# Program Change Notification Requirements

**At any time** when a change to one of the following is made, IMMEDIATE notification of the change is required. Use the annual attestation form below to submit notification to: academic.affairs@ahima.org.

If such notification is not received within 30 days of occurrence, program approval may be suspended.

* Change in Program Director/Coordinator
* Change of Organization Address
* Loss of regional or national accreditation or adverse action from accrediting agency (explain action, include letter or notification from accreditor)
* Voluntary Withdrawal of Approval

# Annual Attestation Update

Since January 2013, all PCAP approved programs must complete and submit the PCAP Annual Attestation form. The form is to be submitted in the month your program received its approval (for example, if your program was originally approved in March of 2020, your annual attestation is due in March of each year during your approval period). The non-refundable annual attestation fee is $750. Submit your annual attestation form and related documents to: academic.affairs@ahima.org. Checks should be payable to AHIMA and sent to AHIMA, Dept. 77-2735, Chicago, IL 60678-2735.

# Additional documents to be submitted along with the Annual Attestation form

Provide the following additional documentation along with the Annual Attestation form; **to the extent possible, compile the documents into one file by adding the additional pages under the Attestation form below**:

* Advisory Committee agendas and summaries from prior application/attestation to current date
* Curriculum Vitae for any new faculty from prior application/attestation to current date
* Continuing education (CEUs) report for each active faculty member from prior application/attestation to current date
* Syllabi for any new or modified courses from prior application/attestation to current date

**Date Annual Attestation Form Completed:**

| **Organization Name:****Program Name:**  | New (If new, include requested information as an attached document) | No Change (check only –no documentation required) |
| --- | --- | --- |
| Program Director/Coordinator Name  |  |  |
| Program Director Credentials  |  |  |
| Program Director/Coordinator E-mail and Phone |  |  |
| Organization Address |  |  |
| Curriculum Revisions (List names/course numbers of courses added or deleted from curriculum) |  |  |
| Changes in faculty (new faculty names and credentials – include CV for new faculty). List names of faculty that have permanently left the organization since previous report. Provide CEUs reports for all faculty from prior application/attestation to current date. |  |  |
| Accreditation actions (loss of accreditation, adverse action). Describe action and outcome. |  |  |
| Provide advisory board documentation of meeting minutes/actions and member profiles |  |  |
| Describe how student complaints to the AHIMA regarding your program have been /will be addressed. (You will have received notification from AHIMA in the event complaints are received) |  |  |
| Number of students enrolled in the program at time of last attestation/application |  |  |
| Number of students who have completed the program since the time of the last annual attestation |  |  |
| Number of students who have withdrawn/stopped attending the program since last annual attestation |  |  |
| Number of students currently enrolled in the program |  |  |
| Students who remain for other programs/degrees |  |  |
| Number of graduates employed within one year of program completion |  |  |
| Actions plans that arose out of annual program evaluation |  |  |

**Insert additional pages here – Thank you!**