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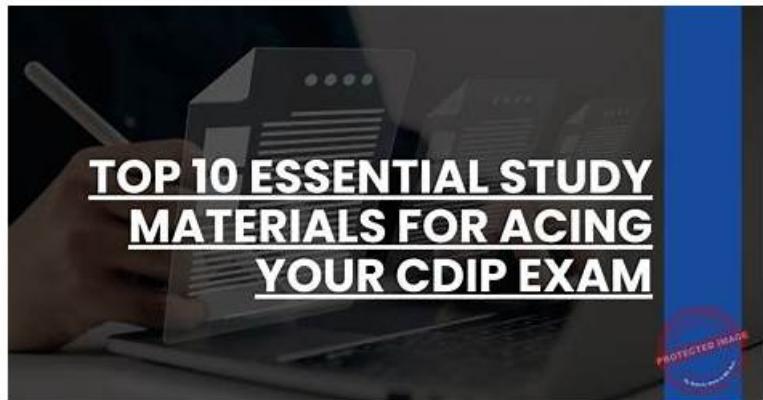
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AHIMA Certified Documentation Integrity Practitioner Sample Questions (Q61-Q66):

NEW QUESTION # 61
The clinical documentation integrity (CDI) manager has noted a query response rate of 60%. The CDI practitioner reports that physicians often respond verbally to the query. What can be done to improve this rate?

- A. Require physicians to document responses in charts
- B. Allow physician to respond via e-mail
- C. Have CDI manager teaming with coding supervisor to monitor physician responses
- D. Permit CDI practitioners to document physician responses in the charts

Answer: A

Explanation:
Explanation
According to the AHIMA/ACDIS Query Practice Brief, one of the best practices for a compliant query process is to require physicians to document their responses to queries in the health record1. This ensures that the documentation is consistent, accurate, and complete, and that the query and response are part of the permanent record. Verbal responses are not acceptable, as they do not provide a clear audit trail and may lead to errors or discrepancies in coding and billing1. Therefore, the CDI manager should

educate the physicians on the importance of documenting their responses in the charts and monitor their compliance. The other options are not recommended, as they may compromise the integrity of the documentation or violate the query guidelines1.
References:
Guidelines for Achieving a Compliant Query Practice (2019 Update) - AHIMA

NEW QUESTION # 62
The BEST place for the provider to document a query response is which of the following?

- A. An addendum to the history and physical
- B. The next progress note and all subsequent notes including the discharge summary
- C. The query form
- D. The next progress note and the problem list

Answer: D

Explanation:
Explanation
The best place for the provider to document a query response is the next progress note and the problem list because this ensures that the query response is timely, consistent, and integrated into the health record. According to the AHIMA/ACDIS query practice brief1, the provider should document the query response in the health record as soon as possible after receiving the query, preferably in the next progress note.
The provider should also update the problem list to reflect any new or revised diagnoses resulting from the query response. This helps to maintain an accurate and comprehensive list of the patient's current and chronic conditions, which can facilitate continuity of care, quality reporting, and reimbursement. Documenting the query response in an addendum to the history and physical or only on the query form is not sufficient, as it may not capture the current status of the patient or be easily accessible to other providers or coders.
References:
CDIP Exam Content Outline (https://www.ahima.org/media/1z0x0x1a/cdip-exam-content-outline.pdf) Guidelines for Achieving a Compliant Query Practice-2022 Update1

NEW QUESTION # 63
Besides the physician advisor/champion, who should be included as a key stakeholder in the clinical documentation integrity (CDI) steering committee to promote CDI initiatives?

- A. Director of Informatics
- B. Manager of Surgical Services
- C. Manager of HIM/Coding
- D. Director of Risk Management

Answer: C

Explanation:
Explanation
The manager of HIM/Coding should be included as a key stakeholder in the clinical documentation integrity (CDI) steering committee to promote CDI initiatives because they are responsible for overseeing the coding and billing processes, ensuring compliance with coding guidelines and regulations, and collaborating with the CDI team to resolve coding and documentation discrepancies. The manager of HIM/Coding can also provide feedback on the CDI program's impact on coding quality, accuracy, productivity, and reimbursement. (CDIP Exam Preparation Guide) References:
CDIP Exam Content Outline1
CDIP Exam Preparation Guide2

NEW QUESTION # 64
A clinical documentation integrity practitioner (CDIP) is looking for clarity on whether a diagnosis has been
"ruled in" or "ruled out". Which type of query is the best option?

- A. None
- B. Yes/No

- C. Open-ended
- D. Multiple-choice

Answer: C

Explanation:
Explanation
An open-ended query is a type of query that allows the provider to respond with free text, rather than choosing from a list of options or answering yes or no. An open-ended query is appropriate when the CDIP is looking for clarity on whether a diagnosis has been "ruled in" or "ruled out", because it allows the provider to document the final diagnosis or impression based on the clinical evidence and reasoning. An open-ended query also avoids leading or suggesting a specific diagnosis to the provider, which could compromise the integrity and validity of the documentation. (Guidelines for Achieving a Compliant Query Practice (2019 Update) - AHIMA1)
References:
Guidelines for Achieving a Compliant Query Practice (2019 Update) - AHIMA1

NEW QUESTION # 65
A clinical documentation integrity practitioner (CDIP) has been successful in getting physicians to respond to queries. However, when the CDIP poses a query to a specific doctor, there is no response at all. The CDIP has tried face-to-face conversations, calling, emails, texts, but still gets no response. What is the next step the CDIP should take?

- A. Hold a meeting with the CDI director and the doctor to find out why the doctor is not responding to the queries
- B. Report the doctor to the Vice President of Medical Affairs so the doctor understands the importance of clinical documentation
- C. Warn the other CDIPs that the doctor is a non-responder and to forego querying
- D. Elevate the issue to the physician advisor/champion after the CDI supervisor has reviewed the case and deemed the query appropriate

Answer: D

Explanation:
Explanation
According to the Guidelines for Achieving a Compliant Query Practice (2019 Update) - AHIMA1, a query escalation policy should describe how to handle situations in which an answer is not received, an inappropriate answer or comment is provided, etc. The escalation policy should address when the issue is brought to the physician advisor, the department director, or administration with defined actions as to the responsibilities at each level. The policies should reflect a method of response that can realistically occur for the organization1. In this case, since the CDIP has tried multiple methods of communication with the doctor but still gets no response, the CDIP should elevate the issue to the physician advisor/champion, who can facilitate communication and education with the doctor and ensure documentation integrity and compliance1. However, before escalating the issue, the CDIP should consult with the CDI supervisor to review the case and confirm that the query is appropriate, relevant, and compliant with the query guidelines1. This would ensure that the escalation is justified and not based on personal bias or preference.
The other options are not advisable because they either involve skipping the escalation policy, reporting the doctor without proper review or feedback, holding a meeting without involving the physician advisor/champion, or giving up on querying altogether.
References:
Guidelines for Achieving a Compliant Query Practice (2019 Update) - AHIMA1

NEW QUESTION # 66
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