CAHIMA

Certified Coding Associate (CCA) Exam Content Outline

Domain 1 – Clinical Classification Systems (30-34%)

Tasks:

- 1. Interpret healthcare data for code assignment
- 2. Incorporate clinical vocabularies and terminologies used in health information systems
- 3. Abstract pertinent information from medical records
- 4. Consult reference materials to facilitate code assignment
- 5. Apply inpatient coding guidelines
- 6. Apply outpatient coding guidelines
- 7. Apply physician coding guidelines
- 8. Assign inpatient codes
- 9. Assign outpatient codes
- 10. Assign physician codes
- 11. Sequence codes according to healthcare setting

Domain 2 – Reimbursement Methodologies (21-25%)

Tasks:

- 1. Sequence codes for optimal reimbursement
- 2. Link diagnoses and CPT® codes according to payer specific guidelines
- 3. Assign correct DRG
- 4. Assign correct APC
- 5. Evaluate NCCI edits
- 6. Reconcile NCCI edits
- 7. Validate medical necessity using LCD and NCD
- 8. Submit claim forms
- 9. Communicate with financial departments
- 10. Evaluate claim denials
- 11. Respond to claim denials
- 12. Resubmit denied claim to the payer source
- 13. Communicate with the physician to clarify documentation

Domain 3 – Health Records and Data Content (13-17%)

Tasks:

- 1. Retrieve medical records
- 2. Assemble medical records according to healthcare setting
- 3. Analyze medical records quantitatively for completeness
- 4. Analyze medical records qualitatively for deficiencies
- 5. Perform data abstraction
- 6. Request patient-specific documentation from other sources (ancillary depts., physician's office, etc.)
- 7. Retrieve patient information from master patient index
- 8. Educate providers on health data standards
- 9. Generate reports for data analysis



Domain 4 – Compliance (12-16%)

Tasks:

- 1. Identify discrepancies between coded data and supporting documentation
- 2. Validate that codes assigned by provider or electronic systems are supported by proper documentation
- 3. Perform ethical coding
- 4. Clarify documentation through physician query
- 5. Research latest coding changes
- 6. Implement latest coding changes
- 7. Update fee/charge ticket based on latest coding changes
- 8. Educate providers on compliant coding
- 9. Assist in preparing the organization for external audits

Domain 5 – Information Technologies (6-10%)

Tasks:

- 1. Navigate throughout the EHR
- 2. Utilize encoding and grouping software
- 3. Utilize practice management and HIM systems
- 4. Utilize CAC software that automatically assigns codes based on electronic text
- 5. Validate the codes assigned by CAC software

Domain 6 - Confidentiality & Privacy (6-10%)

Tasks:

- 1. Ensure patient confidentiality
- 2. Educate healthcare staff on privacy and confidentiality issues
- 3. Recognize and report privacy issues/violations
- 4. Maintain a secure work environment
- 5. Utilize pass codes
- 6. Access only minimal necessary documents/information
- 7. Release patient-specific data to authorized individuals
- 8. Protect electronic documents through encryption
- 9. Transfer electronic documents through secure sites
- 10. Retain confidential records appropriately
- 11. Destroy confidential records appropriately