Coding Certificate Program Competencies

A significant change in approach is noted with this release of the curricula. The emphasis and measurement of success is with attainment of the Bloom's taxonomy level (see page 8) associated with the Student Learning Outcomes (Competencies) rather than the curricular considerations (which are examples of topics to be considered as part of the teaching process). When specific content is required it is part of the student learning outcome. With the pace of change in healthcare and HIM today, the curricular considerations may change with great frequency, but the student learning outcomes would remain consistent over longer periods of time.

Concepts to be interwoven throughout all levels of the curricula include:

- CRITICAL THINKING: For example the ability to work independently, use judgment skills effectively, be innovative by thinking outside of the box

- PERSONAL BRANDING: For example personal accountability, reliability, self-sufficiency

Entry Level Competency Student Learning Outcomes	Bloom's Level	Curricular Considerations
Domain I. Data Content, Structure &Standards (Information Governance)		
DEFINITION: Academic content related to diagnostic and procedural classification and terminologies; health record documentation requirements; characteristics of the healthcare system; data accuracy and integrity; data integration and interoperability; respond to		Definition: Curricular considerations are not required content. They are recommended examples.

1	This is the curriculum content floor, but not the ceiling. Final Date: October 30, 2014

customer data needs; data management policies and procedures; information standards.		
Subdomain I.A Classification Systems		

1. Apply diagnosis/procedure codes according to current guidelines	3	• Classification Systems
		   o ICD (ICD-9-CM, ICD-10, ICD-10-CM/PCS)
		• Taxonomies
		   o Clinical Care Classification (CCC)
		• Nomenclatures
		   o CPT, DSM, RxNorm
		• Terminologies
		   o LOINC, SNOMED CT

2. Evaluate the accuracy of diagnostic and procedural coding	5	• Principles and applications of classification, taxonomies, nomenclatures, terminologies, clinical vocabularies, auditing
3. Apply diagnostic/procedural groupings	3	• Principles and applications of diagnostic and procedural grouping • DRG, MSDRG, APC, RUGS
4. Evaluate the accuracy of diagnostic/procedural groupings	5	• Principles and applications of diagnostic and procedural grouping
Subdomain I.B. Health Record Content and Documentation		
1. Analyze the documentation in the health record to ensure it supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status	4	• Content of health record • Documentation requirements of the health record • Health information media o Paper, computer, web-based document imaging
2. Verify the documentation in the health record is timely, complete, and accurate	4	• Documentation requirements of the health record for all record types • Acute, outpatient, LTC, rehab, behavioral health
3. Identify a complete health record according to, organizational policies, external regulations, and standards	3	• Medical staff By-laws • The Joint Commission, State statutes o Legal health record and complete health record
4. Differentiate the roles and responsibilities of various providers and	5	• Health Information Systems as it relates to the roles and

2	This is the curriculum content floor, but not the ceiling. Final Date: October 30, 2014	

disciplines, to support documentation requirements, throughout the continuum of healthcare		responsibilities of healthcare providers • Administrative(patient registration, ADT, billing) and Clinical (lab, radiology, pharmacy)
Subdomain I.E. Secondary Data Sources		
1. Identify and use secondary data sources	3	• Data sources primary/secondary o UHDDS, HEDIS, OASIS • Specialized data collection systems • Registries
2. Validate the reliability and accuracy of secondary data sources	3	Principles and applications of secondary data sources
Domain II. Information Protection: Access, Disclosure, Archival, Privacy & Security		
Definition: Understand healthcare law (theory of all healthcare law to exclude application of law covered in Domain V); develop privacy, security, and confidentiality policies, procedures and infrastructure; educate staff on health information protection methods; risk assessment; access and disclosure management.		
Subdomain II.A. Health Law		
1. Apply healthcare legal terminology	3	• Healthcare legal terminology
2. Identify the use of legal documents	3	• Health information/record laws and regulations o Consent for treatment, retention, privacy, patient rights, advocacy, health power of attorney, advance directives, DNR
3. Apply legal concepts and principles to the practice of HIM	3	• Maintain a legally defensible health record o Subpoenas, depositions, court orders, warrants
Subdomain II.B. Data Privacy, Confidentiality &Security		

1. Apply confidentiality, privacy and security measures and policies and procedures for internal and external use and exchange to protect electronic health information	3	• Internal and external standards, regulations and initiatives
		   o State and federal privacy and security laws
		• Patient verification
		   o Medical identity theft
		• Data security concepts

3	This is the curriculum content floor, but not the ceiling.
	Final Date: October 30, 2014

		• Security processes and monitoring
2. Describe retention and destruction policies for health information	2	• Data storage and retrieval • E-Discovery • Information archival, data warehouses
3. Apply system security policies according to departmental and organizational data/information standards	3	• Security processes and policies ○ Data/information standards
Subdomain II.C. Release of Information		
1. Apply policies and procedures surrounding issues of access and disclosure of protected health information	3	• Release patient specific data to authorized users • Access and disclosure policies and procedures
Domain IV. Revenue Management		
Definition: Healthcare reimbursement; revenue cycle; chargemaster; DOES NOT INCLUDE COMPLIANCE regulations and activities related to revenue management (coding compliance initiatives, fraud and abuse, etc.) AS THESE ARE COVERED IN DOMAIN V.		
Subdomain IV.A. Revenue Cycle and Reimbursement		

1. Apply policies and procedures for the use of data required in healthcare reimbursement	3	• Payment methodologies and systems
		    ○ Capitation, PPS, RBRVS, case mix, indices, MSDRGs, healthcare insurance policies, Accountable Care Organizations
		• Utilization review/management
		    ○ Case management

2. Evaluate the revenue cycle management processes	5	• Billing processes and procedures ○ Claims, EOB, ABN, electronic data interchange, coding, chargemaster, bill reconciliation process; hospital inpatient and outpatient, physician office and other delivery settings • Utilization review/management • Case management
Domain V. Compliance		

4	This is the curriculum content floor, but not the ceiling.
	Final Date: October 30, 2014

Definition: COMPLIANCE activities and methods for all health information topics. For example, how to comply with HIPAA, Stark Laws, Fraud and Abuse, etc.; coding auditing; severity of illness; data analytics; fraud surveillance; clinical documentation improvement.		
Subdomain V.A. Regulatory		
1. Apply policies and procedures to ensure organizational compliance with regulations and standards	3	• Internal and External standards regulations and initiatives o HIPAA, ARRA, The Joint Commission, Quality Integrity Organizations, meaningful use • Risk management and patient safety
2. Adhere to the legal and regulatory requirements related to the health information management	3	• Legislative and regulatory processes o Coding quality monitoring, compliance strategies, and reporting
Subdomain V.B. Coding		
1. Analyze current regulations and established guidelines in clinical classification systems	4	• Severity of illness systems o Present on admission • UHDDS guidelines
2. Determine accuracy of computer assisted coding assignment and recommend corrective action	5	• Coding specialty systems
Subdomain V.C. Fraud Surveillance		
1. Identify potential abuse or fraudulent trends through data analysis	3	• False Claims Act • Whistle blower, STARK, Anti Kickback, unbundling, upcoding • Role of OIG, RAC o Fraud/Abuse
Subdomain V.D. Clinical Documentation Improvement		
1. Identify discrepancies between supporting documentation and coded data	3	• Clinical outcomes measures and monitoring
2. Develop appropriate physician queries to resolve data and coding discrepancies	6	• AHIMA CDI toolbox • Professional communication skills

5	This is the curriculum content floor, but not the ceiling. Final Date: October 30, 2014

		• Clinical documentation improvements ○ Physician Role, HIM Role in CDI
Supporting Body of Knowledge (Pre-requisite or Evidence of Knowledge)		
Pathophysiology and Pharmacology		
Anatomy and Physiology		
Medical Terminology		
Computer Concepts and Applications		

6	This is the curriculum content floor, but not the ceiling. Final Date: October 30, 2014

BLOOM'S TAXONOMY – REVISED FOR AHIMA CURRICULA MAPPING

Taxonomy Level	Category	Definition	Verbs
1	Remember	Recall facts, terms, basic concepts of previously learned material	Choose, Define, Find
2	Understand	Determine meaning and demonstrate clarity of facts and ideas	Collect, Depict, Describe, Explain, Illustrate, Recognize, Summarize
3	Apply	Use differing methods, techniques and information to acquire knowledge and/or solve problems	Adhere to, Apply, Demonstrate, Discover, Educate, Identify, Implement, Model, Organize, Plan, Promote, Protect, Report, Utilize, Validate
4	Analyze	Contribute to the examination of information in part or aggregate to identify motives and causes	Analyze, Benchmark, Collaborate, Examine, Facilitate, Format, Map, Perform, Take part in, Verify
5	Evaluate	Make judgments in support of established criteria and/or standards	Advocate, Appraise, Assess, Compare, Comply, Contrast, Determine, Differentiate, Engage, Ensure, Evaluate, Interpret, Leverage, Manage, Mitigate, Oversee, Recommend
6	Create	Generate new knowledge through innovation and assimilation of data and information	Build, Compile, Conduct, Construct, Create, Design, Develop, Forecast, Formulate, Govern, Integrate, Lead, Master, Propose

The layout for the levels and categories was adapted from Lorin W. Anderson and David R. Krathwohl's *A Taxonomy For Learning, Teaching, and Assessing,* Abridged edition, Allyn and Bacon, Boston, MA 2001.

7	This is the curriculum content floor, but not the ceiling.
	Final Date: October 30, 2014