## AHIMA Curriculum Map – Health Information Management Associate Degree

Approved by AHIMA Education Strategy Committee – February 2011

<table>
<thead>
<tr>
<th>HIM Associate Degree Entry-Level Competencies (Student Learning Outcomes)</th>
<th>Knowledge Clusters (Curricular Components)</th>
<th>Notes</th>
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<tbody>
<tr>
<td><strong>I. Domain: Health Data Management</strong></td>
<td><strong>Health Data Structure, Content, and Standards</strong></td>
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<tr>
<td><strong>A. Subdomain: Health Data Structure, Content and Standards</strong></td>
<td><em>Data versus information</em> (4)</td>
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<tr>
<td>1. Collect and maintain health data (such as data elements, data sets, and databases).</td>
<td><em>Health information media</em> (such as paper, computer, web-based) (4)</td>
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<tr>
<td>2. Conduct analysis to ensure that documentation in the health record supports the diagnosis and reflects the patient’s progress, clinical findings, and discharge status.</td>
<td><em>Structure and use of health information</em> (individual, comparative, aggregate) (4)</td>
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<tr>
<td>3. Apply policies and procedures to ensure the accuracy of health data.</td>
<td><em>Health record data collection tools</em> (forms, screens, etc.) (4)</td>
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<td>4. Verify timeliness, completeness, accuracy, and appropriateness of data and data sources for patient care, management, billing reports, registries, and/or databases.</td>
<td><em>Data sources</em> (primary/secondary) (4)</td>
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<td></td>
<td><em>Data storage and retrieval</em> (4)</td>
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<td></td>
<td><em>Healthcare data sets</em> (such as OASIS, HEDIS, DEEDS, UHDDS) (2)</td>
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<tr>
<td><strong>B. Subdomain: Healthcare Information Requirements and Standards</strong></td>
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<tr>
<td>2. Apply policies and procedures to ensure organizational compliance with regulations and standards.</td>
<td><em>Health record documentation requirements</em> (such as accreditation, certification,</td>
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| 3. Maintain the accuracy and completeness of the patient record as defined by organizational policy and external regulations and standards. |  | }
4. Assist in preparing the organization for accreditation, licensing, and/or certification surveys.

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<th>C. Subdomain: Clinical Classification Systems</th>
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<tbody>
<tr>
<td>1. Use and maintain electronic applications and work processes to support clinical classification and coding.</td>
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<tr>
<td>2. Apply diagnosis/procedure codes according to current nomenclature.</td>
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<tr>
<td>3. Ensure accuracy of diagnostic/procedural groupings such as DRG, MSDRG, APC, and so on.</td>
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<tr>
<td>4. Adhere to current regulations and established guidelines in code assignment.</td>
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<tr>
<td>5. Validate coding accuracy using clinical information found in the health record.</td>
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<tr>
<td>6. Use and maintain applications and processes to support other clinical classification and nomenclature systems (ex. DSM IV, SNOMED-CT).</td>
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<tr>
<td>7. Resolve discrepancies between coded data and supporting documentation.</td>
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<tr>
<td>• Classifications, taxonomies, nomenclatures, terminologies, and clinical vocabularies (4)</td>
</tr>
<tr>
<td>• Principles and applications of coding systems (such as ICD, CPT, DSM) (5)</td>
</tr>
<tr>
<td>• Diagnostic and procedural groupings (such as DRG, APC, RUGs, SNOMED) (5)</td>
</tr>
<tr>
<td>• Case mix analysis and indexes (4)</td>
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<tr>
<td>• Severity of illness systems (4)</td>
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<tr>
<td>• Coding compliance strategies, auditing, and reporting (such as CCI, plans (5)</td>
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<tr>
<td>• Coding quality monitors and reporting (5)</td>
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<th>D. Subdomain: Reimbursement Methodologies</th>
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<tr>
<td>1. Apply policies and procedures for the use of clinical data required in reimbursement and prospective payment systems (PPS) in healthcare delivery.</td>
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<tr>
<td>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)</td>
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<tr>
<td>3. Support accurate billing through coding, chargemaster, claims management, and bill reconciliation processes.</td>
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<th>Reimbursement Methodologies</th>
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<tr>
<td>• Commercial, managed care and federal insurance plans (4)</td>
</tr>
<tr>
<td>• Compliance strategies and reporting (3)</td>
</tr>
<tr>
<td>• Payment methodologies and systems (such as capitation, prospective payment systems, RBRVS (4)</td>
</tr>
<tr>
<td>• Billing processes and procedures</td>
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</table>
4. Use established guidelines to comply with reimbursement and reporting requirements such as the National Correct Coding Initiative.
5. Compile patient data and perform data quality reviews to validate code assignment and compliance with reporting requirements such as outpatient prospective payment systems.
6. Ensure accuracy of diagnostic/procedural groupings such as DRG, APC and so on. (NEW)

II. Domain: Health Statistics, Biomedical Research and Quality Management
A. Subdomain: Healthcare Statistics and Research

1. Collect, maintain and report data for clinical indices/databases/registries to meet specific organization needs such as medical research and disease registries.
2. Collect, organize and present data for quality management, utilization management, risk management, and other related studies.
3. Comprehend basic descriptive, institutional and healthcare vital statistics.

Healthcare Statistics and Research
- Indices, databases, and registries (4)
- Vital statistics (5)
- Healthcare statistics (5)
- Descriptive statistics (such as means, frequencies, ranges, percentiles, standard deviations) (2)
- Statistical applications with health care data (3)
- Data selection, interpretation, and presentation (5)
- Knowledge-based research techniques (such as library, MEDLINE, web-based) (5)
II. Domain: Health Statistics, Biomedical Research and Quality Management

B. Subdomain: Quality Management and Performance Improvement

1. Abstract and report data for facility-wide quality management and performance improvement programs.
2. Analyze clinical data to identify trends that demonstrate quality, safety, and effectiveness of healthcare.

Quality Management and Performance Improvement

- Quality assessment and improvement (such as process, collection tools, data analysis, reporting techniques) (3)
- Utilization management, risk management, and case management (2)
- Regulatory quality monitoring requirements (3)
- Outcomes measures and monitoring (3)

III. Domain: Health Services Organization and Delivery

A. Subdomain: Healthcare Delivery Systems

1. Apply current laws, accreditation, licensure, and certification standards related to health information initiatives from the national, state, local and facility levels.
2. Differentiate the roles of various providers and disciplines throughout the continuum of healthcare and respond to their information needs.

Healthcare Delivery Systems

- Organization of healthcare delivery in the United States (4)
- Healthcare organizations structure and operation (4)
- External standards, regulations, and initiatives (such as licensure, certification, accreditation, HIPAA, ARRA) (4)
- Healthcare providers and disciplines (4)
### III. Domain: Health Services Organization and Delivery

**B. Subdomain: Healthcare Privacy, Confidentiality, Legal, and Ethical Issues**

1. Adhere to the legal and regulatory requirements related to the health information infrastructure.
2. Apply policies and procedures for access and disclosure of personal health information.
4. Maintain user access logs/systems to track access to and disclosure of identifiable patient data.
5. Apply and promote ethical standards of practice.

### IV. Domain: Information Technology & Systems

**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)*

| • Health information systems (such as administrative, patient registration, ADT, EHR, PHR, lab, radiology, pharmacy) *(4)*  
| • Voice recognition technology *(3)*  
| • Health information specialty systems (such as ROI, coding, registries) *(5)*  
| • Application of systems and policies to health information systems and functions and health care data requests *(5)*  
| • System acquisition and evaluation *(3)* |

**IV. Domain: Information Technology & Systems**

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

1. Apply knowledge of database architecture and design (such as data dictionary) to meet departmental needs.

**C. Subdomain: Data Storage and Retrieval**

1. Use appropriate electronic or imaging technology for data/record storage.  
2. Query and generate reports to facilitate information retrieval using appropriate software.  
3. Apply retention and destruction policies for health information. *(NEW)*

| Date Storage and Retrieval  
| • Document archival, retrieval, and imaging systems *(4)*  
| • Maintenance and monitoring of data storage systems *(4)* |
### D. Subdomain: Data Security

1. Apply confidentiality and security measures to protect electronic health information.
2. Protect data integrity and validity using software or hardware technology.
3. Apply departmental and organizational data and information system security policies.
4. Use and summarize data compiled from audit trails and data quality monitoring programs.

### Data Security and Healthcare Information Systems

- System architecture and design (3)
- Screen design (4)
- Data retrieval and maintenance (4)
- Data security concepts (3)
- Data integrity concepts (4)
- Data integrity and security processes and monitoring (3)

### V. Domain: Organizational Resources

#### A. Subdomain: Human Resources

1. Apply the fundamentals of team leadership.
2. Participate in and work in teams and committees.
3. Conduct orientation and training programs.
4. Monitor and report staffing levels and productivity standards for health information functions.
5. Use tools and techniques to monitor, report and improve processes.
6. Comply with local, state and federal labor regulations.  
   (NEW)

#### Organizational Resources

- Roles and functions of teams and committees (5)
- Teams/consensus building and committees (4)
- Communication and interpersonal skills (5)
- Team leadership concepts and techniques (4)
- Orientation and training (such as content, delivery, media) (5)
- Workflow and process monitors (4)
V. Domain: Organization and Management

B. Subdomain: Financial and Resource Management

1. Make recommendations for items to include in budgets and contracts.
2. Monitor and order supplies needed for work processes.
4. Recommend cost-saving and efficient means of achieving work processes and goals.
5. Contribute to work plans, policies, procedures, and resource requisitions in relation to job functions.

Financial and Resource Management

- Revenue cycle monitors (4)
- Organizational plans and budgets (framework, levels, responsibilities, etc.) (4)
- Resource allocation monitors (4)

BIOMEDICAL SCIENCES

- Anatomy (4)
- Physiology (4)
- Medical Terminology (4)
- Pathophysiology (4)
- Pharmacotherapy (4)

Bloom’s Taxonomy:

1 = Knowledge: The remembering (or recalling) of appropriate, and previously learned information
2 = Comprehension: Grasping the meaning of information
3 = Application: Applying previously learned information to new situations to solve problems
4 = Analysis: Breaking down information and inferring (or finding evidence) to support divergent conclusions
5 = Synthesis: Applying prior knowledge and skills to create a new or original whole