

Anticipating the EHR: a Coding Department Gets ahead of the Curve with Workflow Analysis

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by Chris Dimick

With the hospital's emergency department converting to a completely electronic record, the coding department at Cleveland Clinic had a choice. Staff could sit tight, wait for the implementation to roll out, and then be rocked in its wake.

Or they could set out to meet the system in advance. That's what they did, getting involved in the planning, analyzing their department's existing workflow, and determining how the electronic system would change it.

Mapping Each Step

Electronic health record (EHR) systems change workflows throughout an organization. For coding professionals, new digital systems revamp the sources they code from, changing how and when they receive documentation. An EHR implementation may also alter the content of the records coders use to assign codes.

That's why coding departments should be involved in EHR implementation discussions from the very start, says Susan Belley, MEd, RHIA, the coding manager at Cleveland Clinic. This ensures that coder workflow and data integrity concerns are considered during planning. It helps the department and the organization maintain data integrity, ensures documentation is standardized to meet patient care and safety goals, and maximizes the new system's potential.

Cleveland Clinic, based in Cleveland, OH, implemented its emergency room EHR system in September 2006. Prior to implementation, Belley worked to represent her department's interests during planning. To do this, she took part in a multidisciplinary implementation task force that included IT, physicians, HIM, the EHR vendor, and others. "We had many meetings, and we worked through the process," Belley says. She kept coding staff abreast of "what was going to be coming down the pike and when."

The coding department made its own preparations in anticipation of the electronic switch. Coding staff mapped out each step of the department's workflow and discussed how it would be affected by the EHR. "We walked through the whole process over and over again," Belley recalls.

Most of the workflow mapping had been done earlier as part of a departmental initiative to shorten the amount of time it took to receive records for coding. Although the analysis was done independently of the emergency room EHR implementation, the work paid off because Belley could use the information learned during that initiative to better design her electronic workflow.

The workflow analysis wasn't easy, Belley admits. But it is worthwhile for any coding department. "Nobody likes to break apart processes-it is a tough kind of thing," she says. "So, you may be forced to do so because you are moving into an electronic world, but that is not a bad thing. Better understanding eliminates unnecessary steps and streamlines the process."

At the Tip of the Iceberg

Although the emergency department system has been implemented, Belley's efforts are far from over. The facility is implementing its EHR piece by piece, and the next step is adding digital physician documentation such as progress notes to the system. Belley has again joined a multidisciplinary group to discuss implementation. She wants to protect the records' content and ensure progress notes clearly document the patients' conditions so that coders may code thoroughly.

"I have some clear-cut things that I want to make sure are going to be there, that aren't going to be lost, that the patient's story is still going to be told by the physician," she says. In discussions about content, Belley says the group talks about Joint Commission requirements as well as other regulatory compliance issues.

This won't be the last proactive step her department takes in transitioning to e-HIM, Belley says. More change is sure to come. "We are just at the tip of the iceberg," she says.

"I think people do need to say, 'This is the future,'" she says. Of course, the future isn't always easy. It offers benefits, but laying the groundwork takes work. "You have to consider it a challenge," Belley says, "but a good challenge."

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