2018 PCAP Coding Certificate 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 10) associated with the Student Learning Outcomes (Competencies) rather than the curriculum guidance (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

Curriculum Guidance (see far-right column below) has been developed for each academic level, and its intent is to ***describe*** competencies' scope rather than ***prescribe*** what must be included in a curriculum. The Curriculum Guidance is intended to provide educators with ***suggested*** learning topics and ideas for educators' ***consideration only***. Academic programs may use the curriculum guidance for clarification about suggested topics.

- Educators may incorporate any one or more of these suggested learning topics into their courses; the suggestions are not an all-inclusive list of what educators must include.
- In a spirit of academic freedom, it is ultimately each educator's responsibility to select whichever learning resources they prefer to incorporate into their courses, curriculum, and program. Educators are encouraged to review competency-specific learning content in CourseShare.
- There is ***no expressed nor implied guarantee*** that using a listed resource or topic meets a given HIM competency, Bloom's level, or accreditation standard.
- The Curriculum Guidance is now maintained separately from the 2018 AHIMA HIM Curricula Competencies, which provides much more flexibility in keeping the Curriculum Guidance resources and topics current. The Curriculum Guidance documents will be updated periodically.

Domain I. Data Structure, Content and Information Governance		
Competency	**Bloom's Level**	**Curriculum Guidance**
I.1. Describe health care organizations from the perspective of key stakeholders.	2	**Stakeholders of the U.S. Healthcare System** • Health care facilities (e.g., hospitals, alternate care settings) • Healthcare workforce, professionals, and professional associations • Public health organizations (e.g. federal, state, local) • Health information technology companies (e.g., Epic, Meditech) **Healthcare Delivery Forces** • External forces (e.g., accreditation agencies, federal regulatory agencies, government programs and third-party payers, mobile-health technology, professional associations, quality and reimbursement initiatives, state departments of health) • Internal forces (e.g., clinical care, health information management department, continuum of care and levels of care, medical staff organization, patient registration and billing, provider roles and responsibilities)
I.2. Apply policies, regulations, and standards to the management of information.	3	**Policy Strategies** • Federal legislation (e.g., HIPAA, HITECH, 21st Century Cures Act) • CMS regulations (e.g., Conditions for Coverage, Conditions of Participation) • State legislation (e.g., content of patient record, licensure) • Health care accreditation standards (e.g., The Joint Commission) **Organizational Strategies** • Health record access and utilization • Information systems that support healthcare environments • Management of health information (e.g., concurrent versus discharge analysis, ongoing record review)
I.3. Identify policies and strategies to achieve data integrity.	3	**Data Integrity Policies and Strategies** • Data validity (e.g., accuracy and consistency in databases and data warehouses) • Data reliability (e.g., complete, error free) • Data quality (e.g., serves intended use in operations, decision making and planning; data cleansing process; forms/screen control and design)

		Types of Health Care Information and Data
		• Administrative and clinical
		• Clinical trials
		• Registers and registries
		• Secondary data sources
		  ○ Indexes and registers (e.g., master patient index)
		  ○ Registries (e.g., cancer registry, trauma registry)
		  ○ Financial transaction records (e.g., CMS-1500, UB-04)
		  ○ Admission/discharge/transfer system
		  ○ Birth and death certificates
		  ○ Patient case abstract
		  ○ Computer-generated aggregate patient reports (e.g., disease-specific, top ten diagnosis-related groups)

I.4. Determine compliance of health record content within the health organization.	5	**Health Record Content**
		• Accreditation standards (e.g., The Joint Commission)
		• Federal and state regulations about health record content (e.g., Medicare Conditions of Participation, state department of health)
		• Medical staff bylaws and rules/regulations
		• Health information management department policies and procedures
		  ○ Quantitative analysis (e.g., authentication, completeness)
		  ○ Qualitative analysis (e.g., incomplete and missing documentation)
		Continuum of Care–Impact on Health Record Content
		• Primary care (e.g., acute care, preventive care, chronic care)
		• Secondary care (e.g., medical specialists)
		• Tertiary care (e.g., specialized hospitals, including level I through IV trauma centers)
		• Quaternary care (e.g., experimental medicine)
		• Mechanisms (e.g., care coordination, integrated information systems)

I.5. Explain the use of classification systems, clinical vocabularies, and nomenclatures.	2	**Classification Systems** • Diseases (e.g., DSM-5, ICD-10-CM, ICD-O-3, ICD-11) • Procedures and services (e.g., CDT, CPT, HCPCS level II, ICD-10-PCS, NDC) • General equivalence mappings **Clinical Vocabularies** • Clinical phrases or words along with their meanings (e.g., “myocardial infarction” is the sudden deprivation of blood flow to heart muscle due to coronary artery blockage resulting in

		tissue damage or necrosis, and it is commonly called a "heart attack") • Designations, expressions, symbols, and terms used in the field of medicine (e.g., PERRL) **Medical Nomenclatures** • Standard Nomenclature of Medicine–Clinical Terminology (SNOMED CT) • Veterinary Extension of SNOMED CT (VetSCT)
Domain II. Information Protection: Access, Use, Disclosure, Privacy, and Security		
Competency	**Bloom's Level**	**Curriculum Guidance**
II.1. Apply privacy strategies to health information.	3	**Privacy Strategies** • HIPAA privacy rule (e.g., implementation, notice of privacy practices, an accounting of protected health information disclosure [PHI], patient access to PHI, preemption analysis [e.g., stricture state regulations], PHI received from external providers) • Impact of privacy on protected health information (PHI) access and release, health information exchange, internal/external auditing/controls, data generated via telehealth/mobile-health/wearable medical devices • Mandatory reporting (e.g., state reportable diseases and events) • Policies for employee use of social media • Impact of privacy on covered entities and business associates
II.2. Apply security strategies to health information.	3	**Security Strategies** • HIPAA security rule (e.g., implementation, safeguards, security audits, training) • Impact of social media on health information security
II.3. Identify compliance requirements throughout the health information life cycle.	3	**Health Information Life Cycle** • Health information collection and storage • Retention and destruction (e.g., federal/state retention schedules, paper-based/electronic destruction methods) • Health record archive methods (e.g., environmental controls, identification system for digital or paper-based)

Domain III. Informatics, Analytics, and Data Use		
Competency	**Bloom's Level**	**Curriculum Guidance**
III.6. Describe the concepts of managing data.	3	**Managing Data** • Processes and strategies (e.g., data acquisition, processing, protection, storage, validation)
Domain IV. Revenue Cycle Management		
Competency	**Bloom's Level**	**Curriculum Guidance**
IV.1. Determine diagnosis and procedure codes and groupings according to official guidelines.	5	**Diagnosis and Procedure Coding** • Disease code assignment (e.g., ICD-10-CM, *ICD-10-CM Official Guidelines for Coding and Reporting*, *Coding Clinic® for ICD-10-CM and ICD-10-PCS*) • Hospital inpatient procedure code assignment (e.g., ICD-10-PCS, *ICD-10-PCS Official Guidelines for Coding and Reporting*) • Outpatient procedure/service code assignment (e.g., CPT, *National Correct Coding Initiative Policy Manual for Medicare Services*, *CPT® Assistant*, HCPCS Level II, *Coding Clinic® for HCPCS*) • Patient records (e.g., ambulatory surgery, emergency department, hospital inpatient, physician office) • DRGs, MS-DRGs, and APCs grouping • Present on admission (POA) status • Physician queries • Coding quality (e.g., coding audits) **Official Coding Guidelines and References** • *ICD-10-CM Official Guidelines for Coding and Reporting*, • *ICD-10-PCS Official Guidelines for Coding and Reporting* • *National Correct Coding Initiative Policy Manual for Medicare Services* • *CPT® Assistant* • *Coding Clinic® for HCPCS* • *Coding Clinic® for ICD-10-CM and ICD-10-PCS*
IV.2. Evaluate revenue cycle processes.	5	**Evaluation of Revenue Cycle Processes** • Accuracy of chargemaster and encounter forms (e.g., chargemaster and encounter form audits) • Claims denials (appeals letters, adherence to official coding guidelines, provision of supporting documentation) • Case mix management (e.g., case mix index calculation [formula], impact of case mix index on reimbursement)

		• Discharged, not final billed (DNFB) accounts (e.g., impact of appeals process and DNFB on facility reimbursement) • Managing the MPI cleanup process (e.g., impact of duplicate patient numbers on duplicate charges as generated for multiple accounts) • Revenue cycle audits (e.g., fraud and abuse detection, control of financial resources) • Revenue reports (e.g., back-end reporting for monitoring key performance indicators (KPIs), late-charge report, carve-out report, credit-balance report) • Internal controls for revenue cycle management (e.g., preventative controls, detective controls, corrective controls)
IV.3. Evaluate compliance with regulatory requirements and reimbursement methodologies.	5	**Evaluation of Compliance with Regulatory Requirements** • Official coding guidelines and coding guidance (e.g., accurate code assignment, fraud and abuse detection) • National coverage determinations (NCDs) (e.g., NCD and documentation comparison, fraud and abuse detection) • Performance measurements (e.g., Hospital value-based purchasing outcome measures) **Evaluation of Compliance with Reimbursement Methodologies** • Computer-assisted coding (e.g., documentation supports codes selected and reimbursement received) • DRGs, MS-DRGs, and APCs (e.g., accurate MS-DRG assignment) • Medical necessity (e.g., documentation supports medical necessity) • Present on admission (POA) status and hospital acquired conditions (HACs) (e.g., impact of POA status on HACs) • Severity of illness, intensity of resources (e.g., lengths of stay and costs audit)
Domain V. Health Law & Compliance		
Competency	**Bloom's Level**	**Curriculum Guidance**
V.1. Apply legal processes impacting health information.	3	**Legal Processes Impacting Health Information** • Legal health record, designated record set, custodian of health record, health record access and release of information, authentication of the legal health record, litigation hold procedures • Health record certification as part of the legal process

		• Information not disclosed during the discovery process (e.g., committee minutes, incident reports) • Admissibility of health records per Federal Rules of Evidence and Uniform Rules of Evidence • Electronic health records (e.g., copy/paste of previous encounter documentation into new encounter, format for release of information such as paper, DVD) • United States legal system • United States court systems and legal procedures • Health information judicial process • Principles of liability • Confidentiality and informed consent
V.2. Demonstrate compliance with external forces.	3	**External Forces** • Federal and state legislation • Court order, *subpoena*, *subpoena duces tecum*, search warrant

V.3. Identify the components of risk management related to health information management.	3	**Risk Management Components**
		• Risk management, role of risk manager
		• Licensure, malpractice, general liability, physician privileges, National Practitioner Data Bank
		• Problem analysis methods (e.g., cause and effect analysis, risk identification and assessment, root cause analysis)
		  ○ Cybersecurity (e.g., CERT)
		  ○ Disaster planning and recovery
		  ○ Patient safety, safety culture
		  ○ Patient satisfaction
		  ○ Privacy and security breaches
		  ○ Sentinel events, potentially compensable events, incidents, occurrences (and reporting)

V.4. Identify the impact of policy on health care.	3	**Impact of Policy on Health Care** • Governmental policy-making process • Public health initiatives (e.g., Affordable Care Act, accountable care organizations, patient-centered home) • Effects of population health initiatives on health information exchange • Effects of state and federal pay-for-performance initiatives on quality and content of health record documentation

Domain VI. Organizational Management & Leadership		
Competency	**Bloom's Level**	**Curriculum Guidance**
VI.1. Demonstrate fundamental leadership skills.	3	**Leadership Skills** • Professional relationships, ethics and integrity, drive and purpose, business skills and knowledge • Facilitation, motivation, teamwork, team development, leadership stature, leadership process and styles • Organizational culture, mission, vision, standards of behavior • Problem solving and decision making, interpersonal skills, critical thinking skills, diversity and difference values, conflict management • Effective written and oral communication • Team leadership (e.g., team roles, positions, functions) **Best Practices for Business Operations** • Employee satisfaction standards • Policies and procedures • Interdisciplinary and professional teams **Meetings** • Committee composition and function • Consensus building, communication, critical thinking, and interpersonal skills • Agendas and minutes, formal *versus* informal protocols (e.g., *Robert's Rules of Order*) • Conflict resolution and civil discourse • Virtual meetings
Supporting Body of Knowledge (Prerequisite or Evidence of Knowledge)		
Pathophysiology and Pharmacology		
Anatomy and Physiology		
Medical Terminology		
Computer Concepts and Applications		

AHIMA-Revised Bloom's Taxonomy

Taxonomy Level	Category	Definition	Verbs
1	Remember	Exhibit memory of previously learned material by recalling facts, terms, basic concepts, and answers.	Choose, Define, Find
2	Understand	Demonstrate understanding of facts and ideas by organizing, comparing, translating, interpreting, giving descriptions, and stating main ideas.	Collect, Depict, Describe, Explain, Illustrate, Recognize, Summarize
3	Apply	Solve problems to new situations by applying acquired knowledge, facts, techniques and rules in a different way.	Adhere to, Apply, Articulate, Calculate, Demonstrate, Discover, Educate, Identify, Implement, Interview, Model, Organize, Plan, Promote, Protect, Report, Utilize, Validate
4	Analyze	Examine and break information into parts by identifying motives or causes. Make inferences and find evidence to support generalizations.	Analyze, Benchmark, Collaborate, Examine, Facilitate, Format, Map, Perform, Take part in, Verify
5	Evaluate	Present and defend opinions by making judgments about information, validity of ideas, or quality of work based on a set of criteria.	Advocate, Appraise, Assess, Compare, Comply, Contrast, Determine, Differentiate, Engage, Ensure, Evaluate, Interpret, Justify, Leverage, Manage, Mitigate, Oversee, Recommend, Solve
6	Create	Compile information together in a different way by combining elements in a new pattern or proposing alternative solutions.	Build, Compile, Conduct, Construct, Create, Design, Develop, Forecast, Formulate, Govern, Integrate, Lead, Master, Present, Propose

Adapted from *Teacher Created Resources Quick Flip Questions for the Revised Bloom's Taxonomy*. (2017). Madison, WI: Edupress.