## DACUM Competency Profile for The Health Information Coding and Data Specialist

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  Sunnyvale, CA
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  Long Beach City College
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  MSO Billing Manager  
  Barton Healthcare System - Management Services Organization  
  South Lake Tahoe, CA
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**DACUM Competency Profile for The Health Information Coding and Data Specialist**

The Health Information Coding/Data Specialist is a member of Health Center that retrieves, analyzes, abstracts, assigns appropriate codes, enters and collates data for the generation of reports for reimbursement, statistics, and continuous improvement in patient care.

### Duties

<table>
<thead>
<tr>
<th>A</th>
<th>Establish Work Environment</th>
</tr>
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<table>
<thead>
<tr>
<th>B</th>
<th>Review Medical Record</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>E</th>
<th>Collecting Data For The Abstract</th>
</tr>
</thead>
</table>

### Tasks

<table>
<thead>
<tr>
<th>A-1</th>
<th>Establish ergonomically correct workspace</th>
</tr>
</thead>
<tbody>
<tr>
<td>A-2</td>
<td>Boot up computer</td>
</tr>
<tr>
<td>A-3</td>
<td>Review E-mail messages</td>
</tr>
<tr>
<td>A-4</td>
<td>Gather resources and references</td>
</tr>
<tr>
<td>A-5</td>
<td>Determine criteria for the day</td>
</tr>
<tr>
<td>A-6</td>
<td>Retrieve appropriate records</td>
</tr>
<tr>
<td>A-7</td>
<td>Gather appropriate forms</td>
</tr>
<tr>
<td>B-1</td>
<td>Verify the patient account number</td>
</tr>
<tr>
<td>B-2</td>
<td>Verify demographic data</td>
</tr>
<tr>
<td>B-3</td>
<td>Review the medical record for payor type</td>
</tr>
<tr>
<td>B-4</td>
<td>Review the medical record for patient type</td>
</tr>
<tr>
<td>B-5</td>
<td>Check the medical record for deficiencies</td>
</tr>
<tr>
<td>B-6</td>
<td>Gather supporting/related health documents</td>
</tr>
<tr>
<td>C-1</td>
<td>Determine admitting diagnosis</td>
</tr>
<tr>
<td>C-2</td>
<td>Determine principal diagnosis</td>
</tr>
<tr>
<td>C-3</td>
<td>Determine medication diagnosis/es</td>
</tr>
<tr>
<td>C-4</td>
<td>Assign and enter international classification of disease - 9th ed. Clinical modification codes</td>
</tr>
<tr>
<td>C-5</td>
<td>Sort problem medical records</td>
</tr>
<tr>
<td>C-6</td>
<td>Query Medical Doctors and other health providers for clarification or additional information</td>
</tr>
<tr>
<td>D-1</td>
<td>Determine principal procedures/service</td>
</tr>
<tr>
<td>D-2</td>
<td>Determine additional procedures</td>
</tr>
<tr>
<td>D-3</td>
<td>Assign/verify and enter the international classification of disease (9) clinical modification procedures codes</td>
</tr>
<tr>
<td>D-4</td>
<td>Assign and enter current procedural terminology codes</td>
</tr>
<tr>
<td>D-5</td>
<td>Assign and enter modifier(s)</td>
</tr>
<tr>
<td>D-6</td>
<td>Assign/verify and enter health care financing administration common procedural coding system code</td>
</tr>
<tr>
<td>D-7</td>
<td>Analyze/assign the diagnostic related groups/ambulatory payment classification</td>
</tr>
<tr>
<td>E-1</td>
<td>Review patient type for abstract for specific elements</td>
</tr>
<tr>
<td>E-2</td>
<td>Assign/enter the Office of State Health Planning Department (OSHPD) data elements</td>
</tr>
<tr>
<td>E-3</td>
<td>Enter all identification numbers of physicians treating the patient</td>
</tr>
<tr>
<td>E-4</td>
<td>Enter all physician identification numbers associated with each procedure</td>
</tr>
<tr>
<td>E-5</td>
<td>Enter newborn infant data</td>
</tr>
<tr>
<td>E-6</td>
<td>Enter obstetrical data</td>
</tr>
<tr>
<td>E-7</td>
<td>Enter data related to administration of blood products</td>
</tr>
<tr>
<td>E-8</td>
<td>Enter advanced directive status</td>
</tr>
<tr>
<td>E-9</td>
<td>Enter special studies data</td>
</tr>
<tr>
<td>E-10</td>
<td>Review/enter data for Joint Commission ongoing medical record review</td>
</tr>
<tr>
<td>E-11</td>
<td>Enter death statistics</td>
</tr>
<tr>
<td>E-12</td>
<td>Flag the medical record for chart tracking location</td>
</tr>
<tr>
<td>E-13</td>
<td>Flag the medical record for appropriate review</td>
</tr>
<tr>
<td>E-14</td>
<td>File medical record</td>
</tr>
<tr>
<td>F</td>
<td>Communicate Information To Other Departments</td>
</tr>
<tr>
<td>---</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>F-1</td>
<td>Communicate code changes to Business Office</td>
</tr>
<tr>
<td>F-2</td>
<td>Investigate and rectify questioned data</td>
</tr>
<tr>
<td>F-3</td>
<td>Communicate follow-up outcomes</td>
</tr>
<tr>
<td>F-4</td>
<td>Generate reports</td>
</tr>
<tr>
<td>F-5</td>
<td>Transmit data to appropriate departments</td>
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<table>
<thead>
<tr>
<th>G</th>
<th>Audit Medical Records' Data</th>
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<tbody>
<tr>
<td>G-1</td>
<td>Review physician chart for documentation</td>
</tr>
<tr>
<td>G-2</td>
<td>Review all coding</td>
</tr>
<tr>
<td>G-3</td>
<td>Review demographic data</td>
</tr>
<tr>
<td>G-4</td>
<td>Collect and enter data regarding quality of care</td>
</tr>
<tr>
<td>G-5</td>
<td>Collaborate with investigations/audits</td>
</tr>
<tr>
<td>G-6</td>
<td>Respond to audit findings</td>
</tr>
<tr>
<td>G-7</td>
<td>Problem solve data/insurance rejections</td>
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<table>
<thead>
<tr>
<th>H</th>
<th>Maintain Professional Responsibilities</th>
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<tbody>
<tr>
<td>H-1</td>
<td>Maintain security and confidentiality of health information</td>
</tr>
<tr>
<td>H-2</td>
<td>Follow facility specific policies and procedures</td>
</tr>
<tr>
<td>H-3</td>
<td>Maintain currency of coding resources</td>
</tr>
<tr>
<td>H-4</td>
<td>Participate in performance improvement</td>
</tr>
<tr>
<td>H-5</td>
<td>Maintain continuing education/certification (Internal &amp; External)</td>
</tr>
<tr>
<td>H-6</td>
<td>Serve as a preceptor for new employees/students</td>
</tr>
<tr>
<td>H-7</td>
<td>Provide in-service training</td>
</tr>
<tr>
<td>H-8</td>
<td>Achieve productivity standards</td>
</tr>
<tr>
<td>H-9</td>
<td>Adhere to coding guidelines</td>
</tr>
<tr>
<td>H-10</td>
<td>Adhere to compliance guidelines</td>
</tr>
</tbody>
</table>
Future Trends & Issues
- 1. Health Insurance Portability & Accountability Act HIPAA
- 1. Software (Encoder)
- 2. Coding Compliance
- 2. Hardware troubleshooting
- 3. National Correct Coding Initiative
- 3. New technologies
- Abstracting systems - delegated to non-coders
- Common procedural terminology 5
- Computer Knowledge/Computerized Patient Record
- Concurrent coding
- Confidentiality & ethics
- Continued healthcare reform
- Continued salary increased due to demand
- Credential for chart review (coding)
- Cultural issues
- Direct automated coding/abstracting & auditing
- Distant coding/abstracting (homebased)
- Dress code - professional dress respect
- Ergonomics
- ICD-10-Clinical Modification
- Increase HIM working knowledge
- Increased auditing responsibilities
- Increased collaboration between Health Information & Financial Services
- Job constant change in responsibilities
- Job knowledge (continuing education)
- Liabilities
- Marketing of profession
- Merging roles
- Networking (others, coding specialist)
- Outsourcing
- Redesign of computerized patient record
- Reimbursement knowledge
- Shortage of staff
- Stepping out of comfort zone

Knowledge & Skills
- Abbreviations
- Ability to organize
- Acronyms
- Adhere to compliance guidelines
- American Academy of Professional Coders
- American Health Information Management Association
- Anatomy & physiology
- California Health Information Association (State & Local)
- Coding guidelines - inpatient vs. outpatient - coding clinic/CPT assistant/CPT rules & modifiers
- Communication skills:
- Computer skills:
- Confidentiality
- Customer service
- Diagnostic Imaging
- Directed practice at various types of settings (hospitals, clinics, Doctor's practices and Skilled Nursing Facilities, etc.)
- EKGs
- Encoder (EDI) software
- Federal registry
- Filing systems/assembly deficiencies/basic flow of medical - records
- Hospital policy/procedures
- ICD-9, CPT 4, HCPCS, DRG, APC, NCCI (National correct coding initiative)
- Interaction with co-workers - other hospital personnel
- Internet
- Keyboarding (10-key)
- Knowledge of diagnostic related groups & ambulatory payment classifications
- Knowledge of medical records
- Knowledge of payors code requirements
- Knowledge of professional organizations for health information management
- Laboratory
- Medical terminology
- Numerical recollection
- Organization skills
- OSHPD regulations
- Pathology of diseases - symptoms vs. complications of disease
- Pharmacology
- Problem solving skills
- Queries to physicians
- Radiology
- Recognize abnormal findings:
- Revenue codes
- Society for Clinical Coders
- Speed reading
- Telephone
- Time management
- Verbal
- Windows
- Written

Tools, Equipment, Supplies And Materials
- Abbreviation list/book (one should include acronyms)
- American Hospital Association
- Anatomy/body works online
- Binders - for reference materials/reports
- Calendar
- Charge master List
- Clinical Modification
- Coding Clinic
- Coding Guidelines (ICD-9)
- CPN Dictionary - Medical
- CPT Assistant (CPT)
- CPT Companion
- CRT - 17" or larger/Computer
- Current Procedural Terminology
- Desk Reference
- DRG companion book
- DRG Guidebook
- E-mail
- Fax machine
- Healthcare Common Procedure Coding System
- Hole puncher
- Internation Classification of Disease (ICD-9)
- Internet/Intranet
- Laptop computer
- Manual - Office Statewide Health Planing and Development for abstraction
- OSHPD edits IV-edits manual/diskette
- Manual-Basic ICD9-CM Coding
- OLIG-recommended publications
- Paper
- Pen/Pencils/high-lighters
- Pharmacology
- Physician Desk Reference - Hospital specific abstracting & coding guidelines/protocols/procedures policies
- Post-it notes
- Printer
- Recommended coder publications
- Roster - Medical staff with ID No.
- Scissors
- Software - Abstracting
- Software - Encoder
- Sorting trays
- Stapler, staples, staple remover
- Tape-scotch
- Telephone
- Telephone lists - external & internal
- Workspace - adequate to support work materials, surface space & filing space, comfortable, adjustable chair, ergonomically-correct (work surface/desk, keyboard, footrest) - Distraction free

Worker Characteristics
- Able to work independent
- Approachable
- Assertive
- Communicative/collaborative
Worker Characteristics

- Competent
- Critical thinker
- Cultural sensitivity
- Decisive
- Demonstrates ethics
- Dependable/reliable
- Detail-oriented
- Discretion
- Flexible/adaptive
- Honesty
- Integrity
- Investigative/intuitive
- Logic-based (common sense)
- Loyalty
- Manages personal/business stress
- Organized
- Positive attitude
- Professional behavior
- Professional image & behavior
- Respects property/resources of others
- Responsible
- Self motivation
- Self-disciplined
- Sense of Humor
- Tactful
- Team-oriented
- Tolerates opinions of others