

# Bringing Inpatient, Outpatient Coding to the Foreground

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By Wylecia Wiggs Harris, PhD, CAE, chief executive officer

We don't often see HIM in the headlines, due to the "behind the scenes" nature of the profession. But we may be seeing that change as patients and patient advocates make their voices heard.

Their stories can be compelling, but they are not always positive. For instance, consider this striking testimonial by Ursula Rogers, an informaticist at Duke Forge, formerly the Duke Center for Health Data Science.

Rogers's daughter was "born with serious health challenges... that required a long-term stay in the hospital's pediatric intensive care unit." Her medical team was supportive, but other aspects of the experience fell short. "There were significant errors in my daughter's medical record," Rogers writes. "Information wasn't being shared effectively across providers on her team. Bad data 'stuck' to the medical record even after it was corrected. ...These challenges are especially frustrating because at the same time, we're sitting on an unbelievable wealth of information that could empower patients and physicians, advance research, and improve care—if only we can figure out how to fit all the pieces together."<sup>1</sup>

Rogers's story illustrates why the work of HIM professionals is so important. HIM helps ensure data integrity, which makes a difference to patients and the care they receive. This month's *Journal* highlights the evolving areas of inpatient and outpatient coding, two types of critical "behind the scenes" work that we need to bring to the foreground.

A new challenge for physician practice coding professionals began this year with the introduction of categories and codes to define clinician/patient relationships for use in determining Medicare cost attribution, as required by MACRA. In "Relationship Status—Best Practices for Reporting New Patient Relationship Category Codes," Mary Butler discusses why these new categories/codes were developed, what they are, how to use them, and issues that coding professionals may encounter.

Audits are becoming increasingly common ways to improve coding accuracy and compliance. In "Audits Offer Fix for Poor Coding Compliance, Lagging Reimbursement," Julia Hammerman, RHIA, CPHQ, explains that while audits offer significant opportunities for improvement, they are most effective when partnered with education programs.

Like everyone else, coding professionals find themselves in need of mentors as beginners, and in need of career bridges to new roles as they become more seasoned. In "How to Get Ahead in Coding," Daniel Land, RHIA, CCS, explains how one company created an ICD-10 apprenticeship academy and an outpatient auditor academy to create a better career "infrastructure" for its coding professionals.

Finally, patient identification and matching continue to be challenges for healthcare, despite improvements in biometric identification methods and master patient index software. In "Show Me Some ID," Mary Butler explains how some organizations are meeting these challenges and what's working.

All these articles highlight ways HIM professionals can emerge from the background and keep health information accurate, timely, and in the right place at the right time. That's an important part of our story.

## Note

1. Rogers, Ursula. "When Data Science Meets the Real World." Duke Forge Blog. April 4, 2018.  
<https://forge.duke.edu/blog/when-data-science-meets-real-world>.

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