Core Curriculum Domain 01: Professional Standards and Audit Behavior (8%)

- 01.01.01 Participate in goal setting, strategic planning, and mission/vision development activities
- 01.01.02 Integrate code/standards of conduct policies in performance of medical audit activity
- 01.01.03 Establish/monitor appropriate patient access and confidential policies
- 01.01.04 Establish/participate in enforcing expectations and systems of accountability
- 01.01.05 Apply principles of objectivity in performance of medical audit activity
- 01.01.06 Develop/monitor effectiveness of internal control policies
- 01.01.07 Apply principles of independence in performance of medical audit activity

Core Curriculum Domain 02: Medical Audit Process and Methodology (Total = 58%)

02.01 Investigate and Verify Charges Against Medical Record Documentation (5%)

- 02.01.01 Inpatient Hospital
- 02.01.02 Physician
- 02.01.03 Outpatient Hospital
- 02.01.04 Ambulatory Center
- 02.01.05 SNF/LTC/Rehab

02.02 Audit Process, Work Flow and Audit Findings (19%)

- 02.02.01 Audit Process: Plan/discuss pre-audit process
- 02.02.02 Audit Process: Line by line bill audit
- 02.02.03 Validate eligibility/benefits
- 02.02.04 Apply third party payment rules
- 02.02.05 Review/audit accuracy of UB-04
- 02.02.06 Assign/validate ICD-9-CM codes
- 02.02.07 Assign/validate MS DRG codes
- 02.02.08 Assign/validate E and M codes
- 02.02.09 Apply official coding rules
- 02.02.10 Assign/validate revenue codes
- 02.02.11 Audit billing/claims systems for accuracy and timeliness
- 02.02.12 Conduct focused and target audits
- 02.02.13 Write audit report using standard format
- 02.02.14 Develop pre-audit procedures and tools
- 02.02.15 Use statistically generated audit samples
- 02.02.16 Post audit conference and discussion
- 02.02.17 Conduct exit interview
- 02.02.18 Review/audit accuracy of CMS 1500
- 02.02.19 Assign/validate CPT codes
- 02.02.20 Assign/validate APC codes
- 02.02.21 Apply Correct Coding Initiative rules
- 02.02.22 Assign/validate Physician Fee Schedule
- 02.02.23 Assign/validate HCPCS II

02.03 Other Relevant Medical Audit Responsibilities (10%)

- 02.03.01 Update/review/maintain charge description master (CDM)
- 02.03.02 Provide clinical interpretation and guidance to fellow auditors and staff
02.03.03  Recommend/approve/monitor use of external auditors or subcontractors
02.03.04  Apply medical necessity rules in audit activity
02.03.05  Apply utilization review criteria and protocols in medical audit activity
02.03.06  Apply coding rules in medical audit activity
02.03.07  Apply regulatory and legislative policies in medical audit activity
02.03.08  Report identified and potential quality and risk management issues
02.03.09  Participate/conduct interrater reliability (IRR) and validation exercises
02.03.10  Develop/update data base for tracking and trending medical audit findings
02.03.11  Prepare/submit cost benefit and financial impact analysis reports

02.04. Quality Improvement Activities, Education and Training (4%)

02.04.01  Develop/update/maintain/disseminate training manuals and educational materials
02.04.02  Participate in education and training of staff
02.04.03  Develop Quality Assurance/Improvement policies and procedures
02.04.04  Monitor productivity levels of staff
02.04.05  Recommend process improvement solutions

02.05. Compliance and Special Investigations (6%)

02.05.01  Develop risk assessment surveys
02.05.02  Conduct due diligence and compliance audits using set rules, P/P
02.05.03  Prepare audit workpapers and report findings
02.05.04  Develop compliance programs
02.05.05  Investigate compliance reports and issues
02.05.06  Recommend/monitor disciplinary and corrective action plans
02.05.07  Collaborate/cooperate with external and regulatory auditors
02.05.08  Monitor/apply OIG and GSA sanction list
02.05.09  Interpret/apply/disseminate laws, accreditation, licensure and certification mandates

02.06. Contracts and Negotiations (2%)

02.06.01  Review/write contracts
02.06.02  Negotiate w/ external auditors
02.06.03  Negotiate with payors

02.07. Denial and Appeals Management (3%)

02.07.01  Track and review denied claims
02.07.02  Write appeal letters
02.07.03  Participate in denial and appeal discussion and follow-ups
02.07.04  Conduct adjustments and payments
02.07.05  Recommend business process rules

02.08. Health Information Management (Medical Records) (4%)

02.08.01  Abstract/collection records for department indices/databases/registries
02.08.02  Collect data for internal/external use (QA, UM, RM & other related studies)
02.08.03  Calculate and interpret healthcare statistics
02.08.04  Perform quantitative and qualitative analysis
02.08.05  Monitor and enforce JCAHO standards on Health Information Management
02.08.06  Evaluate software and coding systems
• 02.08.07 Maintain record storage and filing systems
• 02.08.08 Monitor credentialing programs

02.09. Informatics and Technology (5%)

• 02.09.01 Email
• 02.09.02 Word processing tools
• 02.09.03 Spreadsheets and databases
• 02.09.04 Graphics, flow charts and presentation tools
• 02.09.05 Statistical applications
• 02.09.06 Project Management tools
• 02.09.07 Other commercial billing and auditing systems
• 02.09.08 Homegrown systems
• 02.09.09 Coding systems
• 02.09.10 Antifraud software

Core Curriculum Domain 03: Audit Skill (Total =21%)

03.01. Interaction and Communication (6%)

• 03.01.01 Physicians
• 03.01.02 Nurses and other clinical practitioners
• 03.01.03 Senior management team
• 03.01.04 Legal Counsel/Attorneys
• 03.01.05 External auditors
• 03.01.06 Regulatory auditors

03.02. Specific Knowledge and Skill Set (12%)

• 03.02.01 Accounting/Finance
• 03.02.02 Problem Solving
• 03.02.03 Statistics
• 03.02.04 Quantitative and Qualitative Analysis
• 03.02.05 Project Management
• 03.02.06 Programming and Configuration
• 03.02.07 Proposal Writing
• 03.02.08 Nursing Process
• 03.02.09 Clinical Judgment
• 03.02.10 Health Information Mgt. Principles
• 03.02.11 Research
• 03.02.12 Negotiating

03.03. Leadership and Management (6%)

• 03.03.01 Prepare/submit budget
• 03.03.02 Hire/recommend/terminate staff
• 03.03.03 Develop productivity, quality control, and process improvement measures
• 03.03.04 Conduct performance appraisals
• 03.03.05 Develop departmental policies and procedures
• 03.03.06 Develop strategic plans, goals and objectives for unit/dept assigned
- 03.03.07 Participate in internal/external work groups/committees
- 03.03.08 Supervise billers/patient accounting or claims personnel
- 03.03.09 Supervise coding, MT or HIM personnel
- 03.03.10 Supervise nursing or clinical staff

Core Curriculum Domain 04: Medical Audit Environment (13%)

- 04.01.01 National Healthcare Billing Audit Guidelines
- 04.01.02 Federal and State mandated laws
- 04.01.03 Office of Inspector General Compliance Guidance
- 04.01.04 General Accepted Accounting Principles
- 04.01.05 AICPA Standards
- 04.01.06 NCQA/HEDIS Standards
- 04.01.07 JCAHO
- 04.01.08 HIPAA
- 04.01.09 Medicare/Medicaid Policies
- 04.01.10 National and Local Coverage Determination
- 04.01.11 Medicare Integrity Program
- 04.01.12 US Sentencing Rules
- 04.01.13 UM/UR criteria, standards and protocols
- 04.01.14 Sarbanes-Oxley Act
- 04.01.15 Health Insurance reimbursement methodologies

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