Board of Medical Specialty Coding & Compliance

Candidate Handbook for the
Home Care Coding Specialist – Hospice (HCS-H)

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Disclaimer: The material in this electronic handbook is current with the most up-to-date information and is subject to change without notice.

1 About BMSC: Purpose, Mission and Core Values

Purpose

BMSC's purpose is to:

- Advance the healthcare community with an objective measurement of required knowledge and skill to ensure accurate coding and compliance.

- Promote the ethical and appropriate use of health information and its members will ascribe to and conduct themselves in accordance with the Code of Ethics as part of their professional responsibility.

- Recognize that quality clinical data is a critical resource and work to assure that diagnoses used in patient records, research and health management are valid, accurate, complete, and timely.

Mission

BMSC leads coders, clinicians and compliance professionals across the home health and hospice continuum in advancing their professional practice and standards in the delivery of quality diagnostic coding within the post-acute care industry.

Core Values

- **Quality:** Demonstrated by a commitment to the value of coding credential(s), programs, products and services

- **Integrity:** Demonstrated by openness in decision-making, honesty in communication, and ethical practices

- **Leadership:** Demonstrated by visionary thinking, responsive decisions, accountability for actions and outcomes

2 About HCS-H Certification

Hospice coders who successfully pass the certification examination will be certified by BMSC and will earn their Home Care Coding Specialist - Hospice (HCS-H) credential.

HCS-H credential holders are professionals skilled in classifying medical data from patient records, generally in the hospice care setting. These coding practitioners review patients' records and assign alpha numeric codes for each diagnosis. To perform this task, they must possess expertise in the understanding and application of coding conventions and guidelines as outlined in the ICD-10-CM classification system. In addition, the HCS-H credential holder is knowledgeable in medical terminology, disease processes, and pharmacology. Hospitals and medical providers report coded data to insurance companies, or to the government in the case of Medicare and Medicaid recipients, for reimbursement of expenses. Thus, accuracy in reporting diagnoses and conditions by a coding specialist is imperative to appropriate reimbursement.

The HCS-H certification examination assesses proficiency in hospice coding. Professionals experienced in hospice coding should consider obtaining this certification.

Benefits

HCS-H certified coders are considered leaders in the industry because they:

- Utilize their specialty knowledge and experience to better interact with clinicians and providers
- Understand both basic and more advanced coding principles and guidelines
- Ensure their providers receive appropriate reimbursement
- Provide direction and instruction to less experienced coders in the workplace
- Demonstrate their coding skills daily

The HCS-H credential is a demonstration of your coding proficiency. As you become more experienced in the practical requirements of hospice coding, HCS-H certification can provide additional professional and personal recognition and reward.

As the importance of accurate and specific diagnosis coding increases in the home health and hospice setting, those with demonstrated proficiency will significantly increase the value they bring to their agencies. Certified coders are generally more highly compensated and receive greater advancement opportunities. For job applicants, certification can provide a competitive advantage, and providers are increasingly requiring coding certification as a condition of employment.

3 Determining if you are ready to take the HCS-H Exam

Eligibility and Qualifications

The HCS-H exam assesses your proficiency in coding specifically for hospice.

To be eligible to sit for the Home Care Coding Specialist-Hospice (HCS-H) certification examination, candidates must have earned a high school diploma from a United States high school, or have an equivalent background. Although not required, it is strongly recommended that candidates have at least two years of on-the-job experience in:

- **Hospice coding for multiple case types (for example, circulatory, neoplasms, genitourinary, musculoskeletal, respiratory, endocrine, nutritional, metabolic diseases, and immunity disorders)**

  AND

- **Completed coursework in anatomy, physiology, medical terminology, pathophysiology, and pharmacology, or demonstrate proficiency in these areas**

Our most successful candidates usually have at least two years coding in hospice. HCS-H credential holders must be able to apply codes and coding concepts in a testing situation. This is not an exam where you can sit through an education class, then take and pass the exam. It is a skills-based exam, which is why we recommend several years of coding experience. The test may include scenarios with multiple conditions, aftercare situations, co-morbidities and complications, for example.

If you believe that your combination of education, experience and expertise qualifies you as a hospice coding specialist, then we invite you to sit for a HCS-H certification examination.

BMSC does not discriminate against any applicant. All applicants for examinations will be judged only on published criteria for eligibility.

Examination Philosophy

BMSC exams are designed to test the day-in, day-out coding skills of the professional coder. As a result, many coding scenarios appear on the exam, as well as the crucial subject areas of coding conventions and guidelines. This is the only nationwide certification credential created by coders for coders. Our goal isn't to stump you with trick questions on conditions you will likely never see, but rather to ensure – for you and for your employer – that you have, in fact, achieved proficiency in hospice coding.

The HCS-H examination focuses on the critical diagnosis coding, documentation, legal and ethical issues specific to hospice:

- Most frequently billed hospice conditions and proper sequencing of diagnoses
- Accurately assigning codes that represent factors influencing health status
- Conventions and guidelines for hospice diagnosis coding (e.g., manifestation codes)
- Correct usage of combination codes
- Correct assignment of primary and secondary diagnoses
- Knowledge of medical terminology
- Knowledge of anatomy and physiology
- Adherence to legal and ethical standards

Job Task Analysis

The job analysis process ensures quality control of the relevancy, currency, and validity of the competencies assessed by each certification examination. Job analyses are typically performed every three to five years. Consistent with best practices, the task of job analysis is overseen by a diverse and representative sample of stakeholders, including recently certified professionals and related BMSC staff. These stakeholders assess the criticality of current workplace practices, skills, tasks, and responsibilities, with respect to the importance and frequency of performance. The results of the job analysis influence to what extent the competencies are revised for the HCS-H certification examination.

Examination Blueprints and Specifications

The job analysis serves as the foundation for the examination blueprint. First, the individual competencies are grouped into domains that represent specific and similar areas of content. Next, the percentage weighting of each content domain is determined, in part, through the individual competency statement criticality scores, considered collectively, within each domain. This weighting of domains relative to one another allows the BMSC specialty advisory board to determine how much, or to what extent, each domain is assessed (both by the number and difficulty of test items), relative to the other domains. For example, domains with competencies with higher criticality scores (that is more important and/or more frequently performed) typically represent a larger percentage of test items than those domains with lower criticality scores for their respective competencies.

The examination specifications are typically established by the BMSC specialty advisory board or revised at the same time as the development of the examination blueprint. The specifications usually include the total number of test items (both scored and non-scored), test item type(s), such as multiple-choice or other, total test duration, and scoring methodology.

Applying for the Exam

To begin your process, review the information in this handbook. If you feel you are ready to begin this process and have met BMSC's minimum requirements, submit an online application for the certification examination at BMSC's website: ahcc.decisionhealth.com.

You will receive from BMSC an e-mail confirmation, candidate ID number, payment confirmation, and instructions to schedule your exam at a testing center.

BMSC does not allow the grandfathering of credentials in order to earn and/or maintain a HCS-H credential. All HCS-H credential holders must pass their initial certification with a passing score, and maintain their credential through annual recertification requirements. HCS-H credential holders who do not perform the respective action by the anniversary of their certification date will have their credential placed in an inactive status. If the recertification requirements have not been met within 90 days of being placed on inactive status, the credential will be revoked.

4 Preparing for HCS-H certification

Study Process and Materials

Because the HCS-H exams are skill-based, a coder doing excellent work every day should be prepared for the exam without the need for additional study. We do, however, recognize people's desires for reference materials to brush up on skills and concepts.

BMSC publishes various study resources, including a study guide specific to HCS-H certification with dozens of examples and sample questions. In conjunction with our publishing partner, DecisionHealth®, we offer a larger resource book that follows the coding manual chapters and also offers sample questions. BMSC recommends the following products as optional tools to help with examination preparation:

- Study Guide for HCS-H Certification
- Annual Home Health and Hospice Coding Summit
- Complete Home Health ICD-10-CM Diagnosis Coding Manual, current version
- Online university and hospice coding pathway courses
- Online university and hospice coding, documentation, and hospice wizards

* The candidate is not required to utilize any of the above tools in order to sit for the exam.

Test Format

The HCS-H examination is comprised of 80 multiple choice questions.

The HCS-H certification examination is administered via a computer based testing center or paper-based testing. Paper-based testing is only administered at a BMSC pre-approved live event.

The allotted time to complete the HCS-H examination is 3.0 hours. It may take some candidates less than the allotted time to complete the examination.

There are no scheduled breaks during the examination, although you are allowed to take a break if needed. If you take a break, your exam clock continues to count down.

Item Development Overview

HCS-H examination:

- Is annually discussed and reviewed by BMSC's hospice specialty board of advisors during an in-person work session where members of the Board, SME's, and BMSC staff are present
- Is created and/or revised to reflect the most accurate coding guidance and current code-set
- Is independently reviewed and validated for clarity and accuracy by current HCS-H credential holders across the United States prior to release to general testing population
- Is monitored through psychometric analysis
- Satisfied the test specifications of the HCS-H Test Blueprint

Items Allowed with the Examination

You must bring the following resources with you to the HCS-H exam. No other resources will be allowed for the examination.

- Two forms of identification; one form must be a government issued photo ID
- Current coding manual
- Candidate ID number

You may take only <u>ONE</u> of the following manuals into the testing room:

- *Complete Home Health ICD-10-CM Diagnosis Coding Manual, 2019*. Available for purchase in the DecisionHealth <u>online store</u>.
- Complete Home Health ICD-10-CM Diagnosis Coding Manual, 2018
- Any other vendor's ICD-10 coding manual (2018 or 2019 Edition)

In addition to the above referenced coding manual, **for the HCS-H exam**, you may take the FY2019 official guidelines provided <u>here</u> into the testing room. Please note, only the watermarked guidelines provided through this link will be allowed into the testing room as an additional resource.

*Note, BMSC recommends a current code year, 2019, coding manual be used when taking the HCS-H exam.

Electronic code look-up systems are NOT allowed in the testing room. A hard copy coding manual is the only allowable resource.

A hard copy coding manual and watermarked guidelines are the only allowable resources.

Post-It notes, loose papers or any other papers attached by any means are NOT allowed.

Annotations written on the coding manual pages including the 'notes' pages at the back of the manual are allowed BUT must be free of any notes containing coding rules and guidelines from other reference materials (for example, Coding Clinic, Home Health ICD-10-CM Coding Answers and similar materials).

The testing center staff (proctor) reserves the right to deny code books that contain excessive writing and information that may give the candidate an unfair advantage.

You may not share reference books with other test takers.

Extra copies of the coding manual will not be provided.

All coding manuals will be inspected prior to admittance to the testing area

All coding manuals will be inspected prior to candidate's leaving the testing area, to ensure no test questions or answers have been recorded.

Candidates will receive two sheets of scratch paper prior to beginning the examination. Scratch paper will be collected and counted from candidate prior to candidate leaving the testing area.

Exam Blueprint

The following is the examination blueprint for the HCS-H certification examination. The Domains outline the primary areas by which the examination questions are constructed. These domains were identified in BMSC's job task analysis as the primary competencies/tasks of a hospice coding specialist.

Domain I: Collect patient documentation (8%)

Tasks associated with this domain include:

- Obtain patient documentation

- Ensure the completeness of the patient documentation

Domain II: Assign accurate diagnosis codes (71%)

Tasks associated with this domain include:

- Review diagnosis codes
- Assign accurate diagnosis codes from the classification system
- Sequence the diagnosis codes
- Determine the terminal diagnosis will be listed according to CMS guidelines
- Validate diagnosis codes using coding conventions and guidelines
- Ensure that the patient documentation supports the assigned codes

Domain III: Collaborate with clinicians, physicians and/or managers/administrators (11%)

Tasks associated with this domain include:

- Query clinicians, physicians, or managers/administrators about incomplete information, additional information, or documentation deficiencies
- Obtain clinician agreement with code assignment and sequencing
- Train clinicians, physicians and/or managers/administrators about changes to coding protocols

Domain IV: Ensure that all activities are done in a legal and ethical manner that supports agency policy, regulatory and professional guidelines (10%)

- Maintain patient confidentiality, privacy, and security
- Conduct activities in a legal, ethical, and professional manner
- Archive and retrieve patient documentation related to the medical record

5 How to Register for the HCS-H Certification Examination

You can take the HCS-H exam at a PSI computer-based testing center or at a BMSC approved live event

Registering for the exam at a PSI Testing Center

1. Go to ahcc.decisionhealth.com and click on 'how to get certified'

2. Click on the electronic registration page

3. Select the Home Care Coding Specialist – Hospice (HCS-H) Certification examination for the price of $329.00

4. Click on "Add to Cart"

5. Verify the information on the shopping cart page and click on "Proceed to Checkout"

6. Login if you already have an account or register a new account

7. Indicate your payment information in the space provided by selecting "Credit Card"

8. Enter your credit card information

9. Submit the registration information electronically via the place order button

10. Once your registration information has processed, you will receive a confirmation e-mail

11. The email will be sent to the email address you've provided on your examination registration

12. By registering to take the exam at PSI, the candidate will take the exam in an electronic format

Registering for the exam at a BMSC-Approved Live Event

All BMSC examinations that are offered at a live event have been pre-approved by BMSC prior to the date of the event. If you elect to take your examination at a BMSC approved live event, you will be taking a paper examination and a BMSC approved proctor has already been assigned.

Go to ahcc.decisionhealth.com and look at the Training & Events page to see events where the certification examination will be held and find out how to register for those events. In the case that you can't find the event you're looking for, please call BMSC customer care at: 855-225-5341. You will receive a confirmation email once your payment is processed and an examination will be waiting for you at the testing location (you've indicated on your registration form).

BMSC Exam Refund, Extension, & Cancellation Policy

If you decide to cancel your BMSC exam registration, you must notify DecisionHealth within 30 days prior to your scheduled exam date for a full refund. Candidates registered for BMSC exams have 90 days from the day they register to take an initial or retake exam. If you do not take the exam within those 90 days and do not cancel within the allowed timeframe, your registration fee is non-refundable and non-transferable. You can be granted an extension, but only under the following special circumstances:

- Natural disaster: In the event of bad weather, a natural disaster, or another emergency (for example, a test center power outage)

- Medical or Personal Emergency: A medical or personal emergency is an unplanned event that prevents you from taking the exam. A medical or personal emergency may apply to you or one of your immediate family members; spouse, child, or parent as defined by the Family Medical Leave Act. Documentation (i.e. doctor's note, emergency room forms, obituary) showing why you could not take your exam will be required.

If the candidate has met one of the above special circumstances, requests an extension for an exam or certification eligibility period, and is approved the extension, the fees that apply are:

1. First Approved Request for an Extension–$75 (valid for 45 days)

2. Second and Final Approved Request for an Extension–$150 (valid for an additional 30 days). No additional extension will be authorized.

Also note, once a candidate has taken an exam, whether the score is pass or fail, the registration fee is non-refundable.

Cancellations made within **3 business days** of a scheduled exam date at a **PSI testing center** are subject to a $72 service fee. Registrants who do not show up for the exam at PSI or at an onsite event, and who do not cancel before their scheduled exam date are liable for the full registration fee. Contact customer service to cancel an exam at 1-855-CALL-DH1 or *customer@decisionhealth.com*.

6 Test Day

Candidates taking the test at a live event or computer based testing center should report to the testing site 30 minutes before the exam start time to be signed in and have your reference materials checked. A government-issued photo ID is required for sign-in. Pencils and scratch paper will be provided. Once you enter the testing room, you should not leave until the exam has finished.

Before the exam is administered, the proctor will review the exam rules to follow while the test is in progress.

There are no scheduled bathroom breaks during the exam. If a candidate leaves, the break is allowed, but time does not stop.

Behavior Not Allowed

Candidates who partake in any of the following types of behavior will be dismissed from the test-taking venue and the scores will not be validated. Examples of misconduct include, but are not limited to

- Using electronic communication equipment (e.g., PDA's, calculator, cell phones, smart watches, electronic code look up systems)
- Giving or receiving help during the examination
- Committing fraud by attempting to take the exam for someone else
- Using notes or aids that are not allowed
- Attempting to copy or remove test materials
- Engaging in abusive, disturbing or uncooperative behavior.

Testing Issues

Occasionally, testing irregularities, including but not limited to administrative errors, unauthorized availability of test content or disruptions in test administration, occur and must be dealt with.

If a testing issue occurs, BMSC will perform an investigation. BMSC may opt to score the test or invalidate the test score. When appropriate, BMSC will give (eligible) affected test-takers the opportunity to retake the exam as soon as possible. Affected candidates will be told the reason for the cancellation of their test and options for retest.

Notification of Examination Results

Candidates who take their examination at a live event will receive a results letter via USPS within 6 weeks of taking their examination. Candidates who take their examination at a computer based testing center will receive a pass/fail result and score report immediately following the examination.

Each question on the HCS-H examination is mapped to a domain item on the HCS-H examination test blueprint. Every HCS-H examination candidate should receive a copy of their score report from their examination. The score report provides the candidate's (raw score) number of questions answered correctly on the examination, as well as the percentage of questions answered correctly within each content area. This score report will assist candidates in evaluating their performance and identifying areas of competency and deficiency.

BMSC is responsible for the validity and integrity of the scores reported. Occasionally, computer malfunctions or candidate misconduct may cause a score report to be suspect. BMSC reserves the right to void or withhold examination results if, upon investigation, violation of BMSC's regulations is discovered. Candidates are expected to fully cooperate with any investigation. Please see appeals section of this handbook for more detailed information.

In order to protect the integrity of the examination, BMSC will not release a candidate's specific answers to items on the HCS-H certification examination, nor will BMSC discuss rationale for correct answers to examination items on the HCS-H certification examination.

7 After the examination

Successful candidates:

- Become an HCS-H certified coder.
- Receive a certificate of recognition of their status as a Home Care Coding Specialist – Hospice (HCS-H).
- Receive a credential lapel pin.
- Will be listed in the Directory of Certified Credential Holders as a Home Care Coding Specialist-Hospice on the BMSC website.

Unsuccessful candidates:

- Receive an invitation to retake the HCS-H examination.
- All retakes are $99 and will be taken at the computer based testing site.

Feedback on Your Experience

You may receive an email asking you to complete a Post-Exam survey. We encourage you to complete the survey.

Confidentiality Policy

All test results are released directly to you and will not be released to anyone else. If you are taking the test at an event, please allow four to six weeks for notification of your results. If you are taking the test at a computer based testing center, your results are provided at the completion of the exam.

All candidates who become certified coders may have their names published in a newsletter, website or other public forum.

BMSC has adopted policies and procedures to protect the confidentiality of examination candidates. BMSC staff members will not discuss pending examination applications with anyone but the candidate and will not discuss a candidate's scores by telephone or fax due to identification security issues. BMSC will discuss pending examination applications and score results by

- US mail upon a signed request by the candidate and addressed to the Chief Executive Officer

    OR

- Electronic transmission received from the candidate and the email address is shown in the records of BMSC as being provided by the candidate as their official electronic transmission address

BMSC will not release exam results to educational institutions or employers unless authorized by the candidate.

8 Maintaining your Certification

Purpose

The HCS-H recertification (maintenance of certification) program ensures that HCS-H certified professionals demonstrate ongoing competence in the domain areas in which they are certified, through either maintenance or enhancement activities. For the purposes of recertification (maintenance of certification), BMSC further defines maintenance and enhancement activities as follows:

Maintenance: Completion of educational programs that provide updated training and skills to allow continued competence in hospice coding by earning the required number of continuing education units (CEUs) in any of the HCS-H Domains.

Enhancement: Completion of educational programs that result in expanded knowledge and skills to enhance professional growth in hospice coding by earning additional CEUs in a specific HCS-H Domain. This is beyond the requirement to maintain certification.

Receiving the HCS-H Credential Means

- Demonstrating commitment and expertise to the professional area of hospice coding, a dedication to quality healthcare, and a need to establish high standards in managing confidential health information.

- Offering ongoing value to your profession and employer through continuation of your personal education, allowing you to maintain your expertise and contribute at the highest levels.

- The HCS-H credential signifies experience and knowledge, and validates professional competence for employers, consumers, and yourself.

What Are the Biggest Benefits of Recertification (Maintenance of Certification)?

- Return on investment from the high value of being HCS-H certified

- Professional prestige helps you remain competitive in a tough job market

- Demonstration of your ongoing commitment and competence in hospice coding

- Networking opportunities with similarly credentialed peers who share your level of expertise

- Reasonable recertification fees

To Recertify You Must:

1. Obtain the required number of CEU's during your recertification cycle.

2. Complete your mandatory annual coding self-reviews (self-assessment).

3. Participate in accepted and qualified CEU activities.

4. Report your CEU's on time.

5. Document your CEU activity for auditing.

6. Ensure your recertification fee is paid.

Recertification Process

Twenty (20) CEUs, including two (2) mandatory annual hospice self-reviews (self-assessments) are required annually. Each mandatory annual hospice self-review is worth five (5) CEUs toward the total CEU requirement.

Recertification Cycle

The recertification cycle for an HCS-H credential holder begins the day after the HCS-H credential is awarded and is active for one calendar year. There are 3 important dates to remember as an HCS-H credential holder. 1.) Your original certification date, the date you passed your initial exam. 2.) Your anniversary date, which denotes the beginning of your 12 month cycle, and 3.) Your expiration date, which denotes the end of your current 12 month cycle. It is important that all annual CEUs occur between the anniversary date and the expiration date.

See example below:

Your Credential	Your Certification Date (as listed on your BMSC Certificate)	Recertification Cycle – Year 1	Recertification cycle – Year 2
HCS-H	3-15-13	3-16-13 through 3-15-14	3-16-14 through 3-15-15

In the example above: your original certification date is 3-15-13. Your anniversary date is 3-16-13. Your expiration date is 3-15-14.

Your CEUs must be earned for that 12 month cycle between 3-16-13 (anniversary date) through 3-15-14 (expiration date). The next year, your anniversary date is 3-16-14. Your expiration date is 3-15-15, so all your CEUs for that 12 month reporting cycle must be earned between 3-16-14 (anniversary date) and 3-15-15 (expiration date).

Qualifying Continuing Education Activities and Calculation of CEU's

Continuing Education (CE) Content

CEUs must be earned within your current 12 month recertification cycle and must be relevant to hospice and coding as presented in the HCS-H Domains to be eligible for CE credit. Eighty (80) percent of all CEUs must be earned within the HCS-H Domains (see Appendix A). The remaining twenty (20) percent can include participation in CE activities on hospice topics not directly relevant to the HCS-H.

Calculation of CEU's

Calculation of CEUs is based upon clock hours. One (1) CEU is given for each 60 minutes of attendance or participation that is fixed in length. Fractional parts of an hour less than 45 minutes in duration will not be considered a full hour credit. Examples are; a program that is 2 ½ hours in length is equivalent to two CEUs. A program that is 2 ¾ hours in length is equivalent to three CEUs.

CE Activities

1. Participation in educational programs on topics relevant to the HCS-H.

    a. Educational portions of hospice coding meetings (national convention, state, local, or regional meetings) — *one (1) CEU for each 60 minutes of participation*

    b. Educational portions of programs of other relevant professional associations—*one (1) CEU for each 60 minutes of participation*

    c. Educational portions of programs sponsored by organizations or vendors on topics that maintain, update, or enlarge knowledge and skills relevant to the hospice coding profession—*one (1) CEU for each 60 minutes of participation*

    d. Telecommunications and webinars relevant to the hospice coding profession—*one (1) CEU for each 60 minutes of participation*

2. Publication and presentation of material relevant to hospice coding.

    a. Publication is the development of an original work, relevant to the hospice coding profession, reproduced by written or electronic means for general dissemination to the public (unless required as part of work responsibilities; see non-qualifying section.

        • Author of a textbook, workbook, or manual—twenty (20) CEUs

        • Editor of a textbook, workbook, or manual—ten (10) CEUs

        • Author of an article in a home health coding journal—five (5) CEUs

        • Author of a chapter in a textbook, workbook, or manual—ten (10) CEUs

        • Editor of a home health coding professional journal—five (5) CEUs

        • BMSC course writing (for example, coding on-line library course)—ten (10) CEUs

        • Author of an educational article in a local or state newsletter—two (2) CEUs

        • Reviewer of book manuscripts prior to publications—one (1) CEU per chapter

    b. Presentation is the development of an original work delivered to an audience.

        • Speaker at an educational program—one (1) CEU for each 60 minutes of podium time, with a maximum of five (5) CEUs allowed per educational program

        • Panel participant at an educational program—one (1) CEU for each 60 minutes of podium time, with a maximum of five (5) CEUs allowed per educational program

3. Independent study activities relevant to the hospice coding profession.

    a. Enrollment in one or more BMSC study program modules *(CEU's pre-determined by BMSC)*

    b. Enrollment in home study programs relevant to HCS-H core education content areas from organizations other than BMSC *(BMSC prior approval required)*

    c. BMSC post-test offerings accompanying an *Association of Home Health Coding and Compliance (AHCC) Ezine* article or book published by DecisionHealth *(CEU's pre-determined by BMSC)*

    d. Advanced research (for example, reading and analyzing material above and beyond one's knowledge of the subject matter) in a hospice coding topic area to support activities associated with an expert panel, workgroup, or task force of BMSC or its affiliate—*one (1) CEU per each year*

4. Item writing

    • Item writing for BMSC's certification exams (CEU's pre-determined by BMSC)

5. Other activities

    • Substantive oversight and involvement —five (5) CEU's with a maximum of ten (10) CEU's allowed in each recertification cycle

    • Substantive oversight and involvement includes, but is not limited to:

        • Substantive oversight and involvement includes, but is not limited to:

        • Creating an ICD-10-CM training plan and schedule of activities

        • Visiting BMSC/AHCC exhibits at a national or state meeting—one (1) CEU per meeting

        • Participation in a BMSC volunteer leader conference or work group (CEUs pre-determined by BMSC)

        • Internet educational offerings relevant to BMSC core education content areas (BMSC prior-approval required)

- Activities defined by the guidelines for approval of CE programs for national, state, local, and regional hospice associations
- Exceptional events recognized by BMSC

Non-Qualifying Continuing Education Activities

Examples of activities that do not qualify for CEU's are as follows. The list is illustrative and not intended to be all-inclusive.

- Responsibilities that fall within the normal parameters of an individual's job description, including, but not limited to, the following: (1) staff meetings; (2) in-services; (3) preparation for and/or participation in accreditation and licensure surveys; (4) preparation of procedure, policy, or administrative manuals; (5) training hospice coders; (6) participation in career day activities; (7) development of employee and staff training materials
- Published materials and/or presentations developed as a direct part of an individual's employment
- Serving in a volunteer leadership role for BMSC or any other professional organization
- Instructing or teaching a class within the normal parameters of an individual's job description

Reporting your CEU's

To recertify, you will report your CEU's and pay the recertification fee online at the BMSC website.

When to Report

You should report your CEUs in your CEU tracker and complete the online recertification process no later than your current expiration date which is located above your tracker

You must report your CEUs and complete the recertification process no later than three (3) months into the following recertification period. Your certification will be placed on inactive status during the 90 day grace period and you will not be able to promote yourself as a credential holder in good standing during the 90 day late period.

Your certification will be revoked after the 90 day grace period if you have not recertified.

Fees (plus any applicable late fees):
- Initial Registration Fee for Certifying Exam – $329.00
- Annual recertification CEU requirements and maintenance fee - $229.00

*A 15% late fee will be assessed, in addition to the recertification fee, if renewal is not received by expiration date, but is within the 90 day grace period.

Note: The initial certifying exam fee and the recertification annual maintenance fee includes a complimentary membership enrollment in the Association of Home Care Coding and Compliance.

Certification Status

Status Types

    a.   Active: Credential holder meets all recertification requirements, including recertification fee, within current certification cycle

    b.   Inactive: Failure to complete all recertification requirements, including the recertification fee, within the current certification cycle but is within the 90 day (late) grace period

    c.   Revocation: Failure to complete all recertification requirements, including the recertification fee, within the current certification cycle and is 91 days or greater past expiration date.

> ** BMSC provides a three (3) month window for credential holders who have been placed on inactive status to meet recertification requirements and report CEUs. Therefore, any credential holder who has not met recertification requirements by 90 days past the expiration of their certification date will have their credential revoked. The credential may not be used during the period of inactive status. The recertification fee plus a 15% late fee must be paid to re-activate a credential to active status.*

    d.   Revoked:

        I.   Failure to complete and report recertification requirements.

        II.   BMSC Appeals Committee or AHCC Professional Ethics Committee decision regarding misconduct.

> ** Credential holders who do not report their CEU's will have their credential revoked. Individuals may not use the applicable credential once it has been revoked.*

Reinstatement of Credentials

Individuals whose credentials have been revoked can apply for reinstatement and be returned to active status by completing the Intent to Reinstate HCS-H Credential application, paying all appropriate fees, and meeting the requirements for recertification.

BMSC provides one way to reinstate a revoked credential:

Reactivate by Exam

    a.   Retake the applicable certification exam

After an inactive certification has lapsed beyond the 90 day grace period and has been revoked, the only way to be reinstated and returned to active status is to retake the applicable certification exam.

An individual whose credential is reinstated after passing the initial exam will be officially notified by BMSC that recertification requirements have been met. Upon official notification, the individual will be assigned a one-year recertification cycle beginning the date of official notice of reinstatement.

9 Additional Recertification Processes

Audits

Each year a percentage of recertified credential holders are randomly selected for audit. Individuals selected for audits will be notified by email and required to submit verifiable documentation (for example, certificates of attendance or similar materials) for each activity listed on their CEU tracker by the due date specified on the audit notification email.

Verifiable documentation can include certificates of attendance, program materials, or other information provided by the program sponsor that verify program date, length, and subject matter (that is, CEU certificate, agenda, program outline, handout, meeting summary, or meeting transcript).

It is therefore recommended that CEU participants retain all records in their files for at least one year following the cycle end date. Individuals who fail to respond to the audit request by the specified due date or are found to have submitted false information on their recertification form may be denied recertification.

Waiver of CE Requirements

BMSC may for good cause waive or reduce the CEU requirement. Certificants may request a temporary or permanent waiver by submitting a written request to BMSC for consideration prior to revocation.

    a. Temporary Waiver—Temporarily waive recertification requirements due to extenuating circumstances or hardships (for example, financial hardship, illness, unforeseen circumstances, and natural catastrophes)

    b. Permanent Waiver—Permanently waive recertification requirements as a result of full-time retirement.

Extensions

You may be granted an extension, but only under the following special circumstances:

- Natural disaster: In the event of bad weather, a natural disaster, or another emergency (for example, a test center power outage)

- Medical or Personal Emergency: A medical or personal emergency is an unplanned event that prevents you from taking the exam. A medical or personal emergency may apply to you or one of your immediate family members; spouse, child, or parent as defined by the Family Medical Leave Act. Documentation (i.e. doctor's note, emergency room forms, obituary) showing why you could not take your exam will be required.

If the candidate has met one of the above special circumstances, requests an extension for an exam or certification eligibility period, and is approved the extension, the fees that apply are:

1. First Approved Request for an Extension–$75 (valid for 45 days)

2. Second and Final Approved Request for an Extension–$150 (valid for an additional 30 days). No additional extension will be authorized.

Appeals

Individuals whose credential has been revoked or whose application for reinstatement has been denied may appeal to BMSC by completing the Appeals Form located on the AHCC/BMSC website.

Recertification Policy Rationale

BMSC recertification policy includes the rationale for the recertification time interval. The one year (annual) interval was determined by BMSC's Board of Directors to be appropriate for a home health and hospice coding specialists because the ICD-10-CM code set and official coding guidelines are updated yearly, every October 1st. Because the major reference tool for a hospice coding specialist is subject to change every year, a coder's competency should be evaluated every year in accordance with the dynamic nature of the official guidance.

10 Code of Conduct

Introduction

The Board of Medical Specialty Coding & Compliance's (BMSC) Ethical Principles and Code of Conduct (Ethics Code) consists of a statement of underlying principles and specific Ethical Standards. The General Principles are goals that we aspire to and are guides to Professional Coders striving for the highest ideals in their profession. The General Principles are not themselves rules, they should be considered by Professional Coders in arriving at an ethical course of action. They are also statements of a Professional Coders' obligation to maintain the very highest standards of competence morality and dignity. The Ethical Standards establish more detailed guidelines for conduct as coders. Most of the Ethical Standards are written broadly, in order to apply to Professional Coders in varied roles. The Ethical Standards are not exhaustive. The fact that an Ethical Standard does not specifically address a given conduct does not mean that the conduct is necessarily either ethical or unethical.

Members of the profession are responsible for maintaining and promoting ethical standards and practices within their profession and in their interactions with other healthcare professionals. BMSC-certified coders are expected to uphold these standards, the objectives of BMSC and abide by BMSC bylaws. Actions that violate the standards of the Ethics Code may lead to revocation of the certification. In addition, when notified of a violation, BMSC reserves the right to report a Professional Coder to an employer or appropriate governmental agency.

This Ethics Code applies only to Professional Coders' activities that are part of their educational or professional roles as coders. Areas covered include, but are not limited to, the practice of coding; teaching; supervision of trainees; public service; policy development; organizational consulting; testimony; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of coders, which is not outlined in the Ethics Code.

The modifiers used in some of the standards of this Ethics Code (e.g., reasonably, appropriate, potentially) are included in the standards when they would (1) allow professional judgment on the part of Professional Coders, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by coders, or (4) guard against a set of rigid rules that might be quickly outdated. As used in this Ethics Code, the term reasonable means the prevailing professional judgment of Professional Coders engaged in similar activities in similar circumstances, given the knowledge the Professional Coder had or should have had at the time.

In the process of making decisions regarding their professional behavior, Professional Coders must consider this Ethics Code in addition to applicable laws. In applying the Ethics Code to their professional work, Professional Coders may consider other materials and guidelines that have been adopted or endorsed by professional coding organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than is required by law, Professional Coders should meet the higher ethical standard.

Professional Coders are committed to increasing accurate documentation, correct coding, and proper billing. They are committed to the growth of professional knowledge and to the use of such knowledge to improve the legal and financial situation of medical practitioners or employers. This Ethics Code provides a common set of principles and standards upon which Professional Coders build their professional work.

This Ethics Code is intended to provide specific standards to cover most situations encountered by Professional Coders. The development of a set of ethical standards for coders work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by employers, employees, and colleagues; and to consult with others concerning ethical problems.

General Principles

General Principles, as opposed to Ethical Standards, are an aspiration, something we strive toward. Their intent is to guide and inspire coders toward the very highest ethical ideals of the profession. General Principles represent the underlying thoughts and ideals of our Ethical Standards.

Principle A: Attitude

Professional Coders strive to benefit those with whom they work and take care to do no harm. In their professional actions, Professional Coders seek to safeguard the welfare and rights of those with whom they work and other affected persons and entities. When conflicts occur between obligations or concerns, they attempt to resolve these conflicts in a responsible fashion. Because a Professional Coder's professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.

Principle B: Duty

Professional Coders establish relationships of trust with those with whom they work. They are aware of their professional responsibilities to society and to the specific situations in which they work. Professional Coders uphold professional conduct, clarify their professional obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Professional Coders consult with, refer to, or cooperate with other professionals to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their employers and colleagues' professional conduct.

Principle C: Integrity

Professional Coders seek to promote accuracy, honesty, and truthfulness in billing and coding. In these activities Professional Coders do not steal, cheat, or knowingly engage in fraud, subterfuge, or intentional misrepresentation of fact. Professional Coders strive to maintain their integrity and to avoid unwise or unclear commitments.

Principle D: Respect

Professional Coders respect the dignity and worth of all people, and the rights of individuals to privacy and confidentiality. Professional Coders are aware that special safeguards may be necessary to protect the rights and welfare of patients, clients and employers. Professional Coders are aware of and respect cultural, individual differences including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups.

11 Ethical Standards

Resolving Ethical Issues

- **Misuse of Work**
  If Professional Coders learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse.

- **Conflicts Between Ethics and Law**
  If a Professional Coders ethical responsibilities conflict with law, regulations, or payor policy, Professional Coders will take steps to resolve the conflict. If the conflict is not solved, Professional Coders will abide by the law, regulations, or other legal authority.

- **Conflicts Between Ethics and Organizational Demands**
  If the requirements of an organization for which they are working conflict with this Ethics Code, Professional Coders will make every attempt to resolve the conflict and still follow the Ethics Code.

Competence

- **Boundaries of Competence**
  Professional Coders will provide services and teach only within the scope of their competence, based on their education, training, study, or professional experience.

- **Lifelong learning**
  Professional Coders will work to develop and maintain their competence.

Human Relations

- **Discrimination**
  In their work-related activities, Professional Coders do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

- **Sexual Harassment**
  Professional Coders do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the Professional Coder's activities or and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and that (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts.

- **Other Harassment**
  Professional Coders do not knowingly engage in behavior that is harassing or demeaning to others due to factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.

- **Avoiding Harm**
  Professional Coders take reasonable steps to avoid harming their clients or employers or others with whom they work.

- **Conflict of Interest**
  Professional Coders will not take on a professional role when personal, professional, legal, financial, or other interests that could reasonably be expected to (1) impair their objectivity, competence, or effectiveness or (2) expose the organization to harm or exploitation.

  Professional coders will not accept any gift, gratuity, payment or other inducement from anyone that would call into question the objectivity and/or validity of their work product.

Privacy and Confidentiality

- **Maintaining Confidentiality**
  Professional Coders have a primary obligation and take reasonable precautions to protect confidential information within the limits of law or established by institutional rules.

- **Minimizing Intrusions on Privacy**
  Professional Coders discuss confidential information obtained in their work only for appropriate professional purposes and only with persons clearly concerned with such matters.

- **Disclosures**
  Professional Coders may disclose confidential information with the appropriate consent of the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law. Professional Coders disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose.

Advertising and Other Public Statements

- **Avoidance of False or Deceptive Statements**
  Public statements include but are not limited to paid or unpaid advertising, certification applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or public comments such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. Professional Coders do not make false, deceptive, or fraudulent statements concerning their training, experience, or competence; their credentials; or their institutional or association affiliations.

- **Media Presentations**
  When Professional Coders provide public advice or comment verbally, in print, by the internet, or other electronic transmission, they take precautions to ensure that statements are based on their professional knowledge, training, or experience, are in accord with law or policy, and are ethical.

Record Keeping and Fees

- **Fees and Financial Arrangements**
  A Professional Coder shall make sure all their charges are clearly stated in an agreement specifying compensation and billing arrangements. All fee practices will be consistent with law and will not misrepresent costs or charges.

- **Accuracy in Reports to Payors and Funding Sources**
  In their reports to payors for services and in coding and billing activities, coders shall take reasonable steps to ensure accurate reporting.

Education and Training

- **Accuracy in Teaching**
  Professional Coders take reasonable steps to ensure that course materials are accurate regarding the subject matter to be covered, basis for evaluating progress, and the nature of course experiences. When teaching or training, Professional Coders will present all information accurately, without bias and based upon reputable sources.

- **Student Disclosure**
  Professional Coders will take every possible step to ensure the privacy of any grades or other student information and will establish a timely and specific process for providing feedback to students.

- **Standard Tests**
  Should Professional Coders have access to any standard tests or certification exams, they will keep such information confidential and not release confidential information concerning the tests, the answers or any information concerning the scoring or development of the test or exam. Discussion of items pertaining to and included in the BMSC tests is permitted for the sole purpose of test development as directed by BMSC.

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Privacy Policy Statement

DecisionHealth the sole owner of BMSC is committed to protecting your privacy and hold our relationship with users in the highest regard. This policy describes the ways that personally identifiable and anonymous information about our credential holders, online users, event registrants and print subscribers is gathered, our information sharing practices, and how credential holders, online users and print subscribers may request changes to the way this information is shared.

Personally Identifiable Information We Collect and Use

Information Collection

DecisionHealth® is the sole owner of the information collected on the BMSC website. DecisionHealth® collects information from our users at several different points on our website.

Registration

During registration a user may be required to give contact information (such as name and email address). We use this information to contact the user about services on our site for which he/she has expressed interest. Some information is optional while other information may be required. In some cases a unique identifier (such as, username and password) may be required in order to obtain further benefits from our website.

Information Use

Our primary goal in collecting personal information is to provide you with the best and most useful content and services. In addition, we may use the information collected from you to contact you from time to time regarding our products and/or services. At all times you have the right to request that we cease contacting you by 'opting out' of our communications.

Cookies

Like other websites, DecisionHealth sites use cookies to improve your experience with our online content. For instance, we may use a cookie to identify members so they don't have to re-enter their email address and password when they come to our sites. We use both session ID cookies and persistent cookies which enable us to track and target the interests of our users to improve the content on our site. Usage of cookies tells us nothing about who you are and is no way linked to any personally identifiable information. By adjusting your settings on your browser, you may elect not to allow cookies to be collected. However, it is likely that some areas of the site will not function properly if you do so.

Log Files

Like most standard website servers we use log files. This includes internet protocol (IP) addresses, browser type, internet service provider (ISP), referring/exit pages, platform type, date/time stamp, and number of clicks to analyze trends, administer the site, track user's movement in the aggregate, and gather broad demographic information for aggregate use. IP addresses, etc. are not linked to personally identifiable information.

Third Party Advertising

Some of our advertisers use third-party companies to serve their advertisements on our sites and, in some cases, in our HTML-formatted newsletters. Often, these third-party advertising companies employ cookie and pixel tag technologies to measure the effectiveness of web and email advertisements. We do not give any personally identifiable information to them as part of this relationship. Use of their tracking technology is subject to their own privacy policies.

Legal Disclaimer

Though we make every effort to preserve user privacy, we may need to disclose personal information when required by law wherein we have a good-faith belief that such action is necessary to comply with a current judicial proceeding, a court order or legal process served on our website.

Aggregate Information (non-personally identifiable)

We may share aggregated demographic information with our partners, third parties for marketing, promotional, and other purposes. This is not linked to any personally identifiable information.

Links

Our websites may contain links to other sites. Please be aware that DecisionHealth is not responsible for the privacy practices of such other sites. We encourage our users to be aware when they leave our site and to read the privacy statements of each and every website that collects personally identifiable information. This privacy statement applies solely to information collected by this website.

Surveys & Contests

We may provide you the opportunity to participate in contests or surveys on our site. Participation in these surveys or contests is completely voluntary and the user therefore has a choice whether or not to disclose this information. The requested information typically includes contact information (such as name and email address). Contact information will be used to notify the winners and award prizes. Anonymous Survey information will be used for purposes of monitoring or improving the use and satisfaction of this site. Users' personally identifiable information is not shared with third parties unless we give prior notice and choice. Though we may use an intermediary to conduct these surveys or contests, they may not use users' personally identifiable information for any secondary purposes.

Changing Your Privacy Options

Update Your Registration Information

Update Your Newsletter Subscriptions

Opt-Out

Notification of Changes

This Privacy Policy may be modified from time to time. If there is a material change in our privacy practices, we will post those changes to this privacy statement. If there is a significant change, we will indicate on our sites that our privacy practices have changed and provide a link to the new privacy statement.

Questions

If users have any questions or suggestions regarding our privacy policy, you can contact us at:

DecisionHealth
Two Washingtonian Center
9737 Washingtonian Blvd., Suite 502
Gaithersburg, MD 20878

Phone: 855-CALL-DH1

13 Proprietary Rights

All proprietary rights in the examinations, including copyrights and trade secrets, are held by BMSC. In order to protect the integrity of the examinations and to ensure the validity of the scores reported, candidates must adhere to strict guidelines regarding proper conduct in handling copyrighted proprietary examinations. Any attempt to reproduce all or part of the examinations, including, but not limited to, removing materials from the examination room, aiding others by any means in reconstructing any portion of the examinations, selling, distributing, receiving or having unauthorized possession of any portion of the examinations, is strictly prohibited by law. Alleged copyright violations will be investigated and, if warranted, prosecuted to the fullest extent of the law. It should be noted that all examination scores may be invalidated in the event of this type of suspected breach. Candidates may not write on any examination materials distributed by or belonging to BMSC unless authorized by the proctor / test administrator.

A candidate can be disqualified from taking or continuing to sit for an examination, or from receiving examination results, or the candidate's scores might be cancelled, if BMSC determines through proctor observation, statistical analysis, and other evidence that the candidate's score may not be valid or that the candidate was engaged in collaborative, disruptive, or other unacceptable behavior during the administration of the examination.

Examination (pass / fail) results are confidential and will not be disclosed to anyone without candidate consent, unless directed by valid and lawful subpoena or court order. If you would like your examination results to be released to a third party, you must provide BMSC with a written request that specially identifies the types of details (e.g., examination date, pass / fail status, etc.) about the examination results that the third-party should receive.

The HCS-H exam content does not require scoring by judges. The HCS-H exam content utilizes a multiple-choice format, with only one correct response for each item. All candidates must pass the initial certification exam to be awarded an HCS-H credential. No HCS-H credential holder is granted certification without having to meet the examination requirement established for certification.

14 Special Accommodations for BMSC Examination Candidates under the Americans with Disabilities Act (ADA)

BMSC will comply with the ADA and will provide reasonable accommodations for individuals with disabilities that substantially limit one or more major life activities. "An individual with a disability" is one who:

- Has a physical or mental impairment that substantially limits that person in one or more major life activities; OR

- Has a record of such a physical or mental impairment; OR

- Is regarded as having such a physical or mental impairment.

"Major life activities" are activities that an average person can perform with little or no difficulty (for example walking, talking, hearing, seeing, and performing manual tasks).

"A qualified individual with a disability" is one who:

- With a disability, satisfies the requisite skill, experience, education, and other requirements of the service, program, or activity, OR

- With or without reasonable accommodation, can perform the essential functions of the service, program, or activity.

NOTE: To be protected under the ADA, a person must be a "qualified individual with a disability."

Candidate Responsibilities

1. Candidates must meet the stated eligibility requirements for the examination for which the candidate has applied.

2. Candidates requesting accommodations under the ADA must complete and submit the form labeled "Request for Accommodations under the Americans with Disabilities Act (ADA)" located on the BMSC website.

3. Candidates must provide or arrange to provide documentation verifying the disability and supporting the request for accommodations.

4. Supporting documentation verifying the disability and the candidate's need for specific accommodations must be completed by a licensed professional or certified specialist appropriate for the disability and must include:

    a. A formal diagnosis using professionally recognized diagnostic criteria

    b. A discussion of necessary accommodations and previously recommended or provided accommodation

    c. A statement of how the disability affects the candidate's "major life activities"

5. Documentation must reflect that the candidate has been evaluated by the licensed professional or certified specialist within the past three years. If a candidate has a long-standing disability that is not likely to improve, documentation older than three years may be acceptable if provided with an update obtained within the past three years.

6. Reasonable accommodations that may be provided for BMSC's examinations include:

    a. An accessible testing site

    b. A separate testing room

    c. Extended testing time

    d. A screen magnifier

    e. A reader

7. The application for accommodations and supporting documentation will be reviewed and the candidate will be notified, in writing, of the accommodations approved for that candidate. The accommodations provided will be appropriate for the documented disability but may not be the exact accommodations that have been requested.

8. Accommodations requested by a third party (for example, a teacher or family member) will not be honored.

9. Accommodations that are not required by the ADA and will not be provided include those that:

   a. Alter the knowledge and skills measured by the examination and may affect the validity of the examination

   b. Provide an unfair advantage for the disabled candidate

   c. Compromise examination security

   d. Are requested for candidates who speak English as a second language

   e. Address temporary physical conditions

   f. Provide personal services and devices (for example, wheelchairs, hearing aids)

   g. Pose an undue financial or administrative burden on BMSC or the proctor/location providing test administration

15 Credential Verification

Certification status may be verified by employers, government agencies, and accrediting agencies by accessing the Directory of Certified Credential Holders on the BMSC website.

BMSC demonstrates transparency and disclosure to the public by maintaining a public Directory of Certified Credential Holders on its website. This directory lists only those credential holders who have an active credential status and does not disclose any confidential information such as, date the candidate became certified, number of certification attempts, contact information or any other personal candidate data.

16 BMSC Appeals Policy and Procedure

All certification related appeal or complaint requests must be made in writing via:

Email: *customer@decisionhealth.com*

USPS: Board of Medical Specialty Coding & Compliance
9737 Washington Blvd., Suite 502
Gaithersburg, MD, 20878

All appeal or complaint requests will be addressed to BMSC's Chief Executive Officer. The CEO will maintain a record of each appeal, the subsequent actions taken, and the decisions made. The CEO or their designee will be responsible for all communications with the person who submitted the appeal or complaint.

This appeals process is the only method to review all decisions made by BMSC regarding applications, eligibility, examinations, test administration or results, and continuing education units. In addition, all complaints related to potential ethics violations regarding misconduct that involve currently certified individuals, may be subject to disciplinary action administered by BMSC

BMSC shall serve as the final decision-making body and sole authority in administering discipline to HCS-H candidates and credential holders regarding:

- All appeals with respect to certification examination eligibility, examination performance, and recertification (certification maintenance), in accordance with the BMSC candidate handbook and HCS-H appeals policies and procedures; and

- All subsequent appeals with respect to BMSC certification ethical misconduct, in accordance with the BMSC candidate handbook and BMSC Professional Code of Ethics

BMSC assigns the BMSC Appeals Committee the responsibility to investigate appeals with respect to certification exam eligibility, examination performance, and recertification (certification maintenance), in accordance with the BMSC candidate handbook and the BMSC appeals policies and procedures.

BMSC Appeals Committee consists of the BMSC Board Chair, Board Public Member, and one member of the BMSC executive team.

BMSC assigns the Association of Home Care Coding & Compliance (AHCC) Professional Ethics Committee the responsibility to:

- Investigate appeals on behalf of BMSC, regarding alleged HCS-H certificant ethical misconduct

- Recommend disciplinary action (as defined below) to BMSC, resulting from an aforementioned investigation regarding an appeal of HCS-H certificant ethical misconduct, for final consideration and decision-making, in accordance with the BMSC candidate handbook, BMSC Discipline policy, BMSC Code of Ethics, and BMSC policies and procedures.

The Professional Ethics Committee consists of the AHCC Board Chair, Vice Chair, and Secretary.

Probation: A directive allowing the candidate an opportunity for correction of behavior that may include mandatory participation in a remedial program (e.g., education, professional counseling, and peer assistance)

Failure to successfully complete these programs may result in other disciplinary action being taken. It carries no loss of certification status, but may result in removal from any BMSC committee, taskforce, workgroup, exam development team, or other assignment. The time frame will be specified on a case by case basis.

Censure: A written reprimand expressing disapproval of conduct.

It carries no loss of certification status, but may result in removal from a BMSC-designated committee, taskforce, workgroup, exam development team, or other assignment. A time frame is not applicable.

Suspension: Temporary loss of credential and all benefits and privileges for a specified period of time. It may include mandatory participation in a remedial program (e.g., education, professional counseling, and peer assistance)

At the end of the specified suspension period, certification benefits and privileges are automatically restored. The time frame will be specified on a case by case basis.

Revocation: Loss of certification status and removal from the HCS-H registry; loss of all benefits and privileges

Upon revocation, the former HCS-H credential holder will return their certificate and lapel pin to BMSC and the former credential holder's name will be removed from the Public Directory of Credential Holders. The time frame for reapplication will be decided on a case by case basis, but at minimum, current recertification requirements would need to be met. **A credential will not be issued until BMSC determines that the reasons for revocation have been removed.**

BMSC Appeals Committee will have the final decision making responsibility and sole authority with regards to all appeals, when applicable, with respect to certification exam eligibility, examination performance and recertification (certification maintenance), and in accordance with the HCS-H Candidate Handbook and the appeals policies and procedures.

BMSC professional ethics committee will have the final decision making responsibility and sole authority to consider all recommendations received by the AHCC Professional Ethics Committee for discipline of an HCS-H certificant through probation, censure, suspension, or revocation of credentials, in accordance with the BMSC candidate handbook, BMSC discipline policies and procedures, as further described below.

Accept – acceptance of the disciplinary recommendation from the AHCC Professional Ethics Committee requires a majority vote of all BMSC Board members present during a meeting, subject to the establishment of a quorum.

Modify- revising a disciplinary recommendation from the AHCC Professional Ethics Committee requires a two thirds vote of all BMSC Board members present during a meeting, subject to the establishment of quorum.

Reject – rejection of a disciplinary recommendation from the AHCC Professional Ethics Committee requires a unanimous vote of all BMSC Board members present during a meeting, subject to quorum.

The BMSC certificant will be notified of any decision/disciplinary action by BMSC within thirty (30) calendar days of a BMSC Board meeting where the decision/disciplinary action was rendered, or within thirty (30) calendar days after an in person meeting of the Board, or as soon thereafter as is practical.

Unless otherwise ordered through an administrative determination, an individual whose eligibility, certification, or recertification (certification maintenance) status has been disciplined by BMSC may apply for reinstatement under procedures set forth from time to time by BMSC. Action on all reinstatement/reapplications for a BMSC credential shall be at the sole discretion of BMSC.

In the interest of protecting the integrity of the profession regarding individuals subject to discipline by BMSC, the Board of Medical Specialty Coding & Compliance shall have the authority and reserves the explicit right to:

- Remove the name of the individual from any official BMSC listing of HCS-H certificants

- Provide information regarding the disciplined individual to the agency(ies) involved as well as to any third party who financially supports the individual involved, such as:

  - Name

  - Contact address, city, and state

  - Place of employment

  - Date of disposition of disciplinary action

  - Discipline imposed by BMSC

- Publish the following information available through BMSC online and print publications and press releases

  - Name

  - Contact address city, and state

  - Date of disposition of disciplinary action

  - Discipline imposed by BMSC

17 Record Retention Policy

The life cycle of records management begins when the information is created and ends when the information is destroyed. The picture below provides a simple reflection of the entire records retention process. The goal for BMSC is to manage each step in the record life cycle to ensure record availability.

Creation

Destruction

Utilization

Maintenance
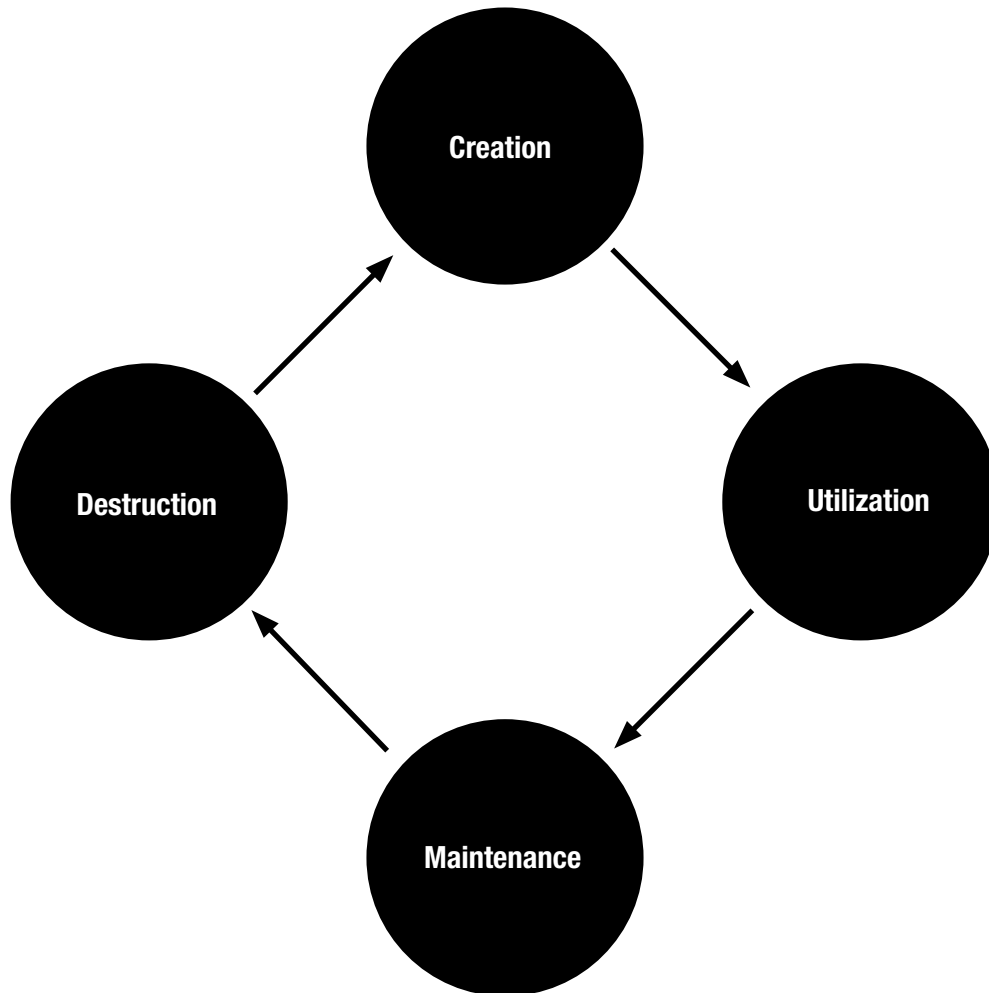
BMSC retention schedule:

- Ensures examination records are available to meet the needs of the credential candidates/ holders, legal requirements, research, education, and other legitimate uses of the organization

- Includes guidelines that specify what information is kept, the time period for which it is kept, and the storage medium on which it will be maintained.

- Includes clear destruction policies and procedures that include appropriate methods of destruction for each medium on which information is maintained

There is no single standardized record retention schedule that organizations and providers must follow. Instead, a variety of retention requirements were reviewed by BMSC to create a compliant retention program including but not limited to the Federal Register and numerous acts such as the Higher Education Act of 1965 disclosure requirements. When reviewing and comparing the varying retention schedules BMSC elected to follow the more restrictive requirement.

Active Records:

Active records are consulted or used on a routine basis. Routine functions may include activities such as release of information request, quality reviews and appeals process. Active records are maintained in an electronic database, backed up nightly on secure servers and additionally with off-site reserve secure servers.

Inactive Records:

Inactive records are used rarely but must be retained for reference or to meet the full retention requirements. Inactive records usually involve a credential candidate/holder who has not sought information for a period of time or one who has successfully recertified the initial certification examination. Inactive records are maintained in an electronic database, backed up nightly on secure servers and additionally with off-site reserve secure servers.

Destruction:

Destruction of examination records by BMSC is carried out in accordance with a proper written retention schedule and destruction policy approved by the BMSC Board. Examinations involved in any open investigation, audit, or litigation will not be destroyed until the litigation case has been closed. There is no single standard destruction requirement. BMSC elected to follow the more restrictive destruction requirement.

Destruction method:
- Paper records are shredded

Retention policy:
- All electronic examination tests and results, including score report will be retained permanently.
- All paper examination test booklets and examination answer sheets will be destroyed after two years.

All paper examination answer sheets are scanned into an electronic database upon arrival to the certification office and the electronic version will be kept permanently, including score report.

Example:

Record Type	Record Retention
Electronic record	Permanently
Paper record (after being scanned into electronic database)	Two (2) years

Example:

Paper exam taken at live event	Paper exam arrives at BMSC office	Paper exam results scanned into electronic database	Paper exam record retention cycle begins	Paper exam destroyed	Electronic version of paper exam record retention
2-12-12	2-15-12	2-16-12	2-17-12	2-17-14	Permanent

18 Security

General Security Policy

All proprietary rights in the examinations, including copyrights and trade secrets, are held by BMSC. In order to protect the integrity of the examinations and to ensure the validity of the scores reported, candidates must adhere to strict guidelines regarding proper conduct in handling copyrighted proprietary examinations. Any attempt to reproduce all or part of the examinations, including, but not limited to, removing materials from the examination room, aiding others by any means in reconstructing any portion of the examinations, selling, distributing, receiving or having unauthorized possession of any portion of the examinations, is strictly prohibited by law. Alleged copyright violations will be investigated and, if warranted, prosecuted to the fullest extent of the law. It should be noted that all examination scores may be invalidated in the event of this type of suspected breach. Candidates may not write on any examination materials distributed by or belonging to BMSC unless authorized by the proctor/test administrator.

A candidate can be disqualified from taking or continuing to sit for an examination, or from receiving examination results, or the candidate's scores might be cancelled, if BMSC determines through proctor observation, statistical analysis, and other evidence that the candidate's score may not be valid or that the candidate was engaged in collaborative, disruptive, or other unacceptable behavior during the administration of the examination. Examination (pass/fail) results are confidential and will not be disclosed to anyone without candidate consent, unless directed by valid and lawful subpoena or court order. If you would like your examination results to be released to a third party, you must provide BMSC with a written request that specially identifies the types of details (e.g., examination date, pass/fail status, etc.) about the examination results that the third-party should receive. All items and forms are maintained at the offices of the Board of Medical Specialty Coding & Compliance. Access is restricted during business hours to staff (via a key card) and authorized visitors (visitors pass). Doors are locked at all times. The building security is monitored after hours by an electronic security system and by a security company. All secure testing material is maintained within the building in a locked storage area. Item banks and other secure materials maintained by BMSC are password protected.

Exam Shipping Policy from BMSC to Live Event

1. Box of exam-related items is compiled by BMSC Certification Coordinator. Approved/ Signed off on by Director of Certification before mailing.

2. BMSC Certification Coordinator seals box of exam contents, and addresses label to assigned proctor (for the specified conference).

3. Certification coordinator sends box by UPS next day air, for delivery to the proctor on the next business day.

4. Certification coordinator sends tracking number via email to approved proctor (for the specified conference), so they both can track shipment and delivery of the package.

5. Proctor keeps exam materials with him/her at all times, until examination is administered. If exams are sent in advance of a particular event (where the exam is being administered), examinations are kept in a locked safe with only the proctor having the combination to access the exams.

19 Frequently Asked Questions

What is recertification?
Recertification (maintenance of certification) is a process that ensures HCS-H certified professionals demonstrate ongoing competence in the domain areas in which they are certified, through self-assessment reviews, maintenance or enhancement activities.

What are self-assessment reviews?
Self-assessment reviews are two (2) computer based assessments that demonstrate competence in regulatory changes occurring within the previous 12 months. The assessments may be taken more than once to achieve a passing score. Each self-assessment contains 15 questions. A proctor is not required.

What is certification maintenance?
Certification maintenance (also known as credential maintenance) is the completion of educational programs that provide updated training and skills to allow continued competence in hospice coding by earning the required number of CEUs in any of the HCS-H Domains.

What is certification enhancement?
Certification enhancement is the completion of educational programs that result in expanded knowledge and skills to enhance professional growth in hospice coding by earning additional CEUs in a specific HCS-H Domain. This is beyond the requirement to maintain certification.

What is the initial recertification cycle?
The initial recertification cycle for newly credentialed certificants (first obtaining credential) begins the day after the credential is awarded and is active for one year, until the anniversary of that certification date (in the following year).

What do I need to do in order to recertify or maintain my certification status?
To recertify or maintain your certification, you need to earn and report your required 20 CEUs within your recertification cycle. 20 CEUs are obtained by completing 2 online self assessments (each assessment provides 5 CEUs) and additional maintenance education providing 10 CEUs. It is important that all annual CEUs are earned between your anniversary date and expiration date of the current 12 month cycle.

How can I earn BMSC CEUs?
BMSC offers many opportunities to earn CEUs through meetings, study guides webinars, distance learning courses, and other activities that qualify for CEUs. For additional information on these opportunities, please visit the BMSC website.

Do CEUs earned through organizations other than BMSC qualify?
Yes. BMSC accepts CEUs earned through other organizations, provided they qualify as valid CEU activities and are relevant to hospice coding.

Can I earn BMSC CEUs by earning another BMSC certification?
No. At this time BMSC has not designated this as a valid CEU activity.

How can I find out how many BMSC CEUs I have earned so far?
Certificants manage and track their CEUs through their own credential holder account on the BMSC website.

What should I do with my CEU documentation?
BMSC does not require CEU documentation at the time of recertification. You should submit your recertification application and the accompanying fees on the BMSC website after recording the required number of CEUs in your tracker. Save all CEU documentation for one full calendar year following the date of your certification renewal, in case you are selected for a random audit.

Do CEUs carry over from one reporting period to another?
No. You can only report CEUs earned during the current recertification cycle.

What if I don't have enough CEUs to recertify or maintain my certification?
If you do not report the required CEUs by the anniversary of your certification date, your credential(s) will be placed on inactive status. BMSC provides a three (3) month window for credential holders to meet recertification requirements before the revocation process begins.

What does inactive status mean?
During inactive status, you cannot promote yourself as HCS-H certified. If you reactivate your credential during the inactive period (a reactivation fee applies), your certification will be reinstated and considered active. If you fail to reactivate by the end of the inactive period, your certification will be revoked.

What does revocation mean?
If you fail to reactivate by the end of the inactive period, your certification will be revoked. Once your certification is revoked, you are no longer HCS-H certified and your certification can only be reinstated by retaking the initial certification exam.

What is the yearly audit?
In order to ensure high standards of competency and continuing education, BMSC will conduct an annual audit. A randomly selected, percentage sample of recertification applications submitted from the prior reporting period will be sampled to participate in the audit. If audited, you will be required to provide documented proof of all CEU activity reported during the reporting period to BMSC within 30 days.

If you are unable to provide documented proof within 30 days, your certification will be considered inactive and you will have one year to complete the recertification process by providing the documentation or obtaining new CEUs. All audit documentation is reviewed for completeness and accuracy by BMSC. If all documentation is complete and the appropriate number of CEUs are earned, you will be notified that your credential is valid until the next recertification due date. If, after submission of CEUs, it is determined that some or all CEUs are not applicable, an appropriate amount of time will be allowed for you to earn additional replacement CEUs.

Can I be granted an extension beyond the 90 day allowed time frame to take an exam?
You may be granted an extension, but only under the following special circumstances:

- Natural disaster: In the event of bad weather, a natural disaster, or another emergency (for example, a test center power outage)

- Medical or Personal Emergency: A medical or personal emergency is an unplanned event that prevents you from taking the exam. A medical or personal emergency may apply to you or one of your immediate family members; spouse, child, or parent as defined by the Family Medical Leave Act. Documentation (i.e. doctor's note, emergency room forms, obituary) showing why you could not take your exam will be required.

If the candidate has met one of the above special circumstances, requests an extension for an exam or certification eligibility period, and is approved the extension, the fees that apply are:

1. First Approved Request for an Extension–$75 (valid for 45 days)

2. Second and Final Approved Request for an Extension–$150 (valid for an additional 30 days). No additional extension will be authorized.

Can I get a refund after I register for an exam if I choose not to take the exam?
If you decide to cancel your BMSC exam registration, you must notify DecisionHealth within 30 days prior to your scheduled exam date for a full refund. Candidates registered for BMSC exams have 90 days from the day they register to take an initial or retake exam. If you do not take the exam within those 90 days and do not cancel within the allowed timeframe, your registration fee is non-refundable and nontransferable.

20 Appendix A – Domains

HCS-H Professional Domain Definition: HCS-H professionals improve the quality of healthcare by ensuring the timeliest information and resources available are used for accurate coding. The profession encompasses services in analyzing, and disseminating individual patient clinical diagnostic data. It serves the following healthcare stakeholders: patients, providers, patient care organizations, research and policy agencies, payers, and other healthcare-related entities.

Eighty (80) percent of all CEUs must be earned within HCS-H Domains, which are divided into the areas below.

1. Domain I: Collect patient documentation (10%)

Tasks associated with this domain include:

- Obtain patient documentation
- Ensure the completeness of the patient documentation

2. Domain II: Assign accurate diagnosis codes (65%)

Tasks associated with this domain include:

- Review diagnosis codes
- Assign accurate diagnosis codes from the ICD-10 CM classification system
- Sequence the diagnosis codes
- Determine if a payment (case-mix) diagnosis will be listed according to CMS guidelines
- Validate diagnosis codes using coding conventions and guidelines
- Ensure that the patient documentation supports the assigned codes

3. Domain III: Collaborate with clinicians, physicians and/or managers/administrators (10%)

Tasks associated with this domain include:

- Query clinicians, physicians, or managers/administrators about incomplete information, additional information, or documentation deficiencies
- Obtain clinician agreement with code assignment and sequencing
- Train clinicians, physicians and/or managers/administrators about changes to coding protocols

4. Domain IV: Ensure that all activities are done in a legal and ethical manner that supports agency policy, regulatory and professional guidelines (15%)

- Maintain patient confidentiality, privacy, and security
- Conduct activities in a legal, ethical, and professional manner
- Archive and retrieve patient documentation related to the medical record

21 ## Appendix B – Coding Specialist Competencies

1. **Technology:** Application of existing and emerging technologies for the collection of clinical data, the transformation of clinical data to useful health information, and the communication and protection of information on analog (for example, paper) or electronic media (for example, web based software). Topics include, but are not limited to:

   • Electronic health records (EHRs)

   • Software applications (encoders, patient information management systems, chart management and electronic queries.)

   • Personal health record (PHR)

2. **Clinical Data Management:** Applications and analysis of quality and clinical resources appropriate to the clinical setting. Includes database management, clinical documentation improvement, and coding compliance using the current classification system within the prospective or payment system to ensure quality and cost effectiveness of the rendered services (for example, data integrity and quality of documentation). Topics include, but are not limited to:

   • Hospice payment system

   • ICD-10-CM

   • RAC

   • ZPIC

3. **External Forces:** Study of regulatory requirements and the development of appropriate compliance initiatives for policies, procedures, protocols, and technology for home health and hospice providers. Topics include, but are not limited to:

   • OIG

   • HIPAA

   • Compliance

   • Legal or regulatory update

4. **Clinical Foundations:** Understanding of human anatomy and physiology; the nature of disease processes; and the protocols of diagnosis and treatment of major diseases to include common drugs and laboratory and other tests used for the diagnosis and treatment of disease. Practice the ability to apply this knowledge to the reading, coding, and abstracting of medical information to support quality patient care and associated databases. Topics include, but are not limited to:

   • Pathophysiology

   • Pharmacology

   • Anatomy and physiology

   • Medical terminology

   • Clinical documentation

   • Diagnostic and laboratory testing

   • Telemedicine

5. **Privacy and Security:** Understanding and application of current healthcare regulations that promote protection of medical information and the electronic transmission of health information. Topics include, but are not limited to:

- Release of information
- Confidentiality
- Personal health information security