## 2011 AHIMA Curriculum Competencies and Knowledge Clusters – Health Information Management Associate Degree

HIM Associate Degree Entry-Level Competencies (Student Learning Outcomes)	Knowledge Clusters (Curricular Components)	Notes
<ol> <li>Domain: Health Data Management</li> <li>Subdomain: Health Data Structure, Content, and Standards</li> <li>Collect and maintain health data (such as data elements, data sets, and databases).</li> <li>Conduct analysis to ensure that documentation in the health record supports the diagnosis and reflects the patient's progress, clinical findings, and discharge status.</li> <li>Apply policies and procedures to ensure the accuracy of health data.</li> <li>Verify timeliness, completeness, accuracy, and appropriateness of data and data sources for patient care, management, billing reports, registries, and/or databases.</li> </ol>	<ul> <li>Health Data Structure, Content, and Standards</li> <li>Data versus information (Analyzing, 4)</li> <li>Health information media (such as paper, computer, web-based) (Analyzing, 4)</li> <li>Structure and use of health information (individual, comparative, aggregate) (Analyzing, 4)</li> <li>Health record data collection tools (forms, screens, etc.) (Analyzing, 4)</li> <li>Data sources (primary/secondary) (Analyzing, 4)</li> <li>Data storage and retrieval (Analyzing, 4)</li> <li>Healthcare data sets (such as OASIS, HEDIS, DEEDS, UHDDS) (Understanding, 2)</li> </ul>	
I.B. Subdomain: Healthcare Information Requirements and Standards	Healthcare Information Requirements and Standards	

## Approved by AHIMA Education Strategy Committee

<ol> <li>Monitor and apply organization-wide health record documentation guidelines.</li> <li>Apply policies and procedures to ensure organizational compliance with regulations and standards.</li> <li>Maintain the accuracy and completeness of the patient record as defined by organizational policy and external regulations and standards.</li> <li>Assist in preparing the organization for accreditation, licensing, and/or certification surveys.</li> </ol>	<ul> <li>Type and content of health record (paper, electronic, computer- based, e-health-personal, web- based) (Evaluating, 5)</li> <li>Health record documentation requirements (such as accreditation, certification, licensure) (Evaluating, 5)</li> <li>Data quality and integrity (Analyzing, 4)</li> </ul>	
<ol> <li>I.C. Subdomain: Clinical Classification Systems</li> <li>Use and maintain electronic applications and work processes to support clinical classification and coding.</li> <li>Apply diagnosis/procedure codes according to current nomenclature.</li> <li>Ensure accuracy of diagnostic/procedural groupings such as DRG, MSDRG, APC, and so on.</li> <li>Adhere to current regulations and established guidelines in code assignment.</li> <li>Validate coding accuracy using clinical information found in the health record.</li> <li>Use and maintain applications and processes to support other clinical classification and nomenclature systems (ex. DSM IV, SNOMED-CT).</li> <li>Resolve discrepancies between coded data and supporting documentation.</li> </ol>	<ul> <li>Clinical Classification Systems</li> <li>Classifications, taxonomies, nomenclatures, terminologies, and clinical vocabularies such as SNOMED-CT (Analyzing, 4)</li> <li>Principles and applications of coding systems (such as ICD, CPT, DSM) (Evaluating, 5)</li> <li>Diagnostic and procedural groupings (such as DRG, APC, RUGs) (Evaluating, 5)</li> <li>Case mix analysis and indexes (Analyzing, 4)</li> <li>Severity of illness systems (Analyzing, 4)</li> <li>Coding compliance strategies, auditing, and reporting (such as CCI, plans) (Evaluating, 5)</li> <li>Coding quality monitors and reporting (Evaluating, 5)</li> </ul>	

<ul> <li>I.D. Subdomain: Reimbursement Methodologies</li> <li>1. Apply policies and procedures for the use of clinical data required in reimbursement and prospective payment systems (PPS) in healthcare delivery.</li> <li>2. Apply policies and procedures to comply with the changing regulations among various payment systems for healthcare services such as Medicare, Medicaid, managed care, and so forth. (NEW)</li> <li>3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.</li> <li>4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding Initiative.</li> <li>5. Compile patient data and perform data quality reviews to validate code assignment and compliance with reporting requirements, such as outpatient prospective payment systems.</li> <li>6. Ensure accuracy of diagnostic/procedural groupings such as DRG, APC, and so on. (NEW)</li> </ul>	<ul> <li>Reimbursement Methodologies</li> <li>Commercial, managed care and federal insurance plans (Analyzing, 4)</li> <li>Compliance strategies and reporting (Applying, 3)</li> <li>Payment methodologies and systems (such as capitation, prospective payment systems, RBRVS) (Analyzing, 4)</li> <li>Billing processes and procedures (such as claims, EOB, ABN, electronic data interchange) (Analyzing, 4)</li> <li>Chargemaster maintenance (Evaluating, 5)</li> <li>Regulatory guidelines (NCDs and QIOs) (3)</li> <li>Reimbursement monitoring and reporting (Evaluating, 5)</li> </ul>	
<ul> <li>II. Domain: Health Statistics, Biomedical Research, and Quality Management</li> <li>II.A. Subdomain: Healthcare Statistics and Research</li> <li>1. Collect, maintain, and report data for clinical indices/databases/registries to meet specific organization needs such as medical research and disease registries.</li> </ul>	<ul> <li>Healthcare Statistics and Research</li> <li>Indices, databases, and registries (Analyzing, 4)</li> <li>Vital statistics (Evaluating, 5)</li> <li>Healthcare statistics (Evaluating, 5)</li> <li>Descriptive statistics (such as means, frequencies, ranges,</li> </ul>	

<ol> <li>Collect, organize, and present data for quality management, utilization management, risk management, and other related studies.</li> <li>Comprehend basic descriptive, institutional, and healthcare vital statistics.</li> </ol>	<ul> <li>percentiles, standard deviations) (Understanding, 2)</li> <li>Statistical applications with health care data (Applying, 3)</li> <li>Data selection, interpretation, and presentation (Evaluating, 5)</li> <li>Knowledge-based research techniques (such as library, MEDLINE, web-based)(Evaluating, 5)</li> </ul>	
<ul> <li>II. Domain: Health Statistics, Biomedical Research, and Quality Management</li> <li>II.B. Subdomain: Quality Management and Performance Improvement</li> <li>1. Abstract and report data for facility-wide quality management and performance improvement programs.</li> <li>2. Analyze clinical data to identify trends that demonstrate quality, safety, and effectiveness of healthcare.</li> </ul>	<ul> <li>Quality Management and Performance Improvement</li> <li>Quality assessment and improvement (such as process, collection tools, data analysis, reporting techniques) (Applying, 3)</li> <li>Utilization management, risk management, and case management (Understanding, 2)</li> <li>Regulatory quality monitoring requirements (Applying, 3)</li> <li>Outcomes measures and monitoring (Applying, 3)</li> </ul>	
III. Domain: Health Services Organization and Delivery	Healthcare Delivery Systems	

<ul> <li>III.A. Subdomain: Healthcare Delivery Systems</li> <li>1. Apply current laws, accreditation, licensure, and certification standards related to health information initiatives from the national, state, local, and facility levels.</li> <li>2. Differentiate the roles of various providers and disciplines throughout the continuum of healthcare and respond to their information needs.</li> </ul>	<ul> <li>Organization of healthcare delivery in the United States (Analyzing, 4)</li> <li>Healthcare organizations structure and operation (Analyzing, 4)</li> <li>External standards, regulations, and initiatives (such as licensure, certification, accreditation, HIPAA, ARRA) (Analyzing, 4)</li> <li>Healthcare providers and disciplines (Analyzing,4)</li> </ul>	
<ol> <li>III.B. Subdomain: Healthcare Privacy, Confidentiality, Legal, and Ethical Issues</li> <li>Adhere to the legal and regulatory requirements related to the health information infrastructure.</li> <li>Apply policies and procedures for access and disclosure of personal health information.</li> <li>Release patient-specific data to authorized users.</li> <li>Maintain user access logs/systems to track access to and disclosure of identifiable patient data.</li> <li>Apply and promote ethical standards of practice.</li> </ol>	<ul> <li>Healthcare Privacy,</li> <li>Confidentiality, Legal, and Ethical Issues</li> <li>Legislative and regulatory processes (Applying, 3)</li> <li>Legal terminology (Applying, 3)</li> <li>Health information/record laws and regulations (such as retention, patient rights/advocacy, advanced directives, privacy) (Evaluating, 5)</li> <li>Confidentiality, privacy, and security policies, procedures, and monitoring (Evaluating, 5)</li> <li>Release of information policies and procedures (Evaluating, 5)</li> <li>Professional and practice-related ethical issues (Evaluating, 5)</li> </ul>	

IV.	<b>Domain:</b>	Information	Technology &	& Systems
-----	----------------	-------------	--------------	-----------

IV.A. Subdomain: Information and Communication Technologies

1. Use technology, including hardware and software, to
ensure data collection, storage, analysis, and reporting of
information.

2. Use common software applications such as spreadsheets, databases, word processing, graphics, presentation, e-mail, and so on in the execution of work processes.

3. Use specialized software in the completion of HIM processes such as record tracking, release of information, coding, grouping, registries, billing, quality improvement, and imaging.

4. Apply policies and procedures to the use of networks, including intranet and Internet applications, to facilitate the electronic health record (EHR), personal health record (PHR), public health, and other administrative applications.

5. Participate in the planning, design, selection, implementation, integration, testing, evaluation, and support for EHRs. (NEW)

## Information Technology & Systems

- Computer concepts (hardware components, systems architectures, operating systems and languages, and software packages and tools) (Applying, 3)
- Communication and internet technologies (such as networks, intranet, standards) (Applying, 3)
- Common software applications (such as word processing, spreadsheet, database, graphics) (Applying, 3)
- Health information systems (such as administrative, patient registration, ADT, EHR, PHR, lab, radiology, pharmacy) (Analyzing, 4)
- Voice recognition technology (Applying, 3)
- Health information specialty systems (such as ROI, coding, registries) (Evaluating, 5)
- Application of systems and policies to health information systems and functions and health care data requests (Evaluating, 5)
- System acquisition and evaluation (Applying, 3)

IV.B. Subdomain: Data, Information, and File Structures

<ol> <li>Apply knowledge of database architecture and design (such as data dictionary) to meet departmental needs.</li> <li>IV.C. Subdomain: Data Storage and Retrieval         <ol> <li>Use appropriate electronic or imaging technology for data/record storage.</li> <li>Query and generate reports to facilitate information retrieval using appropriate software.</li> <li>Apply retention and destruction policies for health information. (<u>NEW</u>)</li> </ol> </li> </ol>	<ul> <li>Date Storage and Retrieval</li> <li>Document archival, retrieval, and imaging systems (Analyzing, 4)</li> <li>Maintenance and monitoring of data storage systems (Analyzing, 4)</li> </ul>	
<ol> <li>IV.D. Subdomain: Data Security</li> <li>Apply confidentiality and security measures to protect electronic health information.</li> <li>Protect data integrity and validity using software or hardware technology.</li> <li>Apply departmental and organizational data and information system security policies.</li> <li>Use and summarize data compiled from audit trails and data quality monitoring programs.</li> </ol>	<ul> <li>Data Security and Healthcare Information Systems</li> <li>System architecture and design (Applying, 3)</li> <li>Screen design (Analyzing, 4)</li> <li>Data retrieval and maintenance (Analyzing, 4)</li> <li>Data security concepts (Applying, 3)</li> <li>Data integrity concepts (Analyzing, 4)</li> <li>Data integrity and security processes and monitoring (Applying, 3)</li> </ul>	
V. Domain: Organizational Resources V.A. Subdomain: Human Resources	<ul> <li>Organizational Resources</li> <li>Roles and functions of teams and committees (Evaluating, 5)</li> </ul>	

<ol> <li>Apply the fundamentals of team leadership.</li> <li>Participate in and work in teams and committees.</li> <li>Conduct orientation and training programs.</li> <li>Monitor and report staffing levels and productivity standards for health information functions.</li> <li>Use tools and techniques to monitor, report, and improve processes.</li> <li>Comply with local, state, and federal labor regulations.</li> <li>(NEW)</li> </ol>	<ul> <li>Teams/consensus building and committees (Analyzing, 4)</li> <li>Communication and interpersonal skills (Evaluating, 5)</li> <li>Team leadership concepts and techniques (Analyzing, 4)</li> <li>Orientation and training (such as content, delivery, media) (Evaluating, 5)</li> <li>Workflow and process monitors (Analyzing, 4)</li> </ul>	
<ul> <li>V.B. Subdomain: Financial and Resource Management</li> <li>1. Make recommendations for items to include in budgets and contracts.</li> <li>2. Monitor and order supplies needed for work processes.</li> <li>3. Monitor coding and revenue cycle processes.</li> <li>4. Recommend cost-saving and efficient means of achieving work processes and goals.</li> <li>5. Contribute to work plans, policies, procedures, and resource requisitions in relation to job functions.</li> </ul>	<ul> <li>Financial and Resource Management</li> <li>Revenue cycle monitors (Analyzing, 4)</li> <li>Organizational plans and budgets (framework, levels, responsibilities, etc.) (Analyzing, 4)</li> <li>Resource allocation monitors (Analyzing, 4)</li> </ul>	

BIOMEDICAL SCIENCES	
Anatomy (Analyzing, 4)	
Physiology (Analyzing, 4)	
Medical Terminology (Analyzing, 4)	
Pathophysiology (Analyzing, 4)	
Pharmacotherapy (Analyzing, 4)	

## Bloom's Taxonomy: Revised Version

1 = Remembering: Can the student recall or remember the information?

- 2 = Understanding: Can the student explain ideas or concepts, and grasp the meaning of information?
- 3 = Applying: Can the student use the information in a new way?

4 = Analyzing: Can the student distinguish between the different parts, break down information, and infer to support conclusions?

5 = Evaluating: Can the student justify a stand or decision, or judge the value of?