHCA)
- National Committee for Quality Health Care (NCQHC)
- National Quality Forum (NQF)
- Patient Safety Institute (PSI)
- U.S. Medicine Institute (USMI)
At Advocacy Day, all 34 members of the 21st Century Health Care Caucus were honored.

**2005 HIMSS Advocacy Awards:** Congressman Patrick Kennedy (D-RI) and former House Speaker Newt Gingrich received these awards.

**Public Policy Forum:** The October Public Policy Forum was held in Washington, D.C., with the following milestones achieved for this event:
- First time a U.S. Senator has addressed HIMSS;
- Overcoming barriers to interoperability;
- Advocacy & Public Policy and Integration & Interoperability Steering Committees; and
- More than 125 attendees- record audience.

**Legislation:** In 2005, the U.S. Senate passed S. 1418, the Wired for Healthcare Quality Act. Members of the New England, Iowa and Michigan chapters of HIMSS worked to help this legislation pass the Senate. HIMSS co-sponsored six pieces of key health IT legislation during 2005. In addition, the Society worked for full funding for Office of the National Coordinator for Health Information Technology.

**Briefings:** HIMSS conducted briefings for the Senate Centrist Coalition and congressional caucuses with members providing testimony before key committees. HIMSS was also a member of the National Patient Advocate Foundation AHIC Outreach Working Group.

**Health IT Consortium:** This group of which HIMSS is a member developed and published an advertisement in *RollCall* newspaper to promote the adoption of health.

**HIMSS Legislative Principles:** This document was developed to emphasize what “principles” should appear in legislation that HIMSS supports.

**RHIO Federation:** HIMSS launched the RHIO Federation in October with 38 RHIO members confirmed in 2005. A task force and work groups were formed to address topics that include definitions, position statements, special projects and RHIO Guidebook. There was also a 38-person Chapter RHIO Federation Roundtable.

**HIT Dashboard:** The HIT Dashboard is launched. This Web tool provided a color-coded, easy-to-read visual interface that tracks over 500 state, federal, and private HIT initiatives. Projects tracked in the HIT Dashboard were:
- AHRQ HIT grants;
- DOQ-IT programs;
- Military Health System;
- RHIOs;
- Health Information Exchanges;
- Bridges to Excellence;
- Private HIT projects;
- HIMSS State Legislation Tracker (added in 2006);
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- Information on HIMSS Chapters (added in 2006); and
- Information on Davies Award Winners (added in 2006).

Oversight of data collection for the HIT Dashboard was secured by collaboration between HIMSS and the University of Maryland, Robert H. Smith School of Business, Center for Health Information and Decision Systems (CHIDS). The information provided by the HIT Dashboard was updated every two weeks.

Publications/Communications:
HIMSS publications introduced five new books in 2005:

- Improving Outcomes with Clinical Decision Support, 2nd edition (written by the Wireless Task Force)
- Medical Practice Transformation with Information Technology, by Charles M. Kilo MD, MPH, FACP and Mark K. Leavitt MD, PhD, FHIMSS
- Implementing the Electronic Health Record: Case Studies and Strategies for Success, by Joseph Miller FHIMSS
- Annual Report of the US Hospital IT Market (with HIMSS Analytics)
- Performance Management in Healthcare: From Key Performance Indicators to Balanced Scorecard, by Bryan P Bergeron MD

Web Services: The Web team introduced a redesign of the HIMSS Web site (www.himss.org) and continued to develop Web sites for other HIMSS initiatives.

2006 – HIMSS Goes Global

HIMSS EMEA Office: In September, HIMSS officially opened its HIMSS EMEA (Europe, Middle East and Africa) office in Brussels, Belgium. The office is staffed by MCI, a management consulting firm with offices throughout Europe and Asia. The HIMSS EMEA office operates much as the U.S. HIMSS office with the staff leading the educational efforts with input from HIMSS staff as needed.

World of Health IT: HIMSS expanded its member outreach and educational programming to Europe with the introduction of the first annual World of Health IT Conference & Exhibition, which was held in Geneva, Switzerland in October. This meeting was a joint venture with several sponsoring organizations working with HIMSS to establish the programs for the meeting.

Close to 2,000 people attended the conference. The event drew speakers, attendees and exhibitors from across Europe, the Middle East and Africa, including places as diverse as Andorra and Azerbaijan, Iceland and Israel and Saudi Arabia and Serbia-Montenegro. The main organizers of this event included HIMSS, the European Commission (EC) and the World Health Organization (WHO).

Keynote speakers at the event included some of the industry’s most respected thought leaders and experts including a Senior Member of the European Parliament Baroness Emma Nicholson, the Commission’s Ilias Iakovidis, Michael Bainbridge of the UK National Health Service and Claudio Beretta, general director of health for the Lombardy region of Italy. Other top names included Spaniard Maria Jesus Montero, minister of health for the Andalusia region and the Kuwaiti health minister, Sheik Ahmad Al-Abdullah Al
Ahmad Al Sabah. Information Society and Media Commissioner Viviane Reding, meanwhile, sent an opening video address.

The final attendance was 1,751. Almost 80% of those surveyed indicated they would be attending WHIT 2007 in Vienna scheduled for October 23-26, 2007.

**Annual HIMSS Conference & Exhibition – North America:** The 2006 Annual HIMSS Conference & Exhibition, held Feb. 12-16 in San Diego, Calif., attracted another record-breaking attendance of 24,870 individuals, a 5% increase over 2005, with 859 exhibitors.

**Keynote speakers were:**
- David Brailer, MD, PhD, National Health Information Technology Coordinator;
- Craig R. Barrett, chair, Intel Corporation;
- Governor Mark R. Warner, Virginia; and
- Dana Carvey, actor and comedian.

**Exhibition:** A total of 859 companies participated in the year’s exhibition, including 320 first-time exhibitors, using a total of 321,300 net square feet. Special areas on the show floor included Product Pavilions, University Row, Interoperability Showcases and Department of Defense.

**Professional Education:** Educational sessions were presented by some of the industry’s most well-respected thought leaders including symposia for physicians, CIO’s, nurses, pharmacists, clinical engineers, RHIOs, and Pay-for-Performance initiatives and two users group meetings. Featured topics included Clinical Informatics; E-Enabled Applications; Electronic Health Record (EHR); Emerging Technologies; Health Data, Interoperability and Standards; IT Infrastructure and Architecture; IT Management; Leadership and Communication; Patient Safety, Legal, Regulatory and Risk Management; Process Improvement; Project Management; and Public Health.

**CIO Forum:** The 2006 CIO Forum marked the first truly collaborative planning effort between CHIME and HIMSS with 455 attendees. This Forum was designed for the nation’s CIOs to examine the latest thinking and explore new trends in the industry. Speakers included Rep. Patrick J. Kennedy, (D-RI); Francois de Brantes, Program Leader, GE Health Care Initiatives; Leading Technology: Insights from CEO IT Achievement Award Winners; John P. Glaser, PhD, Senior VP & CIO, Partners Healthcare; and Joel Allison, FACHE, President and CEO, Baylor Health Care System, G. Richard Hastings, FACHE, President and CEO, Saint Luke’s Health System; Mark R. Neaman, President and CEO, Evanston Northwestern Healthcare; David J. Brailer, MD, PhD., National Coordinator for Health Information Technology; and Bruce Tulgan, Founder, RainmakerThinking, Inc.

At HIMSS06, other education sessions offered included the:

**Clinical Engineering and IT Leadership Forum** developed in partnership with the American College of Clinical Engineering (ACCE).
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**Nursing Informatics Symposium** was co-sponsored with the Alliance for Nursing Informatics. More than 350 nurses attended. New that year were two pre-symposium sessions for nurses who are new to informatics: Standardizing Terminology: An Introduction; and Basic Concepts in Understanding Databases.

**Pay for Performance Symposium** was designed to foster the collaboration between payors and providers by addressing the complex issues affecting both communities today and providing a focus for a common view through sharing information and data.

**Pharmacy Informatics Symposium** provided a professional forum for pharmacists involved in informatics and other professionals actively engaged in the process of medication management for their organization. It was developed in collaboration with the American Society of Health System Pharmacists (ASHP), National Council of State Pharmacy Association Executives (NCSPAEx), and the Institute for Safe Medicine Practice (ISMP).

**Physicians’ IT Symposium** presented a powerful program designed by physicians for physicians. The 2006 Symposium had over 300 physicians and other industry professionals choosing from two educational tracks: one designed for the physician in the enterprise system setting, the other for the physicians in the office practice and ambulatory setting. The Physicians’ IT Symposium was presented in collaboration with the Association of Medical Directors of Information Systems (AMDIS), the American Academy of Pediatrics (AAP), and the American Medical Informatics Association (AMIA).

**RHIO Symposium** appealed to all audiences playing a role in EHR transformation. It addressed what is being offered to support the growth of RHIOs and outlined the successes and steps to achieve them during. The HIMSS RHIO Federation Work Group was introduced at the symposium; at that time the Work Group was developing a business plan to support RHIOs across the U.S.

**2006 SunSHINE Summit:** This one-day conference was presented by SunSHINE, Sun Microsystems and HIMSS. The keynote speaker was Dr. Ed Hammond, a leading authority on healthcare standards and EHRs and professor-emeritus at Duke University. Dr. Hammond addressed the pressures and the progress of national EHR adoption and prescribed the specific steps for success.

**MS-HUG Tech Forum 2006:** The Microsoft Healthcare Users Group (MS-HUG) Tech Forum featured presentations by Microsoft and industry experts with two different tracks; an Interoperability, Collaboration & RHIOs Track and an Administration and Process Improvement Track.

**Advocacy Activities at HIMSS06:**

**4th Annual Government Relations and Public Policy Breakfast**, which included speeches by Nancy Davenport Ennis, Commissioner on the American Health Information Community and CEO of the National Patient Advocate Foundation; Ms. Robin Raiford, and Mr. Steve Robertson, CIO of Hawaii Pacific Health.
1st Annual Project Health IT Champions (Project HITCh) with the National Conference of State Legislatures, a three-day education program to improve state legislators' understanding of healthcare IT and management systems tools. Five state legislators and staff from Colorado, Florida, Maryland, Michigan, and New Hampshire represented the inaugural Project’s Champions. As part of Project HITCh, HIMSS hosted a tour of the U.S. Navy Ship Mercy in San Diego and the University of California Medical Center in La Jolla for congressional staff and state legislators to see the latest advances in public and private health information technology.

Global Programs:

Global Business Trade Exhibits & Education: The Global Business Trade Pavilion featured trade ministries from the United Kingdom, China, Australia and Singapore. To connect international trade representatives with major U.S. healthcare IT vendors and providers, the Global Business Trade Pavilion featured country-specific trade and investment information.

International Group Package: This was the first year HIMSS offered a discount for groups of 30 or more international delegates that were planning on attending the annual conference. Participation included more than 10 groups from Germany, Japan, Sweden, France, China, Singapore, Australia and The Netherlands. Included in the group package were special networking events, private U.S. hospital tours specializing in state-of-the-art healthcare IT, a private tour of the Interoperability showcase during non-exhibit hours, opportunities to meet and greet with senior level executives of U.S. marketed companies, and a special discount on registration.

Hospital Tours: Approximately 40 German and Japanese delegates toured Sharp Mary Birch Hospital for Women; 30 delegates toured Sharp Grossmont Hospital, one of the most technologically advanced emergency and intensive care facilities in the nation.

Exhibition Floor:

Product Pavilions—The Product Pavilion demonstration areas featured 44 exhibitors showcasing products or services in the areas of EHRs, Managing the Business of Healthcare, and Wireless & Mobility. In addition, 42 companies provided case study-based learning opportunities for attendees seeking to gain in-depth knowledge about various products(s) and the solutions they provide to healthcare IT challenges.

Interoperability Showcase: The Interoperability Showcase demonstrated health information exchange across a HIMSS RHIO using the IHE framework. Dr. David Brailer visited the HIMSS Interoperability Showcase and offered his perspective on the collaborative effort behind it.

Other facts about the Interoperability Showcase that year:

- More than 3,000 attendees visited the 2006 HIMSS Interoperability (RHIO) Showcase;
- 37 vendors demonstrated 48 health IT systems;
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• 12 vendors participated in a distributed demonstration of health information exchange:
  between their own exhibits and the Interoperability Showcase;
• 700 attendees created and tracked their own HER;
• 63 educational sessions were presented
• 5 international delegations visited the showcase;
• Three HIMSS 2006 keynote speakers toured the HIMSS Interoperability Showcase; and
• 16 clinical scenarios demonstrated interoperability across products, systems and Enterprises.

Certification: On August 14, 2006, the CPHIMS program met a milestone of having the one thousandth person apply for the exam. Mobile testing was launched in 2006 as well.

During 2006, 196 individuals applied for the exam; 186 tested with 138 (74.2%) passing and 48 (25.8%) failing. Since the inception of the program in January 2002, 1,044 individuals had applied for the exam, and 970 had actually sat for the test.

By 2006, the CPHIMS program had a total of 792 individuals (81.6%) who had passed the exam; 178 persons (18.4%) who had failed; and 609 health IT professionals who were active CPHIMS credential holders.

Informatics:

Tiger Team Summit: In April, 2004, nursing representation was missing from the national conference on Cornerstones for the Electronic Health Record convened by the Office of the National Coordinator of HIT. During fall, 2004, the TIGER Team formed to ensure nursing input to the national agenda. On November 1, 2006, 120 nursing and informatics leaders collaborated at a summit to articulate a vision for the future of nursing that enables nurses to use informatics in practice and education to provide safe, quality care and to define steps over the next three years toward their 10-year vision. As co-sponsor of the Alliance for Nursing Informatics, along with AMIA, HIMSS was a leader of this initiative.

HITSP Year One Effort/Publication of Interoperability Specifications: HITSP recommended to the American Health Information Community (AHIC) three interoperability specifications in the areas of electronic health records, biosurveillance, and consumer empowerment. In October, AHIC acknowledged the excellent work of the HITSP members and further recommended the interoperability specifications to HHS Secretary Michael Leavitt.

Member Services:

Individual Membership: With 47 HIMSS chapters throughout the U.S. and in Canada, HIMSS reached more than 10,000 members and prospects with local education and networking opportunities.

New chapters: During the past year the following chapters were developed: West Virginia, New Jersey, New Mexico, and Mississippi.
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Special Interest Groups: Three new SIGs were formed: Behavioral Health Special Interest Group; Clinical Engineering – Information Technology Convergence (CE & IT Convergence SIG); and Greater China Region Special Interest Group.

MS-HUG: The MS-HUG Fall Tech Forum, held August 23-24 at Microsoft Corporate Campus in Redmond, Wash., experienced a record registration. At that time MS-HUG had close to 4,000 members.

Fellows: The fellows began work on the first ever HIMSS History Wall - an exhibit of artifacts and timeline, which would be displayed adjacent to HIMSS Central at the 2007 Annual HIMSS Conference & Exhibition.

Health Information Systems:

Ambulatory Information Systems and Enterprise Information Systems:

Ambulatory Community Health Clinics: The Ambulatory IS Steering Committee launched a new community of Ambulatory Community Health Clinics to address this growing sector of the healthcare community.

CCHIT Response: The Ambulatory IS Steering Committee and the Enterprise Information Systems Steering Committee both responded to various CCHIT public comment periods, offering input and guidance on the certification of EHR products.

HITSP Response: The Enterprise Information Systems Steering Committee responded to several of the comment periods offered by the Health Information Technology Standards Panel to provide input shaping the delivery of standards for inpatient EHR healthcare IT.

Stark Exception and Anti-Kickback Safe Harbor Educational Materials and Programming: Both the Ambulatory IS and the Enterprise IS Steering Committees developed and implemented webinars and educational materials on the Anti-Kickback Safe Harbor topic with numerous printed educational materials developed and posted on HIMSS Web site.

Personal Health Records: With more clinician and consumer interest in personal health records, HIMSS introduced the PHR Steering Committee, PHR Vendor Group Task Force, and PHR Consumer Organizational Outreach Task Force to study and educate the respective audiences on PHRs.

Davies Award of Excellence Program:

Davies logo: A Davies logo, designed in-house with a line drawing of Dr. Nicholas E. Davis, was introduced and would now be used on all Davies Award materials and the Web site.

Davies white papers: A series of Davies white papers were developed and posted on the HIMSS Web site. This set of informational materials provided background and ROI data on the program.
Davies Award Recipients:

**2006 Davies Organizational Award** Recipients were the Center for Behavioral Health/Bloomington, Ind.; and Generations+/Northern Manhattan Health Network/New York, NY.

**2006 Davies Ambulatory Care Award** Recipients were Alpenglow Medical, LLC/Fort Collins, Colo.; Cardiology of Tulsa (COT)/Tulsa, Okla.; and Piedmont Physicians Group (PPG 775)/Atlanta, Ga.

**2006 Davies Public Health Award** Recipients were Texas Department of State Health Services (DSHS) Behavioral Health Integrated Provider System (BHIPS), a Web-based Electronic Health Record (EHR)/Austin, Texas; and New York State Environmental Public Health Tracking Network (NYS EPHTN) Data Exchange System/Albany, NY.

**The Digital Office:** This e-newsletter marked its first anniversary in January and ranked as the HIMSS publication (newsletter) with the highest sign-on rate of subscribers.

**The HIT First Responder Workgroup:** Launched under the guidance of the Ambulatory IS Steering Committee, the workgroup addressed emergency preparation for healthcare facilities.

**Business Information Systems:** It was a year of collaboration with the HIMSS Business Information Systems initiatives.

**CAQH-CORE:** HIMSS established a relationship with CAQH-CORE to co-sponsor educational sessions with them. As background, the Council for Affordable Quality Healthcare (CAQH) brought together nearly 70 industry stakeholders—health plans, providers, vendors, government agencies, associations, regional entities and standard-setting organizations—to create and, ultimately, disseminate and maintain operating rules to facilitate real-time, comprehensive, secure transfer of patient eligibility and benefits information. The organization launched the Committee on Operating Rules for Information Exchange (CORE) in response to private sector recognition of the need for an interoperable solution for communicating member data to physician practices.

Three different CAQH-CORE educational sessions were offered during the year, each in conjunction with one of the following: HIMSS EIS Steering Committee, EIS Enterprise Integration Task Force, and the Ambulatory Steering Committee.

**Connecting Communities:** HIMSS and the eHealth Initiative collaborated to develop this initiative as a vehicle to share the strengths of both organizations in the delivery of products and services for RHIOs and HIEs. In 2006, two Connecting Communities regional programs were held (with two in 2007), one in Salt Lake City and one in Chicago.

Regional health information organizations (RHIOs) and health information exchange (HIEs) initiatives throughout the U.S. facilitated healthcare information across organizations to deliver clinical results and information to physicians and other...
The History of HIMSS

healthcare providers at the point of care. The Connecting Community Forums were designed to provide key insights and practical advice to these state, regional and community-based initiatives. The forums brought together industry leaders to share their experience and knowledge regarding RHIO and HIE development.

**Webinars:** Throughout the year, programming on RHIOs, via a webinar and with “Connecting for Health: A Common Framework for Initiative Private and Secure Health Information Sharing,” provided more information on the topic of RHIOs and their value to the implementation of the EMR.

**Internet 2:** HIMSS and Internet2 launched a collaborative relationship in 2006. Internet2 had focused on academic organizations and thus, brought that strength to HIMSS. Two work groups were formed with combined HIMSS membership and Internet2 members. The work groups were Identify Management and Privacy and Security.

**AFEHCT Advisory Council:** HIMSS launched the AFEHCT Advisory Council to expand core content areas to business information systems with an onsite meeting of the AFEHCT board as the HIMSS AFEHCT Advisory Council held during the year. This group expands HIMSS’ outreach to members by providing more education and content for those in the business information systems area. AFEHCT is the Association for Electronic Health Care Transactions.

**Health Information Exchange Steering Committee:** To help lead HIMSS’ activities in RHIOs and HIEs, this steering committee was formed. This group also supports the collaboration between HIMSS and eHI.

**Publications:**
The following books were published by HIMSS in 2006:
- *Nursing and Informatics for the 21st Century: An International Look at Practice, Trends and the Future*, by Charlotte A. Weaver RN, PhD, Editor, Connie W. Delaney PhD, RN, FAAN, Editor, Mr. Patrick Weber RN, MA, Editor, Ms. Robyn Carr, RGON, Editor;
- *HIMSS Dictionary of Healthcare IT Terms, Acronyms and Organizations* (both print and online versions), compiled by the HIMSS Standards Task Force and Dictionary Editing Work Group;
- *Guide to the Electronic Medical Practice: Strategies to Succeed, Pitfalls to Avoid*, edited by Steven L. Arnold MBA, MD, MS;
- *Performance Management in Healthcare: From Key Performance Indicators to Balanced Scorecard*, by Bryan P Bergeron, MD; and

**Advocacy and Public Policy:**

**National Health IT Week:** The first National Health IT Week was held in collaboration with 45 partnering organizations and joint sponsored by the Massachusetts Medical Society. Two of the main events during the week—the 2006 HIMSS Summit and Advocacy Day—were both well-attended with over 466 and 200 participants, respectively.
Advocacy Day 2006: In 2006, more than 400 advocates from 48 states turned out for HIMSS 5th Annual Advocacy Day on June 6 in Washington, D.C.’s Ronald Reagan Building and International Trade Center. Armed with professional legislative strategy training from author and grassroots consultant Christopher Kush, the advocates completed morning education sessions and trekked to Capitol Hill in the afternoon to complete 246 visits with their members of Congress. Keynote speaker, U.S. Senator Sam Brownback (R-KS), announced his plans to introduce the Independent Health Record Bank Act of 2006, at HIMSS Advocacy Day. The bill would establish independent health record banks to store electronic medical records.

Advocacy Awards: Following the Capitol Hill meetings, June Lowe, vice chair of HIMSS Board of Directors, presented the 2006 Advocacy Awards to Maryland Delegate Shane Pendergrass and Dr. Carolyn Clancy, director of the Agency for Healthcare Research and Quality during a Networking Reception in the Rayburn House Office Building Foyer.

HIMSS First State Government Advocacy Day: In conjunction with HIMSS Virginia and National Capitol Area Chapters, HIMSS’ first State Government Advocacy Day was held on January 18 in Richmond, Va. Speakers included State Delegate David Poisson and Virginia Secretary of Technology Aneesh Chopra. Additional state advocacy Days were held in the states of New York and Oregon.

Public Policy Forum: A record number of industry and government leaders attended the 4th Annual HIMSS Public Policy Forum at the Ronald Reagan International Trade Center in Washington, D.C., on September 28th. The program opened with Rep. Adam Smith (D-WA), Co-Chair of the New Democrat Coalition of the U.S House of Representatives, providing a congressional overview of health information technology legislation and reiterating his support for its passage in the 109th Congress. Keynote speakers included The Honorable William Winkenwerder, Jr., MD, MBA, Assistant Secretary of Defense for Health Affairs; The Honorable Karen Evans, Administrator for eGov, Office of Management and Budget; and Paul Sheils, Head of eHealth & Information Business, Aetna, Inc.

HIMSS-NCSL Partnership: HIMSS was a founding member of the National Conference of State Legislators (NCSL) Health Information Technology Champions (HITCh) Partnership, a project of the Foundation for State Legislatures (NCSL Foundation), which was launched at NCSL national conference in Nashville on August 17.

HIMSS and NCSL had been working together informally for over a year to ensure that state legislators were aware of how HIT can help address some of the prohibitive costs and quality issues that exists in today’s healthcare programs. HIT legislation was pending in almost every state so the partnership with NCSL was a natural progression in HIMSS’ efforts to strengthen education and outreach to state, regional, and local areas.

Over an 18-month period, the NCSL Foundation Project HITCh Partnership would sponsor working and information sessions for state legislators and their staff, share articles and policy papers on HIT, and develop a HITCh web site. A core group of legislators and staff would meet at regular intervals to guide the project. Silver and Gold sponsors of the Foundation for State Legislatures were invited to participate in the Foundation partnership program.
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**HIMSS Chapter Advocacy Certification Program:** Over 35 HIMSS chapters were working together to advance federal, state, and local HIT-related legislation through the Chapter Advocacy Certification Program. Launched in July, 2006, the program identifies, trains, and mobilizes Chapter Advocacy Liaison Representatives (CALR) at participating chapters to help coordinate effective, sophisticated grassroots advocacy across the country. CALRs and their Chapters were working their way up a three-step certification program. In 2006, 11 HIMSS chapters and 14 Chapter Advocate Liaison Representatives had achieved Advocate Level Certification. Shawna Schuler, Minnesota Chapter Representative, earned Ambassador Level Certification.

**HIMSS First Elections Webinar:** More than 100 HIMSS members participated in the organization’s first webinar on “The November Elections and Its Impact on HIT and You” on November 17. The webinar featured retired Congressman Alan Wheat of Missouri as well as Ned McCulloch, chair of the Advocacy and Public Policy Steering Committee, and Fred Hannett, chair of the Government Relations Roundtable.
Appendix I
Hospital Management Systems Society Resolutions
April 2, 1962

The Executive Committee recommended:

1. The president appoint a special negotiating committee to represent Hospital Management Systems Society.

2. That this committee request of American Hospital Association that a personal membership department be established for “Management Systems.”

3. That the Hospital Management Systems Society’s constitution be submitted with this request, anticipating that certain changes in the constitution will be required.

4. That the special committee seek to maintain maximal autonomy including particularly control of membership requirements and admissions.

5. That a positive attempt be made to affiliate with the AIIE, provided that the AIIE agrees to requirements compatible with both the HMSS and AHA.

6. That upon consummation of an agreement between the special committee and AHA, the resulting by-laws be submitted for consideration by the Executive Committee.

7. If approved, that such by-laws be submitted to the membership for ratification under Article XI of the HMSS Constitution.
Appendix II
HMSS Code of Ethics

The HMSS Code of Ethics was developed in 1964 and adopted in 1965 and minor changes were made in 1980. It was instituted to serve as guidelines to all HMSS members for their work in hospital management systems. The Code of Ethics stipulates professional behavior that requires members to:

1. Cooperate in promoting the effectiveness of the profession by exchanging information and experience with colleagues and other groups dedicated to the improvement of hospital management systems.
2. Endeavor to extend public knowledge of the objectives, activities, and contributions of their profession.
3. Act in professional matters with fidelity to the best interests of the client or employer, as long as such interest does not conflict with this code.
4. Endeavor to protect the professional from misunderstanding and misinterpretation.
5. Take proper safety precautions in the design of systems and facilities that affect patients, employees, or the public.
6. Perform the assigned work in a spirit of cooperation and understanding and give due regard to the dignity and worth of the individual.
7. Refrain from using their position or influence for selfish advantage and from advertising their work in a self-laudatory manner.
8. Refrain from expressing public opinions on matters for which they are not qualified, and abstain from practices likely to discredit or to do injury to the dignity and honor of the profession.
9. Take care that credit is given to those to whom credit is properly due.
10. Refrain from intervening in the practice of a colleague without the colleague’s knowledge and from disparaging the work of the colleague.

Appendix III

<table>
<thead>
<tr>
<th>Year</th>
<th>Conference</th>
<th>No. of Attendees</th>
<th>No. of Exhibitors</th>
<th>Chair</th>
<th># of Individual Members at Year End</th>
<th># of Corporate Members at Year End</th>
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<tbody>
<tr>
<td>2006, February</td>
<td>San Diego, CA</td>
<td>24,870</td>
<td>859</td>
<td>Blackford Middleton</td>
<td>18,439</td>
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<td>2005, February</td>
<td>Dallas, TX</td>
<td>22,877</td>
<td>701</td>
<td>Pamela Wirth</td>
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<td>2004, February</td>
<td>Orlando, FL</td>
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<td>Rich Duncan</td>
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<td>Atlanta, GA</td>
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<td>19,400</td>
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### The History of HIMSS

<table>
<thead>
<tr>
<th>Year</th>
<th>Conference</th>
<th>No. of Attendees</th>
<th>No. of Exhibitors</th>
<th>Chair</th>
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<td>1994, February</td>
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<td>248</td>
<td>George E. Levesque</td>
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<td>1979, February</td>
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<td>John E. Rueckerl</td>
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<td>1973, February</td>
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<td>Ben W. Latimer</td>
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<td>Patrick E. Ludwig</td>
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<td>Addison C. Bennett**</td>
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<td>George L. Deschambeau</td>
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Organizing Period, 1961
Figures in parenthesis are estimated
*Charter Members
**Mr. Bennett and other officers continued to serve throughout calendar year 1970
***Fiscal year and figures changed to June 30 (previously December 31) annually
The History of HIMSS

Appendix IV

Life Members/LHIMSS and Life Fellow Members/LFHIMSS

In June, 2007, the HIMSS Board approved two new designations for the Society’s LIFE members:

- **LHIMSS** (Life Member of Healthcare and Information Management Systems Society)
- **LFHIMSS** (Life Fellow of Healthcare and Information Management Systems Society)

*Life membership* is defined in the HIMSS bylaws as “the category of persons who have been active in the field of healthcare information and management systems and a member in good standing for 30 continuous years.”

**LHIMSS/LFHIMSS Members as of July 1, 2007**

<table>
<thead>
<tr>
<th>Name</th>
<th>Designation</th>
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</thead>
<tbody>
<tr>
<td>Patrick Abrami</td>
<td>LFHIMSS</td>
</tr>
<tr>
<td>William Andrew</td>
<td>LHIMSS</td>
</tr>
<tr>
<td>E. Timothy Blakely</td>
<td>LHIMSS</td>
</tr>
<tr>
<td>Richard Chartier</td>
<td>LHIMSS</td>
</tr>
<tr>
<td>Richard Correll</td>
<td>LFHIMSS</td>
</tr>
<tr>
<td>Sheldon Dorenfest</td>
<td>LHIMSS</td>
</tr>
<tr>
<td>Robert Durej</td>
<td>CPHIMS, LFHIMSS</td>
</tr>
<tr>
<td>Richard Friedland</td>
<td>LFHIMSS</td>
</tr>
<tr>
<td>Thomas Gentile</td>
<td>LHIMSS</td>
</tr>
<tr>
<td>Alan Goldberg</td>
<td>LFHIMSS</td>
</tr>
<tr>
<td>Robert Gunn</td>
<td>LFHIMSS</td>
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<tr>
<td>Robert Harris</td>
<td>LFHIMSS</td>
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<tr>
<td>James Hosking</td>
<td>LFHIMSS</td>
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<tr>
<td>Arthur Lambert</td>
<td>MS, LFHIMSS</td>
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<td>Dennis L’Heureux</td>
<td>MS, CPHIMS, LFHIMSS</td>
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<td>Gail Malcolm</td>
<td>CHE, LFHIMSS</td>
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<tr>
<td>D. Patrick Mazzolla</td>
<td>LHIMSS</td>
</tr>
<tr>
<td>Justin Myrick</td>
<td>PhD, LFHIMSS</td>
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<tr>
<td>Richard Reynolds</td>
<td>LFHIMSS</td>
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<td>Barry Ross</td>
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<td>Peter Ryerson</td>
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<td>Gay Doreen Serway</td>
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<td>Arthur Smith</td>
<td>MSIE, MSHPA, FHIMSS</td>
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<td>LHIMSS</td>
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<td>Thomas Smith</td>
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<td>Steven Speer</td>
<td>LFHIMSS</td>
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<tr>
<td>John Templin</td>
<td>FACHE, LHIMSS</td>
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<td>Jim Turnbull</td>
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<td>Thomas Waterman</td>
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<td>Dennis Whitmire</td>
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Appendix V
Fellows Chairs

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<th>Name</th>
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<td>Julius Spivak</td>
<td>1986</td>
</tr>
<tr>
<td>Barry Ross</td>
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</tr>
<tr>
<td>Frank Overfelt(^1)</td>
<td></td>
</tr>
<tr>
<td>Arthur R. Smith</td>
<td></td>
</tr>
<tr>
<td>Peter Ryerson</td>
<td>1995-1996(^2)</td>
</tr>
<tr>
<td>Richard Friedland</td>
<td>1996-1997</td>
</tr>
<tr>
<td>Bob Gunn</td>
<td>1997-1998</td>
</tr>
<tr>
<td>Nancy E. Aldrich</td>
<td>1998-1999</td>
</tr>
<tr>
<td>Deb L. Krau</td>
<td>1999-2000</td>
</tr>
<tr>
<td>John L. Templin</td>
<td>2001-2000</td>
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<tr>
<td>Scott A. Klink</td>
<td>2002-2001</td>
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<tr>
<td>Pam V. Matthews</td>
<td>2002-2003</td>
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<tr>
<td>Richard (Dick) Reynolds,</td>
<td>2003-2004</td>
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<tr>
<td>JoAnne W. Klinedinst</td>
<td>2004-2005</td>
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<td>Dean Athanassiades</td>
<td>2005-2006</td>
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<tr>
<td>Steven Friedman</td>
<td>2006-2007</td>
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<tr>
<td>Brian Compas</td>
<td>2007-2008</td>
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Appendix VII
Member Emeritus

Richard P. Covert, PhD

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\(^1\) Refer to the 1993 entry in the main text
\(^2\) Fiscal Year changed to July 1 – June 30 from calendar year basis