Certified Coding Associate (CCA)
Content Outline Crosswalk 2011-2022

Executive Summary

In 2021, the American Health Information Management Association (AHIMA) began a job task analysis for the Certified Coding Associate (CCA) professional certification. The purpose of the current job analysis study was to validate the current tasks that are in the content outline for the CCA program as well as identify additional tasks that may be required of CCAs in their current role. The result of the CCA job task analysis study resulted in an updated Content Outline (CO) to ensure the most current state of coding associate practice is being tested in the examination.

The steps for conducting a job analysis study include the following methodology:

1. Subject Matter Expert (SME) interview questionnaire
2. Exam Development Committee (EDC) reviews the interview to add new task statements for inclusion in the Job Analysis Survey
3. Updated Content Outline is incorporated into the Job Analysis Survey and administered to individuals practicing within the population to collect ratings on the tasks on importance and frequency of use
4. During a test specifications meeting, the EDC and SMEs review survey ratings and other data from the population to develop an updated Content Outline and Test Design
5. The outcomes from the test specifications meeting are presented to the Commission on Certification for Health Informatics and Information Management (CCHIIM) for review and approval.

Summary of 2022 CCA Content Outline Updates

The results from the 2021 Certified Coding Associate (CCA) job task analysis indicated that all 6 domains remain relevant for a CCA practicing professional and that much of the tasks expected by a CCA remain appropriate. A total of 6 new tasks were added, 3 tasks were removed/combined into other tasks, and several of the subtext was revised throughout for clarification.

In addition, the number of items allocated to each domain, time allotted to complete the exam, and eligibility requirements/recommendations were reviewed/discussed, and it was determined the exam specifications remain appropriate and should remain the same.

Table 1 below portrays the change in items allocated to each domain of the Content Outline. (There is no change in number of items or domain name.) Table 2 (page 2-page 7) presents the 2011 Content Outline and maps the changes to the 2022 Content Outline.

Table 1. CCA Content Outline (CO) Domain Item Allocation

Content Outline (CO) Domain	2011 CO	2022 CO	Difference
Clinical Classification Systems	27-31 items	27-31 items	0
Reimbursement Methodologies	19-23 items	19-23 items	0
Health Records and Data Content	12-15 items	12-15 items	0
Compliance	11-14 items	11-14 items	0
Information Technologies	5-9 items	5-9 items	0
Confidentiality & Privacy	5-9 items	5-9 items	0

Note: Candidates will begin being assessed on the 2022 CCA Content Online on **May 01, 2022.**

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TABLE 2. 2011 CCA Content Outline mapped to the 2022 CCA Content Outline

Domain 1: Clinical Classification Systems

2011 Content Outline		2022 Content Outline		Change
Task Number	**Task Statement**	**Task Number**	**Task Statement**	
1	Interpret healthcare data for code assignment	1	No change	n/a
2	Incorporate clinical vocabularies and terminologies used in health information systems	2	No change	n/a
3	Abstract pertinent information from medical records	3	No change	n/a
4	Consult reference materials to facilitate code assignment	4	No change	n/a
5	Apply inpatient coding guidelines	5	No change	n/a
6	Apply outpatient coding guidelines	6	No change	n/a
7	Apply physician coding guidelines	7	No change	n/a
8	Assign inpatient codes	8	No change	n/a
9	Assign outpatient codes	9	No change	n/a
10	Assign physician codes	10	No change	n/a
11	Sequence codes according to healthcare settings	11	No change	n/a
n/a		12	Determine an Evaluation and Management (E/M) Level (history, exam, medical decision making, or time)	New Topic
n/a		13	Use of appropriate modifiers	New Topic

No Change	Revision/Edit	Topic Removed	New Topic

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Domain 2: Reimbursement Methodologies

2011 Content Outline		2022 Content Outline		Change
Task Number	**2011 Task Statement**	**Task Number**	**Task Statement**	
1	Sequence codes for optimal reimbursement	1	Sequence codes for appropriate reimbursement	Changed from "optimal" to "appropriate"
2	Link diagnoses and CPT® codes according to payer specific guidelines	2	No change	n/a
3	Assign correct DRG	3	Understand DRG methodology	Change from "assign" to "understand"
4	Assign correct APC	4	Understand APC methodology	Change from "assign" to "understand"
5	Evaluate NCCI edits	5	No change	n/a
6	Reconcile NCCI edits	6	No change	n/a
7	Validate medical necessity using LCD and NCD	7	No change	n/a
8	Submit claim forms	8	Understand claim form types	Change from "submit" to "understand' Added "types"
9	Communicate with financial departments	9	No change	n/a
10	Evaluate claim denials	10	No change	n/a
11	Respond to claim denials	11	Process claim denials	Change from "respond to" to "process" Added: Domain 2, task 12 is included in this task.
12	Resubmit denied claim to the payer source	Removed	n/a	Removed (combined in domain 2, task 11)
13	Communicate with the physician to clarify documentation	12	No change	n/a
n/a		13	Knowledge of Hierarchical Condition Categories (HCC) and risk adjustment	New Topic
n/a		14	Application of CPT guidelines around bundling and unbundling	New Topic

No Change	Revision/Edit	Topic Removed	New Topic

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Domain 3: Health Records and Data Content

2011 Content Outline		2022 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
1	Retrieve medical records	1	No change	n/a
2	Assemble medical records according to healthcare setting	Removed	n/a	Removed
3	Analyze medical records quantitatively for completeness	2	No change	n/a
4	Analyze medical records qualitatively for deficiencies	3	No change	n/a
5	Perform data abstraction	4	No change	n/a
6	Request patient-specific documentation from other sources (ancillary depts., physician's office, etc.)	5	No change	n/a
7	Retrieve patient information from master patient index	6	No change	n/a
8	Educate providers on health data standards	7	No change	n/a
9	Generate reports for data analysis	8	Interpret coding data reports	Changed "generate to "interpret" Added "coding"
n/a		9	Understand the different components of the medical record	New Topic

No Change	Revision/Edit	Topic Removed	New Topic

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Domain 4: Compliance

2011 Content Outline		2022 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
1	Identify discrepancies between coded data and supporting documentation	1	No change	n/a
2	Validate that codes assigned by provider or electronic systems are supported by proper documentation	2	No change	n/a
3	Perform ethical coding	3	No change	n/a
4	Clarify documentation through physician query	4	Clarify documentation through ethical physician query	Added "ethical"
5	Research latest coding changes	5	Research latest coding changes for fee/charge ticket and chargemaster	Added "fee/charge "ticket" Added "chargemaster"
6	Implement latest coding changes	6	Implement latest coding changes for fee/charge ticket and chargemaster	Added "fee/charge ticket" Added "chargemaster"
7	Update fee/charge ticket based on latest coding changes	Removed	n/a	Removed (combined into Domain 4, task 5 and 6)
8	Educate providers on compliant coding	7	No change	n/a
9	Assist in preparing the organization for external audits	8	No change	n/a

No Change		Revision/Edit		Topic Removed		New Topic	

Domain 5: Information Technologies

2011 Content Outline		2022 Content Outline		Change
Task Number	**Task Statement**	**Task Number**	**Task Statement**	
1	Navigate throughout the EHR	1	No change	n/a
2	Utilize encoding and grouping software	2	No change	n/a
3	Utilize practice management and HIM systems	3	No change	n/a
4	Utilize CAC software that automatically assigns codes based on electronic text	4	No change	n/a
5	Validate the codes assigned by CAC software	5	No change	n/a

No Change	Revision/Edit	Topic Removed	New Topic

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Domain 6: Confidentiality & Privacy

2011 Content Outline		2022 Content Outline		Change
Task Number	**Task Statement**	**Task Number**	**Task Statement**	
1	Ensure patient confidentiality	1	Ensure patient confidentiality (HIPAA, state regulations, etc.)	Added clarification in the parenthesis
2	Educate healthcare staff on privacy and confidentiality issues	2	No change	n/a
3	Recognize and report privacy issues/violations	3	No change	n/a
4	Maintain a secure work environment	4	No change	n/a
5	Utilize pass codes	5	Utilize passcodes/passwords	Added "passwords"
6	Access only minimal necessary documents/information	6	No change	n/a
7	Release patient-specific data to authorized individuals	7	No change	n/a
8	Protect electronic documents through encryption	8	Protect electronic documents/protected health information (PHI) through encryption	Added "protected health information (PHI)"
9	Transfer electronic documents through secure sites	9	No change	n/a
10	Retain confidential records appropriately	10	No change	n/a
11	Destroy confidential records appropriately	11	No change	n/a
n/a		12	Understand information blocking	New Topic

No Change		Revision/Edit		Topic Removed		New Topic	