

STATE OF WISCONSIN  
CLASSIFICATION SPECIFICATION

HEALTH INFORMATION TECHNICIAN 1, 2  
CLASSIFICATION SERIES

I. INTRODUCTION

A. Purpose of This Classification Specification

This classification specification is the basic authority under Wis. Admin. Code ER 2.04 for making classification decisions relative to present and future generalist technical medical records positions within a State institution or health care delivery system. These positions are differentiated from medical record administrative support positions (e.g., Clerical Assistants, Medical Program Assistants, Office Associates, Office Operations Associates, University Services Associates) by the vocational preparation or substantial relevant medical experience needed for successful performance of medical coding, analysis of healthcare provider documentation and other technical duties. This classification specification is not intended to identify every duty that may be assigned to positions, but is intended to serve as a framework for classification decision making in this occupational area.

Classification decisions must be based on the “best fit” of the duties within the existing classification structure. The “best fit” is determined by the majority (i.e., more than 50%) of the work assigned to and performed by the position when compared to the class concepts and definition of this specification or through other methods of position analysis. Position analysis defines the nature and character of the work through the use of any or all of the following: definition statements; listing of areas of specialization; representative examples of work performed; allocation patterns of representative positions; job evaluation guide charts, standards or factors; statements of inclusion and exclusion; licensure or certification requirements; and other such information necessary to facilitate the assignment of positions to the appropriate classification.

B. Inclusions

This series encompasses positions performing a variety of technical medical records duties including medical coding, analyzing the documentation of patient care in the medical record, abstracting information from healthcare provider notes in the medical record, and independently evaluating and responding to requests for release of health information.

C. Exclusions

Excluded from this classification series are the following types of positions:

1. Office support positions that for a majority of the time perform non-technical medical records-related work such as assembling, routing, and filing medical records, maintaining patient and billing databases and indices, word processing, scheduling patient appointments, patient reception, handling cash transactions, or other clerical office

duties, and do not perform medical coding or qualitative review of medical coding at least 10% of the time and are more appropriately classified as Clerical Assistant, Office Associate, Office Operations Associate or University Services Associate.

2. Positions that for a majority of the time perform administrative support activities for a medical program included in a clinical practice and/or medical education and are more appropriately classified as Medical Program Assistant.
3. Positions that perform medical coding duties for more than 50% of the time and are more appropriately classified as Coding Technician.
4. Positions that perform medical transcription duties for more than 50% of the time and are more appropriately classified as Medical Transcriptionist.
5. Positions meeting the statutory definition of supervisor or management in Wis. Stats. 111.81(19) and (13) as administered and interpreted by the Wisconsin Employment Relations Commission.
6. All other positions more appropriately identified by other classification specifications.

D. Entrance and Progression Through This Series

Entrance into this series is by competition. This is not a progression series; reclassification from one level to a higher level will occur only when it can be demonstrated that the changes in duties and responsibilities justifying the class change are a logical and gradual outgrowth of the position's previous duties and responsibilities and a majority of the work is defined at the higher level.

## II. DEFINITIONS

### HEALTH INFORMATION TECHNICIAN 1

Positions are located in the medical records unit of a State institution or health care delivery system and apply formal vocational training or equivalent experience in medical terminology, coding, and medical record contents and processes to store, retrieve, abstract, analyze, encode, process, and release patient/inmate/member health-related information. Work is performed under general supervision. Medical records may exist in paper or electronic form, and a wide variety of health record indices and computer databases may be utilized. Positions may coordinate the activities of administrative support staff. Positions in this classification are differentiated from administrative support or clerical medical records positions by performing or reviewing medical coding at least 10% of the time as a key component of the job in fulfilling operational needs. Positions in agencies where the 10% coding time is not a factor (DOC, UW-Madison) must be performing the remaining duties for a majority of the time.

#### Examples of Work Performed:

- Evaluate active and discharge medical files for both completeness and quality of documentation.

- Assign diagnosis and/or procedure codes, utilizing standard classification systems such as the *International Classification of Diseases (ICD)*, *Current Procedural Terminology (CPT)*, or *Diagnostic and Statistical Manual for Mental Disorders (DSM)*.
- Provide training and direction to health care staff regarding medical record completion, management and confidentiality requirements.
- Contact physicians and other health care staff as needed to remedy identified record deficiencies.
- Follow statutory guidelines and other regulations to independently evaluate and respond appropriately to requests from individuals, families, legal representatives, insurance companies, healthcare providers or government agencies for the release of patient/inmate health information.
- Participate in Quality Assurance/Improvement activities such as performing random audits of medical record documentation, monitoring the quality of patient care by reviewing patient documentation against clinical pathways or performing special projects as assigned.
- Assemble or reactivate medical record files for admissions, route records as needed, and maintain patient databases.
- Compile census or utilization statistics.
- Assist researchers in collecting health-related information.

## **HEALTH INFORMATION TECHNICIAN 2**

This is advanced level work. *In addition* to performing the technical health information duties described at the first level of this series, including medical coding (not a factor DOC and UW Madison), analyzing and auditing medical record documentation, providing direction to staff in medical record documentation requirements and responding to requests for release of health information, positions at this level have advanced responsibilities for either: (1) assisting in the administration of a program of multiple institution, agency-wide scope; (2) functioning with a high level of accountability as a program's highest-level medical records expert and coordinator; or (3) generating more than \$100,000 annually in additional revenues through code-based reimbursements.

### Example of the first allocation, *assisting in the administration of a program of multiple institution, agency-wide scope:*

Functions as the assistant to the health information supervisor in the day-to-day management of the state-wide medical records operation in the Department of Corrections Bureau of Health Services. This medical records operation is responsible for the medical records of all offenders incarcerated in the state prison system, as well as "inactive" records subject to reactivation when prior offenders are re-incarcerated. This position functions as lead worker for other technical health information positions by coordinating and reviewing their work. This position also provides training, support and guidance to Department of Correction's Health Services Units regarding medical records, and audits their compliance with regulations and standards.

### Examples of the second allocation, *functioning with a high level of accountability as a program's highest-level medical records expert and coordinator:*

Functions under the general supervision of the Director of the Student Health Center at UW-LaCrosse, with independent responsibility to develop, maintain and evaluate a comprehensive medical record system for all patients using the services of the Student Health Center. This position coordinates and reviews the work of several medical records assistants, including permanent and LTE positions, office reception staff, and also trains students enrolled in a medical records technician program.

One of a team of two technical medical records positions at the Wisconsin Veterans Home (WVH) at King, functioning independently under the general supervision of the Clinical Coordinator whose training

and primary functional responsibility is not for medical records management. These two positions equally share responsibility as the technical authorities regarding medical records for the WVH's four separately licensed skilled care nursing homes, and ensure that the administration of medical records meets federal and state standards for skilled nursing care facilities.

Example of the third allocation, generating more than \$100,000 annually in additional revenues through code-based reimbursements:

For a majority of the time, performs medical coding, analyzes and audits medical record documentation, provides direction to staff in medical record documentation requirements and responds to requests for release of health information. *In addition*, substantially enhances program revenues by performing coding of diagnoses, procedures, or other services for code-based reimbursement from Medicare, insurance companies, or other third-party payers. Coding is performed with the goal of maximizing reimbursement revenue while complying with frequently changing insurance rules and government regulations. Coding for reimbursement must result in annual reimbursements exceeding \$100,000 for positions to be classified at this level.

### **III. QUALIFICATIONS**

The qualifications required for these positions will be determined at the time of recruitment. Such determinations will be made based on an analysis of the goals and worker activities performed and by an identification of the education, training, work, or other life experience which would provide reasonable assurance that the knowledge and skills required upon appointment have been acquired.

### **IV. ADMINISTRATIVE INFORMATION**

This classification series was created effective July 2, 2000 and announced in Bulletin CLR/SC-115, and completed the implementation of the Medical Records Survey. This series replaced the Medical Record Technician 1, 2 series abolished on this same date. The classification was modified effective September 12, 2010 and announced in Bulletin OSER-0272-CLR/SC to describe positions in agencies where the 10% coding time is not a factor. These positions must be performing the remaining duties for a majority of the time.

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