CCHIIM ICD-10 Continuing Education Requirements for AHIMA Certified Professionals
(& Frequently Asked Questions for Recertification)

The transition to ICD-10-CM and ICD-10-PCS is anticipated to improve the capture of healthcare information and bring the United States in step with coding systems worldwide. For those who prepare appropriately, leveraging the ICD-10 investment will allow organizations to move beyond compliance to achieve competitive advantage. The fundamental and pervasive nature of coded data on the practice of health information management makes this transition is of critical significance to health information management professionals.

The value of this transition will be broad and far-reaching throughout the healthcare industry, and will result in:

- Greater coding accuracy and specificity
- Higher quality information for measuring healthcare service quality, safety, and efficiency
- Improved efficiencies and lower costs
- Greater achievement of the benefits of an electronic health record
- Recognition of advances in medicine and technology
- Alignment of the US with coding systems worldwide
- Improved ability to track and respond to international public health threats
- Enhanced ability to meet HIPAA electronic transaction/code set requirements
- Increased value in the US investment in SNOMED-CT
- Space to accommodate future expansion

AHIMA certification represents a high level of achievement and demonstrates proficiency and a broad base of knowledge. AHIMA Certified Professionals have passed a rigorous exam and commit to ongoing professional development through the CCHIIM recertification process. The CCHIIM recertification (maintenance of certification) program ensures that CCHIIM-certified professionals demonstrate ongoing competence in the domain areas in which they are certified through either maintenance or enhancement activities.

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In order to validate that an AHIMA Certified Professional has gained knowledge of the ICD-10-CM/PCS coding system, CCHIIM has determined that continuing education hours with ICD-10-CM/PCS content will be required, as applicable and relevant to the specific AHIMA credential(s) held by the individual. AHIMA Certified Professionals are employed in various roles across multiple healthcare settings, and CCHIIM recognizes a specific job function may require additional continuing educational activities related to ICD-10-CM/PCS, above and beyond the following minimum requirements for continuing education credit, to be reported as continuing education credits (CEUs), per the CCHIIM recertification policy.

**ICD-10-CM/PCS Specific CEU Requirements**

AHIMA Certified Professionals are required by CCHIIM to participate in a predetermined number of mandatory **baseline** educational experiences specific to ICD-10-CM/PCS. These ICD-10-CM/PCS specific CEUs will count as part of all AHIMA certificants’ total CEU requirements for the purpose of recertification. Stated differently, the following CEU requirements will be included as part of each certificants’ total, required CEUs, by credential, per CEU Cycle.

The total number of ICD-10-CM/PCS continuing education units (CEUs) required, by AHIMA credential, is as follows:

- CHPS - 1 CEU
- CHDA - 6 CEUs
- RHIT - 6 CEUs
- RHIA - 6 CEUs
- CDIP - 12 CEUs
- CCS-P - 12 CEUs
- CCS - 18 CEUs
- CCA - 18 CEUs

*6 CEUs = 1 day of training (Please see the explanation under FAQs)*

Certificants who hold more than one AHIMA credential will only report the highest number of CEUs from among all credentials held. For example, if a certificant has both an RHIA and CCS, the certificant would normally report 40 (30 CEUs for RHIA and an additional 10 CEUs for CCS) CEUs per recertification cycle, and 18 of these CEUs will be required to cover ICD-10-CM/PCS.

CCHIIM recognizes that AHIMA Certified Professionals have different levels of required competency regarding ICD-10-CM/PCS. These levels may be as follows:

- **Awareness** of ICD-10-CM/PCS which may include general structure of the systems, potential impact to workflow processes in order to prepare for the systems;
- **Use** of ICD-10-CM/PCS which may include analysis, trending or providing information that involves coded data but not actually apply the codes in their daily jobs and requires more in-depth knowledge of the systems; and

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• Application of ICD-10-CM/PCS which includes assigning codes on a routine base for various purposes and requires a more extensive knowledge of the systems.

Therefore, all certificants are encouraged to tailor their education specific to their job role. For example, if you are an RHIT and perform coding as a large percentage of your daily routine, you are encouraged to follow the requirements set forth for those specialized coding credentials. For further role based information to tailor your educational requirements http://ahima.org/icd10/role.aspx.

Timeline for Accumulating ICD-10-CM/PCS CEUs

AHIMA Certified Professionals can begin earning ICD-10-CM/PCS specific CEUs during the period of January 1, 2011 thru December 31, 2014.

NOTE: All AHIMA Certified Professionals who completed AHIMA’s Academy for ICD-10 prior to January 1, 2011 will be allowed to use those CEU hours to fulfill the ICD-10-CM/PCS CE requirement.

Frequently Asked Questions (FAQs)

- What resource(s) did CCHIIM consider when developing the baseline number of required CEUs?
  - ICD10 Final Rule – The Department of Health and Human Services noted that estimates of the amount of time needed for coder training varied widely between 5-80 hours. HHS stated that estimates for coder training involve five distinct areas of consideration: the training methodology; the clinical specialty; the number of inpatient and outpatient coders; the number of hours for coder training and the cost per hour of training. HHS increased their estimate of the number of hours that inpatient coders will need to learn both ICD-10-CM and ICD-10-PCS from 40 hours to 50 hours, based on industry feedback in response to the proposed rule.
  - Based on similar feedback from the industry expressing concern about the complexity of ICD-10-CM due to its size and structural changes, and coder unfamiliarity, the Department of Health and Human Services also increased from 8 to 10 hours the time that outpatient coders will need for ICD-10-CM training.
  - However, based on feedback from a field testing project sponsored by AHIMA and the American Hospital Association, it is anticipated that one to two days of training will be necessary for coders only needing to learn ICD-10- CM and not ICD-10-PCS. Since ICD-10-CM has the same hierarchical structure, the same basic organization, and many of the same conventions as ICD-9-CM, experienced coding professionals will not require the level of extensive training that would be necessary for an entirely new coding system. They will primarily need education on the changes and in the classification itself as well as guidelines and definitions. It is anticipated that two days of training will be necessary to learn the ICD-10-PCS system due to its complexity and dissimilarity with the ICD-9-CM procedure coding system.

- How was 6 hours determined to be a day of training?

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In the final rule HIPAA Administrative Simplification: Modifications to Medical Data Code Set Standards to Adopt ICD-10-CM and ICD-10-PCS days of training were discussed. Six (6) CEU's is equal to a day of training. However, please note that the unit of measure utilized in categorizing and reporting AHIMA CEU requirements is hours, not days.

- Will these requirements apply to all AHIMA certificants?
  - Yes, ALL CURRENT AHIMA CERTIFICANTS will be required to comply with this mandatory CEU policy.

- Why are there different requirements for different AHIMA credentials?
  - The credential-specific requirements primarily reflect the competencies associated with the credential.
  - CCS/CCA certificants will be required to know how to apply ICD-10-CM/PCS codes to demonstrate the competence for these credentials as outlined in the content outline for these exams. CCS-P credentialed individuals will not use or apply ICD-10-PCS codes within their daily duties but are required to know how to apply ICD-10-CM codes.
  - RHIA/RHIT certificants will be required to know how to use ICD-10-CM/PCS to demonstrate the overall knowledge of those positions that they supervise or perform as outlined in the content outline of these exams.
  - CHDA and CDIP certificants will be required to know the differences between the ICD-9-CM and ICD-10-CM/PCS code sets, focus on the awareness of the transition, familiarity with coding conventions and guidelines, how the data is comparable or not (legacy data), and an understanding of mapping and crosswalks between the classification systems. The CDIP exam requires additional CEUs due to the higher level of ICD-10-CM/PCS content on the exam blueprint.
  - CHPS certificants will need to have a generalized awareness of ICD-10-CM/PCS coding systems.

- What are the baseline ICD-10-CM/PCS CEU requirements if I hold multiple credentials?
  - The requirement will be the credential with the highest number of CEUs. For example if a certificant holds an RHIT and CCS the baseline requirement will be a total of 18 CEUs.

- If I attended an AHIMA Training Academy for ICD-10 in 2009 or 2010 will those CEUs meet the requirement?
  - YES, CCHIIM will recognize CEU's awarded to participants of all AHIMA Academies for ICD-10.

- Will the baseline ICD-10-CM/PCS CEU requirements be additional CEUs from the established CEU requirements for a credentialed professional?
  - No, CEU requirements will be included within the total number of CEUs required for a given CEU Cycle. For example, if you hold an RHIA credential, you will obtain 6 CEUs.
that are in relation to ICD-10-CM/PCS along with the additional 24 CEUs to complete your recertification cycle.

- How will a credentialed professional report the ICD-10-CM/PCS CEUs to AHIMA?
  - You can report your ICD-10 specific CEUs any time before December 31, 2014. Go online at ahima.org and log into MyAHIMA, and select “CEU Center.” Next, choose “Record/Report” to submit your CEUs. Make sure to select “ICD-10” under the Domain field.

- What are the specific types of recommended training areas/educational activities that will qualify for these required CEUs?
  - You are encouraged to tailor your CEs to the role you perform in your daily work. Examples of CEs may include:
    - Introduction to ICD-10-basics
    - Business Impact and Implementation Considerations
    - Understanding General Equivalence Mappings (GEMs)
    - ICD-10-CM Structure, Guidelines and Conventions
    - Clinical Documentation Improvement Strategies using ICD-10 CM
    - Biomedical Science coursework such as Anatomy and Physiology and pathophysiology refresher courses
    - Data analysis and trending with ICD-10-CM coded data
    - ICD-10-CM and its effect on reimbursement methodologies

- Are there stricter guidelines for the ICD-10 CM CEs than there are for my normal CE requirements for my credential?
  - No, you are to be guided by the basic HIM domains as described in the Recertification Guide which can be found at http://ahima.org/certification/recertification.aspx

- Will there be any specific mandated activities?
  - No, activities that best support the current job duties should be chosen.

*Please refer to the chart on the next page for further information.*
### Example - Training Areas/Educational Activities

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<th>Awareness Examples</th>
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<th>Application Examples</th>
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| - Introduction to ICD-10 basics  
(HIM Domain: Clinical Data Management) | - Business Impact Assessments  
(HIM Domain: External Forces) | - ICD-10 CM: Structure, Guidelines & Conventions  
(HIM Domain: Clinical Data Management) |
| - Understand How I-10 will affect the Information Flow and Processes  
(HIM Domain: Clinical Data Management) | - Implementation Considerations & process for ICD-10  
(HIM Domain: Clinical Data Management) | - ICD-10 -CM by Chapter  
(HIM Domain: Clinical Data Management) |
| - Understanding of General Equivalence Mapping (GEMs)  
(HIM Domain: Clinical Data Management) | - Biomedical Sciences (e.g. anatomy, physiology, medical terminology and pathophysiology)  
(HIM Domain: Clinical Foundations) | - ICD-10-PCS definitions (root operations and approaches)  
(HIM Domain: Clinical Data Management) |
| - Clinical Documentation Improvement Strategies  
(HIM Domain: Clinical Data Management) | - Reimbursement Methodologies  
(HIM Domain: Clinical Data Management) |

**PLEASE NOTE:** THE FOLLOWING TOPICS ARE GIVEN AS EXAMPLES ONLY AND ARE NOT INTENDED TO BE AN ALL-INCLUSIVE LIST.  
(These refer to the Recertification Guide for specifics on HIM Domains and general CE requirements).

**Awareness** – of the impact of ICD-10-CM/PCS on coding and other typical health information management functions and on the healthcare industry in general. This may include an overview of the classification system and potential impact to workflow processes in order to prepare for the system changes.

**Usage** - ICD-10-CM/PCS which may include analysis, trending or providing information that involves coded data but not actually apply the codes in their daily jobs and requires more in-depth knowledge of the systems.

**Application** - of ICD-10-CM/PCS which includes assigning codes on a routine bases for various purposes and requires a more extensive knowledge of the systems.

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* Certificants are encouraged to tailor their education specific to their job role. For example, if you are an RHIA but do coding in your daily routine for a large percentage of your job tasks, then you are encouraged to follow the requirements set forth for those specialized coding credentials. For further role based information click here.

**CCHIIM will recognize CEU’s awarded to participants of all AHIMA Academies for ICD-10 CM/PCS.**