Domain 1: Data and Information Governance (17-20%)

Tasks:
1. Evaluate the integrity of the health record documentation
2. Apply knowledge necessary to process the required clinical data elements for quality reporting (e.g., facility committees, payers)
3. Understand and apply data dictionary standardization policies
4. Manage documentation and data standards based on organizational policy
5. Complete data analysis to inform management
6. Develop policies and procedures for health record data, documentation management, and information governance
7. Comply with retention and destruction policies for health information
8. Manage the integrity of the master patient index (MPI)

Domain 2: Compliance with Access, Use, and Disclosure of Health Information (15-18%)

Tasks:
1. Manage patient access to their health information, including use of patient portals
2. Advocate for patients and families in the process of obtaining health information
3. Process health information requests according to legal and regulatory standards
4. Monitor access to protected health information (PHI) internal and external to the organization (e.g., health information exchange (HIE))
5. Develop health information request workflows to comply with legal and regulatory standards
6. Follow breach of information protocols
7. Ensure compliance with privacy and security initiatives (e.g., cyber security, disaster recovery)

Domain 3: Data Analytics and Informatics (23-26%)

Tasks:
1. Support end users in EHR applications
2. Create reports and visual representations of data
3. Use database management software and techniques (e.g., data mining)
4. Audit documentation using a focused tool (e.g., CDI, quality, safety)
5. Optimize health information and other technologies to improve workflows
6. Support health information exchange solutions
7. Examine software applications and integrations for the impact to health information
8. Understand the information systems development life cycle, including the analysis, design/development, implementation, maintenance, and evaluation phases
9. Validate healthcare statistics for organizational stakeholders
Domain 4: Revenue Cycle Management (20-23%)

Tasks:
1. Educate providers on various reimbursement models
2. Validate coding accuracy
3. Monitor department of health and human services (HHS) clinical documentation requirements
4. Conduct clinical documentation integrity (CDI) activities in support of revenue and quality improvement initiatives
5. Support the claims management process (e.g., CDM maintenance, DNFB analysis, and A/R management)
6. Assign diagnoses and procedure codes and groupings according to official guidelines
7. Conduct revenue integrity activities (e.g., coding audits, denials management, and fraud prevention)

Domain 5: Management and Leadership (23-26%)

Tasks:
1. Develop and implement goals and strategies, including change management to support organizational initiatives
2. Demonstrate knowledge of contracting/outsourcing processes
3. Perform human resource management activities (e.g., recruiting staff, creating job descriptions, resolving personnel issues)
4. Perform and oversee work design and process improvement activities
5. Facilitate training and development
6. Prepare and implement budgets
7. Assist with accreditation, licensing, or certification processes
8. Monitor organizational compliance with health laws, regulations, or standards
9. Demonstrate knowledge to lead or facilitate project management