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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
About HCS-D Certification

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

HCS-D credential holders are professionals skilled in classifying medical data from patient records, generally in the post-acute care setting. These coding practitioners review patients’ records and assign alpha numeric codes for each diagnosis and procedure. To perform this task, they must possess expertise in the understanding and application of coding conventions and guidelines as outlined in the ICD-9-CM or 10-CM (Volumes I, II) system. In addition, the HCS-D 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 services by a clinician is imperative to appropriate levels of reimbursement being dispersed.

The HCS-D certification examinations assesses proficiency in home health coding. Professionals experienced in home care coding should consider obtaining this certification.

Benefits

BMSC exams are the only ones developed for coders by coders. The HCS-D exam tests skills and shows your proficiency. In a recent survey conducted by BMSC, we discovered that 1 in 5 of our surveyed certified coders had received a raise or bonus after certification.

HCS-D 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-D credential is a demonstration of your coding proficiency. As you become more experienced in the practical requirements of home care coding, HCS-D 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.
Determining if you are ready to take the HCS-D Exam

Eligibility and Qualifications

The HCS-D exam assesses your proficiency in coding specifically for home care.

To be eligible to sit for the Home Care Coding Specialist-Diagnosis (HCS-D) certification examination(s), 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:

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

  AND

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

Our most successful candidates usually have at least two years coding in home care. HCS-D 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 home care coding specialist, then we invite you to sit for a HCS-D 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 procedures you will likely never see, but rather to ensure – for you and for your employer – that you have, in fact, achieved proficiency in home care coding.

The HCS-D examination focuses on the critical diagnosis coding, documentation, legal, ethical and billing issues specific to home care:

- Most frequently billed home health conditions and proper assignment of PPS case-mix diagnoses
- Accurately assigning codes that represent factors influencing health status
- Conventions and guidelines for home health diagnosis coding (e.g., manifestation codes)
- Correct usage of combination codes
- Correct assignment of primary, secondary and other OASIS related optional diagnosis columns
- ICD-9-CM or ICD-10-CM code sequencing and 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-D certification examination.

Executive Summary

The 2012 HCS-D job task analysis executive summary may be requested in writing to BMSC at: info@medicalspecialtycoding.com

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 recommended minimum requirements, submit an application for the certification examination online at www.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-D credential. All HCS-D credential holders must pass their initial certification with a passing score, and maintain their credential through annual recertification requirements. HCS-D 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.
Preparing for HCS-D certification

Study Process and Materials

Because the HCS-D 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.

We publish various study resources, including a study guide specific to HCS-D 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. We may also offer other study resources, such as on-your-own audio study guides and reference sheets. Please visit the BMSC/AHCC website for more information. The website can also direct you to skill questions online. BMSC recommends the following products as optional tools to help with examination preparation:

• Study Guide for HCS-D Certification
• Home Health ICD-9-CM or ICD-10-CM Diagnosis Coding Answer Book, current edition
• Annual Home Health Coding Summit
• Complete Home Health ICD-9-CM or ICD-10-CM Diagnosis Coding Manual, current version
• Online university 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-D (I-9) certification examination is comprised of 50 multiple-choice questions.

The HCS-D (I-10) credential holder examination is comprised of 50 multiple choice questions.

The HCS-D (I-10) non-credential holder examination is comprised of 65 multiple choice questions.

The HCS-D certification examination is administered via independent testing center or paper-based testing. Paper-based testing is only administered at a BMSC pre-approved in-person event.

The allotted time to complete the HCS-D (I-9) or HCS-D (I-10) credential holder exam is 2 ½ hours. It may take some candidates less than the allotted time to complete the examination.

The allotted time to complete the HCS-D (I-10) non-credential holder 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-D examination questions:

• Are annually discussed and reviewed by BMSC’s home care specialty board of advisors during an in-person work session where members of the Board, SME’s, and BMSC staff are present.
• Are created and/or revised to reflect the most accurate coding guidance and current code-set
• Are independently reviewed and validated for clarity and accuracy by current HCS-D credential holders across the United States prior to release to general testing population
• Are monitored through psychometric analysis
• Satisfy the test specifications of the HCS-D Test Blueprint
Items Allowed with the Examination

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

- Government issued photo identification
- Current coding manual
- Candidate ID number

While sticky notes attached to, or writing inside of the above book is allowed, loose leaf papers are not allowed. You are also NOT allowed to tape copies of presentations to your coding manual for use during the examination. You may not share reference books with other test takers and extra copies of the above book will not be provided. Please bring extra writing utensils you may need. 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-D 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 home health coding specialist.

Domain I: Collect patient documentation (10%)

Tasks associated with this domain include:
- Obtain patient documentation
- Ensure the completeness of the patient documentation

Domain II: Assign accurate diagnosis codes (65%)

Tasks associated with this domain include:
- Review diagnosis codes
- Assign accurate diagnosis codes from the 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

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

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
Registering for the HCS-D examination

How to Register for the HCS-D certification examination

1. Register by using the online examination process. Go to ahcc.decisionhealth.com, click on ‘how to get certified’ and then click on the electronic registration form.

2. Select the appropriate Home Care Coding Specialist – Diagnosis (HCS-D) Certification examination for the price of $299.

3. Select your testing method from the two available options: Computer based testing center or Onsite testing at a conference.
   a. All BMSC examinations that are offered at an onsite event have been pre-approved by BMSC prior to the date of the event. Please look at the Events page of the BMSC website to see select events where the certification examination will be held.
   b. If you elect to take your examination at an onsite event that has been pre-approved by BMSC, a proctor has already has already been assigned.
   c. If you elect to take your examination onsite, at an event, you will be taking a paper examination.

4. Input the candidate information in the space provided. Please ensure that you include your email address in the space provided.

5. Indicate your payment information in the space provided.

6. Submit the registration form to the BMSC registrar electronically via the BMSC website.

7. Once your registration form has processed, you will receive a confirmation e-mail within 72 hours of receipt. The email will be sent to the email address you’ve provided on your examination registration form.

8. Once you’ve received your e-mail confirmation for examination fees:
   a. If you’re taking your examination onsite at an event, you will receive an email indicating that you’ve been added to the registration list for testing at that particular event, and that an examination will be waiting for you at the testing location (you’ve indicated on your registration form).
   b. If you’re taking your examination at an independent testing center, you will receive an email within 3-5 days (after you’ve received your payment confirmation) indicating instructions for how to proceed with taking your exam via computer-based testing.

Selecting a Testing Location

Taking the Test at an Event

Many candidates like to attend conferences or educational events to ensure that they have the knowledge needed to take a BMSC certification exam. While BMSC encourages this practice, please keep in mind that no conference is designed to train you to pass a given test. However, many conferences, especially the Home Health Coding Summit, will provide the latest information on health care coding.

The BMSC exam is a separate registration (and fee) from any conference.

To register for a certification exam at a conference, simply visit the Events Page on our website to view current offerings, click on the conference you are interested in, and register for BOTH the conference and the exam.

Note: When you elect to take your examination at an event, a proctor (pre-authorized by BMSC staff) will be provided for all test takers.
See Instructions on how proctors will administer examinations at an in-person, event in the back of this handbook

**Taking the Test via Computer-Based Testing**

Many coders have trouble finding the time and money to attend conferences or CEU events throughout the year. Thus, a candidate can take the HCS-D certification exam via an independent testing center at an approved location. This process allows you to take the exam online via computer-based testing.

The online exam is timed. At the end of the allotted exam time or if the candidate finishes prior to the maximum time limit, the candidate will receive their results when the ‘submit’ function is pressed within the online examination program.

Step by step registration instructions to register for a computer based testing center can be found on the AHCC/BMSC website under the tab “Get Credentialed.”
Test Day

Candidates taking the test at an event should report to the testing room 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 may not leave until the exam has finished.

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

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

Unallowed behavior

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 allowed. Examples of misconduct include, but are not limited to:

- Using electronic communication equipment (e.g., PDA’s, calculator, cell phones, 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 cancel the test score. When appropriate, BMSC will give 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, in-person event will receive a results letter via USPS within 6 weeks of taking their examination. Candidates who take their examination at an independent testing center will receive a pass/fail result and score report immediately at the end of the examination.

Each question on the HCS-D examination is mapped to a domain item on the HCS-D examination test blueprint. Every HCS-D examination candidate should receive a copy of their score report from their examination. The score report provides the candidate’s final score on the examination, as well as a grid on how the candidate performed per each of the domain’s listed on the HCS-D test blueprint. This score report will allow candidates to evaluate their performance as it relates to the HCS-D examination blueprint and thus, identify 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 questions on the HCS-D certification examination, nor will BMSC discuss rationale for correct answers to examination questions listed on the HCS-D certification examination.
After the examination

Successful candidates:

• Become a HCS-D certified coder.
• Receive a certificate of recognition of their status as a Home Care Coding Specialist – Diagnosis.
• Receive a credential lapel pin.
• Will be listed as a Home Care Coding Specialist-Diagnosis in our Directory of Certified Credential Holders on the BMSC website.

Unsuccessful candidates:

• Receive an invitation to retake the HCS-D 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. Your answers to this survey will help us gauge how well we, and the exam, are serving you and how well you feel you were tested on the subject matter contained on the examination. We encourage you to fill out this form.

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 online, your results are provided to you 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 Director of Certification 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.
Maintaining your Certification

Purpose

The HCS-D recertification (maintenance of certification) program ensures that HCS-D 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 home health coding by earning the required number of continuing education units (CEU’s) in any of the HCS-D Domains.

Enhancement: Completion of educational programs that result in expanded knowledge and skills to enhance professional growth in home health coding by earning additional CEU’s in a specific HCS-D Domain. This is beyond the requirement to maintain certification.

Receiving the HCS-D Credential Means

- Demonstrating commitment and expertise to the professional area of home health 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.
- Having an edge over noncertified professionals. The HCS-D 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-D certified
- Professional prestige helps you remain competitive in a tough job market
- Demonstration of your ongoing commitment and competence in home health 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) CEU’s, including two (2) mandatory annual coding self-reviews (self-assessments) are required annually. Each mandatory annual coding self-review is worth five (5) CEU’s toward the total CEU requirement.
Recertification Cycle

The recertification cycle for an HCS-D credential holder begins the day after the HCS-D credential is awarded and is active for one calendar year. There are 3 important dates to remember as an HCS-D 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 CEU’s occur between the anniversary date and the expiration date.

See example below:

<table>
<thead>
<tr>
<th>Your Credential</th>
<th>Your Certification Date (as listed on your BMSC Certificate)</th>
<th>Recertification Cycle – Year 1</th>
<th>Recertification cycle – Year 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCS-D</td>
<td>3-15-12</td>
<td>3-16-12 through 3-15-13</td>
<td>3-16-13 through 3-15-14</td>
</tr>
</tbody>
</table>

In the example above: your original certification date is 3-15-12. Your anniversary date is 3-16-12. Your expiration date is 3-15-13.

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

Qualifying Continuing Education Activities and Calculation of CEU’s

Continuing Education (CE) Content

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

Calculation of CEU’s

Calculation of CEU’s 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. For example, a program that is 2 1/2 hours long is equivalent to two CEU’s.

CE Activities

1. Participation in educational programs on topics relevant to the HCS-D.
   a. Educational portions of home health 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 home health coding profession— one (1) CEU for each 60 minutes of participation
   d. Telecommunications and webinars relevant to the home health coding profession— one (1) CEU for each 60 minutes of participation
2. Publication and presentation of material relevant to home health coding.
   a. Publication is the development of an original work, relevant to the home health 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) CEU’s
      - Editor of a textbook, workbook, or manual—ten (10) CEU’s
      - Author of an article in a home health coding journal—five (5) CEU’s
      - Author of a chapter in a textbook, workbook, or manual—ten (10) CEU’s
      - Editor of a home health coding professional journal—five (5) CEU’s
      - BMSC course writing (for example, coding on-line library course)—ten (10) CEU’s
      - Author of an educational article in a local or state newsletter—two (2) CEU’s
      - 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 15 minutes of podium time
      - Panel participant at an educational program—one (1) CEU for each 60 minutes of podium time

3. Independent study activities relevant to the home health coding profession.
   a. Enrollment in one or more BMSC independent study program modules (CEU’s pre-determined by BMSC)
   b. Enrollment in home study programs relevant to HCS-D 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 home health 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:
      - Creating an ICD-9-CM or ICD-10-CM training plan and schedule of activities
      - Providing direction and guidance of BMSC Recertification Guide
      - Visiting BMSC exhibits at a national or state meeting—one (1) CEU per meeting
      - Participation in a BMSC volunteer leader conference or work group (CEU’s 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 state, local, and regional state home health 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 home health 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 may report your CEU’s 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.

Fees (plus any applicable late fees):
• Initial Registration Fee for Certifying Exam – $299.00
• Annual recertification CEU requirements and self-assessment maintenance fee - $199.00

*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 enrollment in the Association of Home Care Coding and Compliance.
**Certification Status**

**Status Types**

a. Active: based on meeting the recertification requirements

b. Inactive:
   
   I. Failure to complete the two (2) annual coding self-review assessments by expiration of certification date

   II. Failure to complete 20 CEU requirements, including the self-reviews by expiration of certification date

* BMSC provides a three (3) month window for credential holders who have been placed on inactive status to meet recertification requirements and report CEU’s. Therefore, any credential holder who has not met recertification requirements by 90 days past the expiration of his certification date will have his credential revoked. The credential may not be used during the period of inactive status. A late fee is imposed to re-activate a credential to active status.

c. 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-D 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, without receipt by BMSC of the application to reinstate, the only way to be reinstated and returned to active status is to retake the applicable certification exam.

An individual whose credential is reinstated 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.
Additional Recertification Processes

Audits

Each year a percentage of recertification report forms are randomly selected for audit. Individuals selected for audits will be notified in writing and required to submit verifiable documentation (for example, certificates of attendance or similar materials) for each activity listed on the CEU Report Form by the due date specified on the audit notification material.

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, 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.

- Temporary Waiver—Temporarily waive recertification requirements due to extenuating circumstances or hardships (for example, financial hardship, illness, unforeseen circumstances, and natural catastrophes)
- Permanent Waiver—Permanently waive recertification requirements as a result of full-time retirement.

Extensions

BMSC may grant an extension of time to complete the number of CEU’s required for a CE cycle. An extension of time shall not relieve the applicant of the responsibility for completion of the CEU requirements for the CE cycle in which the extension period falls. Extensions will be subject to a 15% late fee.

Appeals

Individuals whose credential has been revoked or whose application for reinstatement has been denied may appeal to BMSC.
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.
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.
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

In order to use certain areas of this website, a user must first complete a registration form. 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.
Sharing

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 200
Gaithersburg, MD 20878

Phone: 855-CALL-DH1
Fax: 301-816-8945
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.
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 Test Accommodations” 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
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.
BMSC Appeals Policy and Procedure

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

Email: info@medicalspecialtycoding.com

USPS: Board of Medical Specialty Coding & Compliance
9737 Washington Blvd., Suite 200
Gaithersburg, MD, 20878

All appeal or complaint requests will be addressed to BMSC’s Director of Certification. The Director of Certification will maintain a record of each appeal, the subsequent actions taken, and the decisions made. The Director of Certification 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 with regards to administering discipline to HCS-D certificants resulting from:

- All appeals with respect to certification exam eligibility, examination performance, and recertification (certification maintenance), in accordance with the BMSC candidate handbook and HCS-D appeals policies and procedures; and
- All initial complaints and 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 complaints and subsequent appeals on behalf of BMSC, regarding alleged HCS-D certificant ethical misconduct;
- Recommend disciplinary action (as defined below) to BMSC, resulting from an aforementioned investigation regarding a complaint alleging HCS-D 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-D registry; loss of all benefits and privileges

Upon revocation, the former HCS-D 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-D 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-D 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-D 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
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.

**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:

<table>
<thead>
<tr>
<th>Record Type</th>
<th>Record Retention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Electronic record</td>
<td>Permanently</td>
</tr>
<tr>
<td>Paper record (after being scanned into electronic database)</td>
<td>Two (2) years</td>
</tr>
</tbody>
</table>

Example:

<table>
<thead>
<tr>
<th>Paper exam taken at live event</th>
<th>Paper exam arrives at BMSC office</th>
<th>Paper exam results scanned into electronic database</th>
<th>Paper exam record retention cycle begins</th>
<th>Paper exam destroyed</th>
<th>Electronic version of paper exam record retention</th>
</tr>
</thead>
<tbody>
<tr>
<td>2-12-12</td>
<td>2-15-12</td>
<td>2-16-12</td>
<td>2-17-12</td>
<td>2-17-14</td>
<td>Permanent</td>
</tr>
</tbody>
</table>
Proctoring Instructions for the HCS-D Live Event Exam

Shipped Materials

When you arrive at the conference location, BMSC will have already sent exams to your attention. Please inspect the package to assure the box has not been tampered with and is still securely closed. Open the package and check the contents of the box for the following:

- Proctor Info & Candidate Check in Sheet
- Registrant List
- Registration Forms (for onsite registrations or for those who may wish to register after the event to take the exam at their own location).
- Sealed Exam booklets (enough for pre-registrants, plus extras)
- Exam Answer Sheets (forms candidates will use to bubble in answers)
- Return UPS label
- BMSC Pencils (test takers may keep them)
- BMSC Flyers
- BMSC Post its

If you are missing any of the above items or, if upon inspection, the box has been tampered with, please contact BMSC immediately at 1-800-897-4509 opt 1.

If someone is not registered, but wants to take the exam, they can still do so. (We send extra tests for that purpose). Thus, you should add them to your list of registrants. Tell the candidate they can handle the cost of the exam in either one of two ways:

1. Fill out a BMSC exam registration form. The candidate can provide credit card information on the form. You, as the proctor, should include this form in the exams you mail back to the office.

OR

2. Write their name on the registration list you have of all pre-registered attendees. BMSC policy is that we do not send out grades unless we have received payment. Once the tests are back in the office, BMSC will send the candidate a notice that their payment is required. A coder can absolutely take the exam without payment here, if there are extra examinations ... they just won’t receive results until that payment is made.

FAQs /General information to Candidates to know

1. What is the format of the examination?
   a. HCSD exam
      i. Certification candidates: The test questions are multiple choice and test-takers must choose the best answer.

2. What is the passing score?
   a. A passing score is determined via the annual standard setting process and is adjusted with each year’s exam.

3. What is the process for the exam?
   a. The exam begins promptly at ___ (time) ___ on ___ (date) ___ in ___ (name of room) ___ room.

   b. Please be here no later than ___ (1/2 hour before exam begins) ___ on exam day. You will need to stop and sing in at the registration desk first. Do not enter the testing room before you have checked in.
c. At the registration desk, we will ask for a photo ID. We will sign you in and check your materials. Your books may not contain loose-leaf pages with extra notes. Only books with “normal” notes will be allowed in. If you have bags with you, you must leave them in an empty space in the testing room. You should not take bags with you to your seat in the room. Sharpened pencils will be provided for candidates.

d. Once everyone is in the room, the exams will be handed to candidates. DO NOT UNSEAL the examination until you are instructed to do so.

e. Please fill in the information on the Inspiroscan answer sheet as directed. Only information on the Inspiroscan sheet will be graded.

f. At _ (insert time of test here)_, the proctor will call “begin”. You may pick up your pencils or pens and start. When the proctor calls stop, please immediately close your test booklets, put your pencils down and bring the examination booklet to the proctor. If you finish early, you may leave early. Please do not congregate outside the doors waiting for friends. We need you to clear the area to maintain silence during the exam. It is against the BMSC code of ethics for you to discuss the exam with other test-takers.

g. There are no scheduled breaks, but you can leave the room to go to the bathroom. Test-takers can go to the bathroom one at a time. You may not take bags with you to the bathroom. If you need to use the restroom, please exit quickly and quietly. The closest restrooms are _ (proctor insert here)_ . The clock continues to run on the test while you are out of the room. Time will not be altered.

h. And, this shouldn’t be a surprise... there is absolutely no talking during the exam. Not to me, not to your neighbor and not to yourself. The proctor does not answer questions during the exam.

4. What materials can you bring for the examination?
   a. Current codebook only.

5. What materials are provided?
   a. Pencils and scratch paper are provided for all candidates.

6. What happens after the examination?
   a. In approximately four to six weeks, you will receive your results by USPS.
   b. If you passed, you’ll also receive your credential certificate, suitable for framing, and your specialty lapel pin in your results packet. You will also receive information about recertification requirements to maintain your credential beyond the first year
   c. If you don’t pass, you will receive information outlining the exam retake process.

7. Can I get the answers to the questions I got wrong so I can understand why I missed them?
   a. No. In order to protect the integrity of the examination, we do not provide answers to questions.
Room Set Up

The testing room should be set-up for the examination and vacant at least 1 hour before the test is scheduled to begin. This will give you enough time to set up the room as necessary, and then prepare for exam check-in.

The room should be set up to accommodate one test taker per 6 ft. table. In that manner, the candidates have enough space to spread out their code books. If space is an issue, you can allow for two test takers to be on either end of an 8 ft. table.

BMSC staff will have provided tests, pencils, scratch paper, sticky notes and any BMSC-provided materials for candidates. Please place pencils, scratch paper, sticky notes and other BMSC resources at each setting before candidates enter the testing room.

If the testing room is the same as the preceding conference room, you need to have all attendees exit the room and tell them to take their materials with them. If they have luggage, they may keep it out of the way in the back of the room. The testing room should be closed and off-limits to candidates (e.g. no going back into the room during setup to get a codebook left in their suitcase, or at their seat, etc.) until you begin the registration and candidates are coming into the room to sit for the examination. Again: no leaving the room once they go in. Not to get coffee before the exam, not to go to the bathroom.

Exam Check-In

Exam check-in should begin one-half hour before the test is scheduled. Please have each person sign in using the “Proctor Info & Candidate Check in Sheet”. By completing the check in sheet, they (the candidates) are certifying that you, their proctor, are not:

- Related to the candidates by blood and/or marriage.
- A direct or indirect employee of the candidate.
- Being compensated in any way for fulfilling the duties of a proctor.

During the exam check-in, complete the following steps:

Check a valid Driver’s License/Government Issued ID against the list of registered test takers. It is not acceptable to check a conference ID badge.

1. Verify that test takers are only taking allowed materials into the testing room. Conference workbooks are not used for the examination.
2. Remove loose papers from allowed materials. Notes written in the book and sticky notes are okay and should not be removed.
3. Tell the candidate to go into the testing room, find a seat, and wait for further instructions.
4. Each candidate should have his/her own materials for the examination. No sharing of materials is allowed for any BMSC examination.

Once all the test takers have been confirmed, you can join them in the testing room.
Administering the Test

Once all the test takers are in the room and seated, The Proctor should pass out the Inspiroscan answer sheets and examination booklets. Please pass out the examination booklets to those pre-registered candidates first, giving each candidate their exam and instruct candidates to please not write on booklets and DO NOT UNSEAL examination until they are told.

NOTE: Candidates need to write all answers on the answer sheet. Not in the test booklet. Your examination will only be graded by what’s on the answer sheet. Candidates can write in the examination booklets, but all answers should be on the answer sheet only.

In the instructions to candidates, tell them they should complete the following information on the front side of the answer sheet:

1. Name of exam they are taking in the Exam Title line.

2. Under Conference Event Information, the candidate should complete the following:
   a. Name of Event
   b. Sponsoring Organization (or name of State Association as applicable)
   c. Location of Event (city and state)
   d. Date of Exam (date the candidate is taking the examination)

3. Candidates do not have to complete the Candidate ID field blank at this time.

4. Candidates should print first and last name in the space provided and complete the bubbles for the letters, as appropriate. Failure to do so will result in a delay of processing examination results.

5. Candidates should print their street address, telephone number and email address legibly in the spaces provided.

6. Reiterate to candidates that only answers on the answer sheet will be graded, and there is a correct answer for each question. Candidates are allowed to write in the exam booklets. However, if you write answers in the exam booklet, please ensure that you have written your answers on the answer sheet if you want them to be graded.

7. Reiterate basic rules out loud:
   a. Here’s how time will be called (see applicable format below)
   b. There are no scheduled bathroom breaks. Candidates are allowed to go to the bathroom one at a time. If you need to go, close your test booklet and give it to the Proctor. It will be given back to you when you return. You cannot take bags with you to the bathroom. The bathrooms are located ______ outside of this room. Time will still continue while you are in the bathroom.
   c. When you are finished with the exam, you should tuck your scratch paper in the exam booklet and bring it to the Proctor, and then you can leave. There is no talking outside of the exam room, as you do not want to interrupt those still taking the test. It is against the BMSC code of ethics to discuss the exam with anyone else, including fellow test-takers.
   d. You can keep your pencils.
   e. Please make sure your cell phones are off.
# How to Call Time for Exams

<table>
<thead>
<tr>
<th>2.5 hour HCS-D exam</th>
<th>3 hour HCS-D exam</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. 120 minutes</td>
<td>1. 150 minutes</td>
</tr>
<tr>
<td>2. 90 minutes remaining</td>
<td>2. 120 minutes remaining</td>
</tr>
<tr>
<td>3. 60 minutes remaining</td>
<td>3. 90 minutes remaining</td>
</tr>
<tr>
<td>4. 30 minutes remaining</td>
<td>4. 60 minutes remaining</td>
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<tr>
<td>5. 5 minutes remaining</td>
<td>5. 30 minutes remaining</td>
</tr>
<tr>
<td>6. 5 minutes remaining</td>
<td>7. 5 minutes remaining</td>
</tr>
</tbody>
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7. All coding manuals will be inspected prior to candidate’s leaving the testing area, to ensure no test questions or answers have been recorded.

8. 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.

Make sure everyone has closed their booklets when you have called “Stop.” Collect all booklets promptly and PRIOR to any candidate leaving the testing room.

## After the test

After the test is over and all test booklets have been secured, please collect all extraneous BMSC resources (pencils, scrap paper, etc.) from the testing room.

BMSC provides a return label for you to mail your materials back to BMSC. **Please make note of the UPS tracking number on the label before mailing. It is the proctor's responsibility to ensure that the examinations are shipped back to BMSC within 24-48 hours of the examination being administered.**

## Exam Security

Exam security is of the upmost importance to BMSC and directly reflects on the integrity of the credential. The following security procedures must be followed exactly. ANY deviation should be reported to the Director of Certification immediately.

## Receiving the exams

- The package should be inspected PRIOR to accepting shipment for any signs of tampering.
- If the package is in its original condition the box should be opened and checked for the required contents discussed in the previous section entitled ‘Shipped Materials’ Please verify the test booklets are individually sealed.
- Keep the booklets in your possession or stored in a locked secure location such as a hotel room safe until time for the examination and then follow the instructions discussed in the previous section entitled ‘Administering the Test’. 
Returning the exams

- Collect the booklets in accordance with the instructions discussed in the previous section entitled ‘Administering the Test’.

- Place the booklets and all additional materials in the package, secure with provided packing tape, seal tightly and attach provided UPS next day air label, while still in the examination room. As a proctor, it is your responsibility to keep the sealed package in a locked and secure location until the box is picked up or dropped off at UPS. The package should be mailed via UPS next day air, for delivery to BMSC’s certification coordinator on the next business day.

- The package must be signed for upon return to BMSC and will be inspected for any signs of tampering. The box is taken directly to the director of certification who secures the box in a locked storage area. Only designated BMSC employees have access to the locked storage area.

In addition, please read BMSC’s general security policy which has been included in these instructions for your review.

Required proctor training

- All BMSC approved proctors must complete the on-line proctor training course and pass course test prior to the BMSC approved live event examination.

- All BMSC approved proctors will acknowledge in writing the receipt of letter of responsibility prior to exam shipment.

- All BMSC approved proctors will sign and return the conflict of interest form prior to exam shipment.
Security

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.

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.
Frequently Asked Questions

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

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 home health coding by earning the required number of CEU’s in any of the HCS-D 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 home health coding by earning additional CEU’s in a specific HCS-D Domain. This is beyond the requirement to maintain certification.

What is the initial recertification cycle?
The initial recertification cycle for newly credentialed certificants (first credential obtained) 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 CEU’s within your recertification cycle. 20 CEU’s are obtained by completing 2 online self assessments worth 10 CEU’s and additional education worth 10 CEU’s for a total of 20 CEU’s. It is important that all annual CEU’s are earned between your anniversary date and expiration date of the current 12 month cycle.

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

Can I use CEU’s earned through organizations other than BMSC?
Yes. BMSC accepts CEU’s earned through other organizations, provided they qualify as valid CEU activities and are relevant to home health coding.

Can I earn BMSC CEU’s 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 CEU’s I have earned so far?
Certificants manage and track their CEU’s 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 not submit any paperwork, other than your recertification application, CEU report and the accompanying fees. Please save all CEU documentation for one full calendar year following the date of your certification renewal, in case you are audited.

Do CEU’s carry over from one reporting period to another?
No. You can only report CEU’s earned during the current recertification cycle.
What if I don’t have enough CEU’s to recertify or maintain my certification?
If you do not report the required CEU’s 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 and report CEU’s before the revocation process begins.

What does inactive status mean?
During inactive status, you cannot promote yourself as HCS-D 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-D certified and your certification can only be reinstated by the following option:

Reactivate by exam
- Retake the applicable 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 forms submitted from the prior reporting period will be sampled to participate in the audit. The audit will be conducted at each certification level. 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 CEU’s. All audit paperwork is reviewed for completeness and accuracy by BMSC. If all paperwork is complete and the appropriate number of CEU’s are earned, you will be notified that your credential is valid until the next recertification due date. If, after submission of CEU’s, it is determined that some CEU’s are not applicable, an appropriate amount of time will be allowed for you to earn additional replacement CEU’s.
Appendix A – Domains

HCS-D Professional Domain Definition: HCS-D 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 CEU’s must be earned within HCS-D 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-9 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%)

Tasks associated with this domain include:
- 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
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:
   - ICD-9-CM
   - Prospective payment system (PPS)
   - ICD-10-CM
   - HHRG
   - 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
   - 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