



The Content Outline establishes content and parameters for the Certified Coding Specialist (CCS) certification exam, which measures candidate proficiency and mastery of the tasks, knowledge, and skills that are required of CCS practicing professionals. The American Health Information Management Association® (AHIMA®) periodically reviews and updates the Content Outline to ensure the exam reflects current tasks and proficiency required as the CCS role evolves in step with health system transformation.

Executive Summary

In 2023, AHIMA began a job task analysis for the CCS professional certification. The purpose of the analysis was to validate tasks that are currently included in the Content Outline for the CCS certification and identify additional tasks that are now required of CCSs in their current role. The CCS job task analysis study resulted in an updated Content Outline to ensure that the current state of practice is being tested in the CCS examination. Changes are reflected in the crosswalk below.

The process for developing the methodology to conduct the study included:

1. Subject Matter Experts (SMEs) filled out a questionnaire regarding tasks in the Content Outline
2. The Exam Development Committee (EDC) reviewed the questionnaire results and determined whether new tasks should be added or existing tasks should be edited in the Content Outline
3. The revised Content Outline was incorporated into the Job Analysis Survey
4. The survey was administered to practicing professionals to collect ratings on the importance and frequency of use of each task
5. An Exam Specifications panel composed of EDC and SMEs review survey results, data, and input received from practicing professionals to develop an updated Content Outline and revised exam specifications
6. The updated Content Outline and exam specifications were presented to the Commission on Certification for Health Informatics and Information Management (CCHIIM) for review and approval.

Executive Summary

The results from the 2023 Certified Coding Specialist (CCS) job task analysis indicated that the four original domains remain relevant for a CCS practicing professional and that much of the tasks expected by a CCS remain appropriate. A new 5th domain (Information Technologies) was added to the content outline with four relevant tasks. A total of eight new tasks were added, one task was removed/combined into other tasks, and several of the subtext was revised throughout for clarification.

Additionally, the number of items allocated to each domain, time allotted to complete the exam, and eligibility requirements/recommendations were reviewed/discussed. It was determined that the number of items allocated to each domain will be updated according to Table 1 below. No change was made to the amount of time allotted to complete the exam. The number of total items was updated per Table 2 below. Finally, the eligibility requirements/recommendations were reviewed but not updated for the exam.

Table 1 below portrays the change in items allocated to each domain of the Content Outline. Table 3 (Pages 3–5) presents the 2020 Content Outline and maps the changes to the 2024 Content Outline.

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

Content Outline (CO) Domain	2020 CO	2024 CO	Difference
Coding Knowledge and Skills	50	38-40	- 12 - 10
Coding Documentation	10	17-21	+ 7 - 11
Provider Queries	9	9-11	+ 0 - 2
Regulatory Compliance	28	17-21	- 11 - 9
Information Technologies	N/A	9-11	+ 9 - 11

Table 2. CCS Content Outline (CO) Total Number of Items

Type of Item	Operational (Scored)	Pretest (Unscored)	Total
Multiple Choice Item	79	7	86
Case Scenario Items	18	3	21
Total	97	10	107

Note: Candidates will begin being assessed on the 2024 CCS Content Online on May 01, 2024.

TABLE 3. 2020 CCS Content Outline mapped to the 2024 CCS Content Outline

Domain 1: Coding Knowledge and Skills (39-41%)

2020 Content Outline		2024 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
1	Apply diagnosis and procedure codes based on provider’s documentation in the health record	1	Assign diagnosis and procedure codes based on the provider’s documentation in the health record	Updated “Apply” to “Assign”
2	Determine principal/primary diagnosis and procedure	2	Identify principal/first-listed diagnosis and procedure based on the respective guidelines	Update wording from “primary” to “first-listed”; added wording about respective guidelines
3	Apply coding conventions/guidelines and regulatory guidance	3	Apply coding conventions/guidelines and regulatory guidance	N/A
4	Apply CPT/HCPCS modifiers to outpatient procedures	4	Attach CPT/HCPCS modifiers to outpatient procedures	Updated “Apply” to “Attach”
5	Sequence diagnoses and procedures	5	Determine appropriate sequencing of diagnoses and procedure codes based on the case scenario	Updated wording to give more clarity about coding from case scenarios
6	Apply present on admission (POA) guidelines	6	Apply present on admission (POA) guidelines	N/A
7	Address coding edits	7	Demonstrate knowledge of coding edits (e.g., NCCI, Medical Necessity)	Updated “Address” to “Demonstrate knowledge of” and gave examples of coding edits
8	Assign reimbursement classifications	8	Demonstrate knowledge of reimbursement methodologies (e.g., DRG, APC)	Updated “Address” to “Demonstrate knowledge of” and gave examples of reimbursement methodologies
9	Abstract pertinent data from health record	9	Abstract applicable data from the health record	Updated “pertinent” to “applicable”
10	Recognize major complication/co-morbidity (MCC) and complication and co-morbidity (CC)	10	Recognize major complication/co-morbidity (MCC) and complication and co-morbidity (CC)	Updated “Recognize” to “Identify” and updated wording to current industry terminology

Domain 2: Coding Documentation (18-22%)

2020 Content Outline		2024 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
1	Review health record to assign diagnosis and procedure codes for an encounter	Removed	N/A	Previously covered in Domain 1 Task 1, 2, & 5
2	Review and address health record discrepancies	1	Resolve conflicting documentation in the health record	Updated wording from “Review and address” to “Resolve conflicting documentation”
N/A		2	Ensure all required documentation for assigning a specified code is available within the body of the health record	New Task
N/A		3	Verify and validate documentation within the health record	New Task

Domain 3: Provider Queries (9-11%)

2020 Content Outline		2024 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
N/A		1	Identify elements of an ethical complaint query	New Task
1	Determine if a provider query is compliant	2	Determine if a provider query is compliant (e.g., non-leading, contains appropriate clinical indicators)	Gave examples of complaint query types
2	Analyze current documentation to identify query opportunities	3	Analyze current documentation to identify query opportunities	N/a

Domain 4: Regulatory Compliance (18-22%)

2020 Content Outline		2024 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
1	Ensure integrity of health records	1	Ensure completeness and accuracy of health records	Updated “integrity” to “completeness and accuracy”
2	Apply payer-specific guidelines	2	Understand payer-specific guidelines	Updated “Apply” to “Understand”
3	Recognize patient safety indicators (PSIs) and hospital-acquired conditions (HACs) based on documentation	3	Identify patient safety indicators (PSIs) and hospital-acquired conditions (HACs) based on the provider’s documentation	Updated “Recognize” to “Identify” and added “provider’s documentation”
4	Ensure compliance with HIPAA guidelines	4	Ensure compliance with HIPAA guidelines	N/A
5	Ensure adherence to AHIMA Standards of Ethical Coding	5	Ensure adherence to AHIMA Standards of Ethical Coding	N/A
6	Apply the Uniform Hospital Discharge Data Set (UHDDS)	6	Ensure compliance with the Uniform Hospital Discharge Data Set (UHDDS)	Updated “Apply” to “Ensure compliance with”

Domain 5: Information Technologies (9-11%)

2020 Content Outline		2024 Content Outline		Change
Task Number	Task Statement	Task Number	Task Statement	
N/A		1	Distinguish various types of Electronic Health Records (EHR)	New Task
N/A		2	Demonstrate a basic understanding of encoding and grouper software	New Task
N/A		3	Exhibit an understanding of computer-assisted coding (CAC) software and its impact on coding	New Task
N/A		4	Ensure compliance with HITECH guidelines	New Task