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July 21, 2014

Standard Occupational Classification Policy Committee Chair  
U.S. Bureau of Labor Statistics, Suite 2135  
2 Massachusetts Avenue NE  
Washington, DC 20212

Submitted via email to: [soc@bls.gov](mailto:soc@bls.gov) (subject line 2018 SOC)

To the Standard Occupational Classification Policy Committee Chair:

On behalf of the American Health Information Management Association ([AHIMA](#)), we appreciate the opportunity to provide a response with our recommendations on the proposed revision to the 2010 Standard Occupational Classification (SOC) Principles. We understand that the intent is the retention of the 2010 SOC Coding guidelines; retention of the 2010 SOC Major Group Structure; the correction, change, or combination of selected SOC detailed occupations; and inclusion of new detailed occupations. Further, we understand that this review and possible revision of the 2010 SOC is intended to be completed by the end of 2016 and then released to begin use in reference year 2018.

AHIMA is a non-profit professional association representing more than 71,000 health information management (HIM) professionals (including health information technicians, health information administrators, and health informatics practitioners) who work throughout the healthcare industry. AHIMA is recognized as the leading source of "HIM knowledge," a respected authority for rigorous professional education and training. AHIMA plays a leadership role in the effective management of health data and electronic health records needed to deliver quality healthcare to the public.

AHIMA provides academic visioning by establishing the curricula competencies for HIM programs at the associate, baccalaureate, and graduate education levels. These curricular competencies are used as the foundation for program accreditation of over 300 college and university HIM programs by the Commission on Accreditation for Health Informatics and Information Management Education ([CAHIIM](#)). Industry-recognized certifications for HIM occupations are developed and maintained by AHIMA's Commission on Certification for Health Informatics and Information Management ([CCHIIM](#)).

The healthcare workforce and labor market is undergoing a significant transformation as a result of the adoption and use of health information technology (IT) including electronic health records (EHRs). New occupations and jobs have emerged, and existing occupations such as the [health information technician](#) and [health information manager](#) have changed since the last modification to the SOC system in 2010. The Health Information Technology for Economic and Clinical Health (HITECH) Act and Title VIII of the American Recovery and Reinvestment Act of 2009 (ARRA) made over \$20 billion<sup>i</sup> in health IT incentive payments available starting in 2010 to assist healthcare providers in improve the quality, safety, and coordination of care while achieving efficiency gains to help control costs through the adoption and meaningful use of EHRs.<sup>ii</sup> The impact of the incentive program is validated through the significant increase in EHR adoption rates. ONC reported that EHR incentives increased adoption of a basic EHR<sup>iii</sup> by office-based providers and hospitals by approximately 15 percent during the first year of the program (2010-2011). By 2012, 56 percent of hospitals and 42 percent of physicians had implemented basic EHRs.<sup>iv</sup> Today, 94 percent of hospitals<sup>v</sup> have adopted EHRs, as have 78 percent of physicians.<sup>vi</sup>

The deployment of health IT and use of EHRs by the majority of healthcare has created new demands for a high-skilled, trained workforce including in HIM occupations. This is supported by a 2013 workforce report by the HHS Office of the National Coordinator for Health Information Technology (ONC). The report noted that the most common positions for which employers are recruiting in the health IT space include those related to information management (HIM), clinical informatics, and information technology support (e.g., equipment, development/programming, and software support).<sup>vii</sup> To address this demand and meet the need for a skilled workforce \$118 million in HITECH funding was allocated for workforce development specifically launching or expanding programs in community colleges and universities, production of curricular materials, and development of competency certifications. Part of the motivation for including workforce development in HITECH was research showing a need for over 40,000 informatics and technology professionals as the U.S. rapidly increased its use of IT in healthcare.<sup>viii</sup>

The ONC workforce development programs support important changes seen in the HIM workforce/occupations since the last SOC revision in 2010. As jobs requiring the use and/or management of technology have emerged in HIM, employers are seeking workers with training and/or a college degree and competency-based certifications. This particularly impacts the [Medical Records and Health Information Technician](#) SOC in which entry-level education had been identified as postsecondary non-degree award in 2010, but has since moved to a minimum of an associate-level degree.

AHIMA continuously studies the HIM and health informatics workforce. In 2012, the [Health Information Career Map](#) (Career Map) was launched providing an interactive and visual representation of the job titles and roles that make up the scope of HIM occupations and the career pathways associated with them. The Career Map was developed using a research-based methodology including data analysis, survey, interviews and validation. The recommendations in this proposal are supported by researched data from the Career Map. In preparation for AHIMA's response, an analysis of job roles on the Health Information Career Map and full or partial matches in the SOC and Direct Match Title File was conducted. **As a result of our research, AHIMA is requesting the following modifications to the SOC:**

1. Update to the Medical Record & Health Information Technician SOC 29-2071
  - **Recommendation:** SOC 29-2071 should be renamed to "Health Information Technician"
  - **Recommendation:** Update the work performed for the Health Information Technician occupation SOC related Occupational Outlook Handbook and O\*NET Online database to reflect the current technology-enabled environment and remove reference to clerical and administrative knowledge and work performed.
  - **Recommendation:** In recognition of the workforce changes and current need by employers for technology-skilled and specially-trained health information technicians, update the SOC to reflect entry-level education of associate's degree and certifications, remove clerical/administrative jobs from SOC 29-2071, and update salary information to reflect the current labor market.
2. Consider new job titles to be added in the SOC and Direct Match Title File
  - **Recommendation:** Add the following job titles to the Direct Match Title File for the related SOC including: Clinical Documentation Improvement Specialist to 29-2071 Health Information Technician; Privacy Officer to 13-1041 Compliance Officer; Health Information Clerk to 43-4199 Information and Record Clerk.
3. Support for new [SOC proposal for a Health Informatics Practitioner](#)

- **Recommendation:** Add a new detailed SOC for a Health Informatics Practitioner to address a gap in the SOC system.
4. Support for new Management SOC proposal for a Health Information Technology, Health Informatics, and Health Information Management
- **Recommendation:** Add a new minor class in the management group for 11-4000 for Health IT, Informatics, and Information Management occupations.

## 1. Update to the Medical Record & Health Information Technician SOC 29-2071

AHIMA's workforce studies and research confirms the BLS Occupational Outlook Handbook's summary of the [Job Outlook/Job Prospect Prospects](#) for Medical Record and Health Information Technicians. It accurately reflects the changes occurring in this occupation today. The demand for the workers in this occupation continues to rise as well as the employer's expectation for education, certifications and expertise using health information technologies and EHRs. Specifically, AHIMA requests the following revisions to the 29-2071 SOC:

### 1.A. Modify the title of the SOC removing the term "Medical Records"

The term "Medical Records" is antiquated and is associated with the maintenance of paper-based medical records. In today's healthcare ecosystems, the terms health information, protected health information, electronic medical records, electronic health records, personal health information, personal health records, and health information exchange reflect the current job environment. A search of online jobs shows limited use of the term medical records for occupations and jobs and instead reflects the current environment "Health Information."

**Recommendation:** SOC 29-2071 should be renamed to "Health Information Technician"

### 1.B. Update the Work Performed by Medical Record and Health Information Technicians

AHIMA suggests the following edits to 29-2071 SOC as described in the 2010 Occupational Outlook Handbook to reflect the current technology-enabled workforce environment in which Health Information Technicians work. (*Note: The text is from the Occupational Outlook Handbook and suggested modifications in underlined text*)

Health information technicians organize and manage health information data using various applications and databases. They ensure its quality, accuracy, accessibility, and security in both paper and electronic systems. They use various classification systems to code, categorize and report patient information for insurance reimbursement purposes, for databases and registries, and to maintain patients' medical and treatment histories.

- Apply healthcare requirements, clinical, and disease process knowledge to review health information for timeliness, completeness, accuracy, appropriateness, and compliance of healthcare data and patient health records
- Interact and/or educate other healthcare practitioners (including medical and nursing staff) to maintain complete and accurate health information and records
- Organize, maintain and disclose content considered part of the patient's electronic health record in accordance with healthcare requirements, professional practice standards, and a plethora of state and federal regulations
- Organize, maintain and report data for clinical databases and registries.
- Track patient outcomes for quality assessment

- Use classification software to assign clinical codes for reimbursement and data analysis
- Use software tools to electronically record data for collection, storage, analysis, retrieval, and reporting
- Apply principles of information governance to health data and records
- Ensure confidentiality and security of patient information and protect patients' health information from unauthorized access and use,

**Rationale:** The implementation of technology by the majority of healthcare providers has not only changed the work performed, but also the knowledge and skills required. As with other occupations that transition from paper-based to technology enabled, the occupation no longer requires knowledge of clerical functions or/and performs administrative activities associated manual with processes. The following is referenced on [O\\*NET](#)<sup>ix</sup> and is no longer an accurate reflection of the occupation and should be removed.

***Remove the following text:***

- Knowledge: Clerical -- Knowledge of administrative and clerical procedures and systems such as word processing, managing files and records, stenography and transcription, designing forms, and other office procedures and terminology.
- Work Performed: Administrative Activities — Performing day-to-day administrative tasks such as maintaining information files and processing paperwork.

**Recommendation:** Update the work performed for the Health Information Technician occupation SOC and related Occupational Outlook Handbook and O\*NET to reflect the current technology-enabled environment and remove reference to clerical and administrative knowledge and work performed.

***1.C. Update the Education and Salary Level for Medical Record and Health Information Technicians***

Currently the education level for the 2010 SOC 29-2071 is identified as a post-secondary certificate to enter the occupation with a statement that some may have an associate's degree and many employers also require professional certification.<sup>x</sup>

The Occupational Outlook Handbook indicates that most employers prefer to hire health information technicians who have graduated from an accredited program and/or have professional certification(s). The significant increase in adoption and use of health information technology and EHR systems has changed how health information technicians perform their work and the skills needed to competently meet employers' needs. As a result employers are seeking workers with a baseline associate's degree education level to acquire skills and training such as on the use of EHR systems and other specialized software (e.g., computer assisted coding applications, specialized reporting applications), EHR security and privacy practices, analysis of electronic data, and disclosure of electronic health information. This is consistent with the workforce development programs funded by ONC to launch or expand programs in community colleges and universities including those for health information technicians.

The salary levels for the health information technician for SOC 29-2071 are not reflective of the current work environment based on the skills needed to perform the job in today's market. As employers require a higher technology-skilled worker, the SOC must reflect the current salary scale (see Table 1 Comparison on Health Information Technician Median Pay):

- Federal and state agencies with employment structures aligned with the SOC system, struggle to recruit, retain, and compensate health information technicians competitively (including medical coders and registrars described in Figure 1) because of the lack of an appropriate and accurate SOC, education and salary data.
- Labor and workforce data (including education and salary) is not accurate for specialized health information technician jobs such as for medical coders and registrars that require specialized training, certifications, and have competitive employment markets.
- The Medical Records and Health Information Technician SOC may include clerical/administrative positions that should be categorized elsewhere and has resulted in the education and pay scales being out of line with the current work environment. For example, the related O\*NET system lists medical record clerks and health information clerks as positions that fall under the Health Information Technician code. The work performed, education and salary by these roles are more consistent with the Information Clerk Occupation where entry level education is a high school diploma and median pay in 2012 was \$30,650.

**Figure 1: Health Information Technician Jobs from current Occupational Outlook Handbook (with suggested edits underlined):**

**Medical coders** typically do the following:

- Review patient electronic health record to identify relevant diagnoses and procedures, translating diagnostic phrases utilized by healthcare providers into coded form
- Apply knowledge of payer rules, related clinical practice, coding and documentation requirements to assign proper code
- Work as a liaison between the health clinician and billing offices

**Cancer registrars** typically do the following:

- Review patient records and pathology reports for completeness and accuracy
- Assign classification codes to represent the diagnosis and treatment of cancers and benign tumors
- Conduct annual follow-ups to track treatment, survival, and recovery
- Analyze and compile cancer patient information for research purposes
- Maintain facility, regional, and national databases of cancer patients.

Table 1: Comparison on Health Information Technician Median Pay

Detailed Jobs in SOC 29-2071:	Median Pay Occupational Outlook Handbook 2012	AHIMA's HI Career Map Median Pay 2011	AHIMA's Salary Survey Median Pay 2012
Health Information Technician	\$34,160	\$38,000	\$48,000
Medical Coder	\$34,160	\$42,328	\$50,153
Registrar	\$34,160	\$42,000	N/A

**Recommendation:** In recognition of the workforce changes and current need by employers for technology-skilled and specially-trained health information technicians, update the SOC to reflect an entry-level education of associate's degree and certifications, remove clerical/administrative work performed/jobs from SOC 29-2071, and update salary information to reflect the current labor market.

## 2. Consider new job titles to be added in the SOC and Direct Match Title File

After completion of an analysis of the Career Map<sup>xi</sup> and comparison of the jobs to the SOC and Direct Match Title File, AHIMA recommends the following for inclusion in the Direct Match Title File:

**Clinical Documentation Improvement (CDI) Specialist:**

The CDI specialist combines the traditional role of the coder with new role responsibilities such as the staff liaison for the clinical treatment team in documenting clinical care. CDI specialists are responsible for conducting reviews of the patient's electronic health record and serves as a liaison to the clinical staff. The primary job responsibility is to ensure that the documentation in the EHR is complete and accurate and provides a clear picture of the patient's clinical record and treatment before it is sent to the coder. In other words, the CDI is tasked with obtaining appropriate clinical documentation to ensure that the level of service rendered to the patient and the clinical complexity of the patient's condition are completely and accurately documented. The CDI specialist's identify gaps in clinical documentation and ensure that the severity of the patient's illness, the intensity of services, and the risk of mortality are appropriately reflected in the record.

Job Title and Suggested SOC	Nature of Work Performed	Number of Jobs and Employers	Education, Training, Licensing and Associations
<p>Clinical Documentation Improvement Specialist</p> <p>Add to: 29-2071 Medical Records &amp; Health Information Technician</p>	<ul style="list-style-type: none"> <li>• Concurrent review of electronic health record to identify relevant diagnoses and procedures for distinct patient encounters, translating diagnostic phrases utilized by healthcare providers into coded form, and assign appropriate payment group (e.g. DRG)</li> <li>• Interact and/or educate healthcare staff including queries to medical staff</li> <li>• Knowledge of care delivery systems and clinical knowledge including disease processes (e.g. severity of disease pathophysiology, co-morbidities)</li> <li>• Knowledge of Medicare and other payer rules, related clinical practice, coding and documentation requirements</li> <li>• Able to use appropriate software tools (e.g. EHR systems, Microsoft Office, analytical tools)</li> <li>• Critical thinking skills</li> </ul>	<p>A study of CDI professionals shows that two-thirds of the hospitals (66 percent) had implemented a CDI program<sup>xii</sup></p> <p>As of 2011, the CDI role had the third highest number of job postings, following only coders and health information technicians. Data show that CDI was the second fastest growing job title (633 in 2007 to 1,317 in 2011) in the health informatics area, second only to clinical analyst.<sup>20</sup></p> <p>Employers include: Hospitals and integrated delivery systems are the primary employer for CDI specialists.</p>	<p>Education: Associate's degree or above;</p> <p>Certifications preferred: RHIT; RHIT with CCS, CDIP; Nurse with CCS, CDIP</p> <p>Professional Associations: AHIMA, ACDIS</p>

**Privacy Officer:**

The Health Insurance Portability and Accountability Act (HIPAA) of 1996 required the designation of a privacy officer to oversee all ongoing activities related to the development, implementation, maintenance of, and adherence to the organization's policies and procedures covering the privacy of, and access to, patient health information in compliance with federal and state laws and the

healthcare organization's information privacy practices. Privacy Officer's have working knowledge of HIPAA, False Claims Act, Anti-kickback Statute, Stark Law, Civil Money Penalty Provisions, and EMTALA.

Job Title and Suggested SOC	Nature of Work Performed	Number of Jobs and Employers	Education, Training, Licensing and Associations
Privacy Officer (Also: Chief Privacy Officer, Privacy Manager)  Add to: 13-1041 Compliance Officer	<ul style="list-style-type: none"> <li>• Ensure compliance with privacy requirements and other relevant law, regulations and practices</li> <li>• Prepare and provide compliance training presentations to associates, physicians, and board members</li> <li>• Oversee performance of compliance audits;</li> <li>• Collaborate with various department and service line leaders to monitor and validate compliance activities;</li> <li>• Investigate reported compliance and HIPAA concerns;</li> <li>• Review agreements with physicians, physician groups, and immediate family members of physicians for compliance with applicable policies and relevant laws, rules, and regulations;</li> <li>• Audit payments to physicians, physician groups, and immediate family members of physicians</li> </ul>	A privacy designee must be identified in all HIPAA Covered Entities such as: <ul style="list-style-type: none"> <li>• General medical and surgical hospitals; state, local, and private</li> <li>• Offices of physicians</li> <li>• Nursing and residential care facilities</li> <li>• Behavioral health providers</li> <li>• Government</li> <li>• Payer and insurance companies</li> </ul>	Education: Bachelor's degree or greater required  Certification: RHIA, RHIT, and/or CHPS preferred  Professional Association: AHIMA, HIMSS, HCCA

#### Health Information Clerk:

The Health Information Technician performs a variety of duties including collection of the discharged documentation/medical records from all departments (such as: emergency department, inpatient floors, and outpatient surgery department); preparation of paper-based records for scanning the EHR system; completion of scanning process; assist with processing correspondence.

Job Title and Suggested SOC	Nature of Work Performed	Number of Jobs and Employers	Education, Training, Licensing and Associations
Health Information Clerk (also Medical Records Clerk, Scanning Clerk)  Add to: 43-4199 Information and Record Clerk	<ul style="list-style-type: none"> <li>• Process patient admission or discharge documents.</li> <li>• Prepare health record correspondence</li> <li>• Answer questions from patients and other departments</li> <li>• File and maintain paper or electronic records and information</li> <li>• Prepare records for scanning and complete scanning process.</li> </ul>	Employer: <ul style="list-style-type: none"> <li>• General medical and surgical hospitals; state, local, and private</li> <li>• Physician's offices</li> <li>• Nursing and residential care facilities</li> <li>• Government</li> </ul>	Education: High School Graduation; GED  Professional Association: AHIMA

**Recommendation:** Add the following job titles to the Direct Match Title File for the related SOC including: Clinical Documentation Improvement Specialist to 29-2071 Health Information Technician; Privacy Officer to 13-1041 Compliance Officer; Health Information Clerk to 43-4199 Information and Record Clerk.

### 3. Support for new SOC proposal for a Health Informatics Practitioner

AHIMA would like to reiterate its support for the proposal submitted by a collaboration of organizations requesting a new SOC for Health Informatics Practitioners. This proposal was initiated by the FACA Health IT Policy Committee, Certification and Adoption Workgroup, Workforce Sub-group and developed by organizations employing, representing, and/or educating the workforce in the health informatics occupation including AHIMA and affiliates Commission on Accreditation for Health Informatics and Information Management Education ([CAHIIM](#)) and Commission on Certification for Health Informatics and Information Management ([CCHIIM](#)).

**Recommendation:** Add a new detailed SOC for a Health Informatics Practitioner to address a gap in the SOC system.

### 4. Support for new Management SOC proposal for a Health Information Technology, Health Informatics, and Health Information Management


AHIMA would like to reiterate its support for the Healthcare Information and Management Systems Society (HIMSS) proposal for a new Minor Classification 11-4000 for Health IT, Informatics, and Information Management occupations. There is currently a gap in the management level occupations related to health IT, informatics and information management occupations. This classification would provide an umbrella category for current management occupations and detailed jobs such as those frequently filled by professionals in the health information management including a health information manager (currently listed the current Medical and Health Services Manager SOC 11-9111).<sup>xiii</sup>



**Recommendation:** Add a new minor class in the management group for 11-4000 for Health IT, Informatics, and Information Management occupations.

Thank you for your consideration of AHIMA's comments and recommendations for modifications to the 2010 SOC system. We strongly believe these recommendations will improve the accuracy of the classification system and data available in the current labor market. If we can provide any further information, or if there are any questions or concerns regarding this recommendation letter please contact Dr. William Rudman, Executive Director of the AHIMA Foundation and Vice President of Education Visioning at (312) 233-1168 or [Bill.Rudman@ahimafoundation.org](mailto:Bill.Rudman@ahimafoundation.org).

Sincerely,



Lynne Thomas Gordon, MBA, RHIA, CAE, FACHE, FAHIMA  
Chief Executive Officer

cc: Bill Rudman, PhD, RHIA  
Michelle Dougherty, MA, RHIA, CHP

<sup>i</sup> HITECH authorized the EHR Meaningful Use incentives. It was estimated incentive payments would cost \$20 billion over 10 years. Total cost is dependent on the number of providers in the program. CBO estimates \$20B as the net after penalties were factored. The estimate for incentive payments that would/could be paid out is approximately \$30B. (Congressional Budget Office. "[Letter to the Honorable Charles B. Rangel re: Analysis of the Effect on Federal Direct Spending and Revenues of the Health Information Technology for Economic and Clinical Health \(HITECH\) Act](#)", January 21, 2009.)

<sup>ii</sup> Dougherty M, Williams M, Millenson M, et al. EHR payment incentives for providers ineligible for payment incentives and other funding study. Washington, D.C.: Prepared for Office of Disability, Aging and Long-Term Care Policy, Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services; June, 2013. Available at <http://aspe.hhs.gov/daltcp/reports/2013/EHRPI.pdf>

<sup>iii</sup> A base EHR is defined by ONC as including: patient demographics, patient problem lists, patient medication histories (EH)/medications taken by the patient (EP), clinical notes, , electronic orders for prescriptions, laboratory results viewing, and imaging results viewing. <http://dashboard.healthit.gov/HITAdoption/>

<sup>iv</sup> Office of the National Coordinator for Health IT, Health IT Dashboard. <http://dashboard.healthit.gov/hitadoption/>

<sup>v</sup> Adoption of Electronic Health Record Systems among U.S. Non-federal Acute Care Hospitals: 2008-2013. ONC Data Brief, No. 16, May 2014.

<http://www.healthit.gov/sites/default/files/oncdatabrief16.pdf>

<sup>vi</sup> Hsiao, CJ and Hing, E (2014). Use and Characteristics of Electronic Health Record Systems Among Office-based Physician Practices: United States, 2001–2013. Hyattsville, MD, National Center for Health Statistics. <http://www.cdc.gov/nchs/data/databriefs/db143.htm>.

<sup>vii</sup> Hersh W. The Health Information Technology Workforce: Estimations of Demands and a Framework for Requirements. *Applied Clinical Informatics*. 2010;1(2):197-212.

<sup>viii</sup> Hersh WR and Wright A. What workforce is needed to implement the health information technology agenda? An analysis from the HIMSS Analytics™ Database. AMIA Annual Symposium Proceedings. 2008. Washington, DC: American Medical Informatics Association. 303-307.

<sup>ix</sup> O\*Net Online. Summary Report for: 29-2071.00 - Medical Records and Health Information Technicians.

<http://www.onetonline.org/link/summary/29-2071.00>

<sup>x</sup> Occupational Outlook Handbook Medical Records and Health Information Technicians

<http://www.bls.gov/ooh/healthcare/medical-records-and-health-information-technicians.htm#tab-1>

<sup>xi</sup> <http://hicareers.com/CareerMap/>

<sup>xii</sup> Torrey Barnhouse, BS and William "Bill" Rudman, PhD, RHIA. "The Growth in the Clinical Documentation Specialist Profession." *Educational Perspectives in Health Informatics and Information Management* (Summer 2013): 1-7.

<sup>xiii</sup> Occupational Outlook Handbook. Medical and Health Services Manager. <http://www.bls.gov/ooh/management/medical-and-health-services-managers.htm#tab-2>