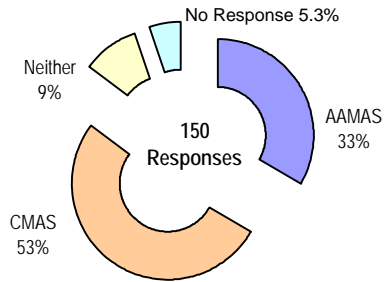
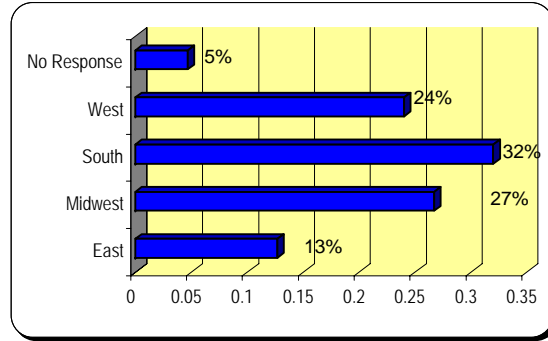


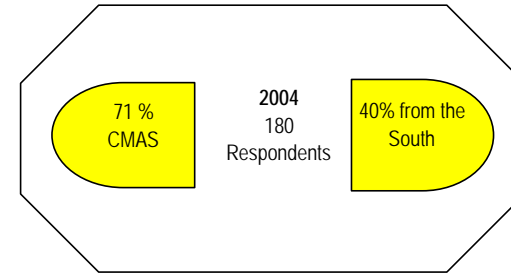
**AAMAS Practice Analysis**  
**At-a-Glance Summary Report and Comparison with 2004 Survey**  
 Conducted by the Center on Education and Training for Employment, Ohio State University



Membership and Certification Status



2006 Geographical Distribution



Respondent's Age Bracket

Age	Response	Ranking
<30 years	0.7%	
31-40 years	4.0%	
41-50 years	24.7%	93% } Same Ranking for 2004
51-60 years	44.7%	
> 60 years	23.3%	
No Response	2.7%	

Experience in Medical Audit

2004 Ranking	Years	Response	Rank
3	01-5 years	21%	2
4	06-10 years	17%	3
1	11-15 years	15%	4
2	16-20 years	24%	1
5	21-25 years	15%	5
	26-30 years	2%	6
	31-35 years	1%	7
	No Response	5%	

Indicates "new" interest in medical audit

Correlates with Age bracket

Investigate and verify charges against medical record documentation

	2006 Ranking	2004 Ranking
Inpatient hospital	1	1
Outpatient Hospital	2	2
Ambulatory Centers	3	3
Physician	4	5
SNF/LTC/Rehab	5	4

Professional Standards And Audit Behavior

2004	2006	Description
1	1	Apply principles of objectivity in performance of medical audit activity
2	2	Apply principles of independence in performance of medical audit activity
3	3	Integrate code/standards of conduct policies in performance of medical audit activity
4	4	Establish/participate in enforcing expectations and systems of accountability
5	5	Establish/monitor appropriate patient access and confidential policies
7	6	Develop/monitor effectiveness of internal control policies
6	7	Participate in goal setting, strategic planning, and mission/vision development activities

**AAMAS Practice Analysis**  
**At-a-Glance Summary Report and Comparison with 2004 Survey**  
**Conducted by the Center on Education and Training for Employment, Ohio State University**

**Audit Process, Work Flow and Audit Findings**

2004 Ranking	2006 Ranking	
1	1	Line by line bill audit
2	2	Conduct focused and target audits
3	3	Plan/discuss pre-audit process
5	4	Audit bill/claims for accuracy and timeliness
4	5	Conduct exit interview
6	6	Write audit report using standard format
7	7	Post audit conference and discussion
8	8	Review/audit accuracy of UB-92
9	9	Develop pre-audit procedures and tools
11	10	Apply third party payment rules
10	11	Assign/validate revenue codes
12	12	Assign/validate CPT codes
14	13	Apply official coding rules
13	14	Use statistically generated audit samples
16	15	Assign/validate ICD-9-CM codes
22	16	Apply CCI rules
18	17	Assign/validate E and M codes
17	18	Assign/validate HCPCS II
15	19	Validate eligibility/benefits
21	20	Assign/validate DRG codes
20	21	Assign/validate APC codes
19	22	Review/audit accuracy of CMS 1500
23	23	Assign/validate Physician Fee Schedule

**Other relevant medical audit responsibilities**

2004 Ranking	2006 Ranking	
1	1	Provide clinical interpretation and guidance to fellow auditors and staff
2	2	Apply regulatory and legislative policies in medical audit activity
4	3	Report identified and potential quality and risk management issues
6	4	Apply medical necessity rules in audit activity
3	5	Develop/update data base for tracking and trending medical audit findings
8	6	Apply utilization review criteria and protocols in medical audit activity
7	7	Update/review/maintain charge description master (CDM)
5	8	Recommend/approve/monitor use of external auditors or subcontractors
9	9	Prepare/Submit cost benefit and financial impact analysis reports
10	10	Participate/conduct interrater reliability (IRR) audit

**Quality Improvement Activities, Education and Training**

2004 Ranking	2006 Ranking	
1	1	Recommend process improvement solutions
2	2	Participate in education and training of staff
3	3	Develop/update/maintain/disseminate training manuals and educational materials
4	4	Monitor productivity levels of staff
5	5	Develop QA/QI policies and procedures

**Compliance and Special Investigations**

2004 Ranking	2006 Ranking	
1	1	Prepare audit workpapers and report findings
2	2	Collaborate/cooperate with external and regulatory auditors
4	3	Investigate compliance reports and issues
3	4	Conduct due diligence and compliance audits using set rules, P and Ps
5	5	Recommend/monitor disciplinary and corrective action plans
8	6	Monitor/apply OIG and GSA sanction list
7	7	Develop compliance programs
6	8	Interpret/apply/disseminate laws, accreditation, licensure and mandates
9	9	Develop risk assessment surveys

**Contracts and Negotiations**

2004 Ranking	2006 Ranking	
1	1	Negotiate with external auditors
3	2	Negotiate with payors
2	3	Review/write contracts

**Audit Skill: Interaction and Communication**

2004 Ranking	2006 Ranking	
1	1	A: Nurses and other clinicians
3	2	C: Senior management team
2	3	B: External auditors
4	4	D: Physicians
5	5	E: Regulatory auditors
6	6	F: Attorneys

**Denial and Appeals Management**

2004 Ranking	2006 Ranking	
2	1	Participate in denial and appeal discussion and follow-ups
3	2	Tracks and review denied claims
1	3	Conduct adjustments and payments
5	4	Write appeal letters
4	5	Recommend business process rules

**AAMAS Practice Analysis**  
**At-a-Glance Summary Report and Comparison with 2004 Survey**  
**Conducted by the Center on Education and Training for Employment, Ohio State University**

**Health Information Management (Medical Records)**

2004 Ranking	2006 Ranking	
3	1	Maintain record storage and filing systems
1	2	Collect data for internal/external use (QA,UM, RM and other related studies)
2	3	Perform quantitative and qualitative analysis of health records
5	4	Abstract/collect records for department indices/databases/registries
4	5	Calculate and interpret healthcare statistics
7	6	Evaluate software and coding systems
6	7	Monitor and enforce JCAHO standards on HIM
8	8	Monitor credentialing programs

**Specific knowledge and skill set required**

2004 Ranking	2006 Ranking	
2	1	Problem Solving
1	2	Clinical Judgement
4	3	Accounting/Finance
3	4	Nursing Process
6	5	Health Information Mgt. Principles
5	6	Negotiating
7	7	Statistics
10	8	Research
9	9	Quantitative Analysis
8	10	Project Management
11	11	Proposal Writing
12	12	Programming & Configuration

**Leadership and Managerial**

2004 Ranking	2006 Ranking	
1	1	Participate in internal/external work groups/committees
3	2	Develop departmental policies and procedures
4	3	Develop strategic plans, goals and objectives for unit/dept assigned
2	4	Develop productivity, quality control, and process improvement measures
5	5	Hire/recommend/terminate staff
6	6	Conduct performance appraisals
9	7	Supervise nursing or clinical staff
7	8	Prepare/submit budget
8	9	Supervise billers/patient accounting or claims personnel
10	10	Supervise coding, MT or HIM personnel

**Medical Audit Environment**

**Application of laws, guidance, standards, guidelines and other accrediting bodies**

2004 Ranking	2006 Ranking	
1	1	HIPAA
2	2	State mandated laws
4	3	National Audit Guidelines
3	4	Medicare/Medicaid Policies
8	5	OIG Compliance Guidance
5	6	JCAHO
6	7	National Coverage Issues
7	8	Medicare Integrity Program
10	9	GAAP Principles
11	10	UM/UR Guidelines (Interqual, Milliman)
15	11	Sarbanes-Oxley Act
9	12	Health Insurance reimbursement methodology
12	13	NCQA/Hedis
13	14	AICPA standards
14	15	US Sentencing Rules

**Acknowledgements**

The AAMAS Board would like to express its appreciation to Dr. Jim Austin and his staff from the CETE-OSU for conducting a comprehensive deliverable and assisting AAMAS in conducting this survey. This is the first phase in the long process of CMAS certification testing and validation.

Foremost, many thanks to the survey participants who took time out of their busy lives and completed the Practice Analysis survey online. Your responses defined "who and what" Medical Auditors are.