Building the Coding Career Ladder

Save to myBoK

By Janis Leonard, RHIT, CCS

Prior to the implementation of ICD-10-CM/PCS, Albany Medical Center (Albany), based in Albany, NY, was struggling with attracting qualified coding candidates. Despite recruitment efforts including sign-on bonuses and incentive pay, Albany was unable to maintain staffing levels to meet the coding demands created by increasing patient volume. As a proactive measure Albany staff decided to take matters into their own hands and create both a coding career ladder and a coding apprentice program. The issues that drove the creation of these programs were stalled recruitment efforts, the looming implementation of ICD-10-CM/PCS, and the expectation of reduced coding productivity.

The Coding Ladder Program

The concept of the career ladder was very important to Albany as it was designed to not only draw new coding professionals to the field but also recognize the skills of existing staff. The goal was to retain Albany's qualified coding staff and attract experienced coding professionals to the organization. Although Albany's turnover rate was low at the time, several coding staff planned to retire prior to the implementation of ICD-10-CM/PCS, which further necessitated new hires.

Specific criteria were developed to assist coding professionals in advancement along the coding path. Goals were set to define advancement to the next level. In addition, new opportunities were established in the coding unit.

Previously, there were two levels of coding staff: coding specialist and senior coder. Coding specialists were assigned either inpatient or outpatient service type records for coding. The senior coding staff had the additional responsibly of coding quality reviews and audits.

Several steps were required in order to prepare for the implementation of the coding ladder and apprentice programs:

- The first step consisted of an evaluation of all coding positions including job title, levels and pay grades, years of experience, HIM/coding credentials, and the complexity of each position.
- The second step was to create new titles for the coding staff along with the establishment of minimum qualifications for each position.
- The third step was to evaluate current coding staff and determine the most appropriate title based on their experience and qualifications.
- As individuals were slotted in their new titles, pay increases also were given based on the title each individual was placed in.

The table below identifies the titles and minimum qualifications required for each position.

External candidates, when hired as coding staff, are placed in a position based on the job description qualifications.

Team Lead Role

Our approach to the team lead position was critical as it provides a higher level of coding expertise within the coding structure. It also allows for increased management support in terms of coding workflow and telecommuting. Working closely with the imaging team, the team lead ensures charts are available in the electronic health record for coding. The team lead monitors the discharged not final billed and allocates staff accordingly. This position is also responsible for providing a higher level of coding quality review and productivity monitoring. Finally, it allows for a career opportunity for the right individual.

Coding Auditor

One of Albany's coding positions was converted to a coding auditor role. This individual reviews all third party disputes. When trends are identified, coding-related information along with feedback is provided to the coding unit. Documentation concerns are discussed with the clinical documentation team.

Minimum Qualifications for Coding Positions

| The following table identifies the titles and minimum qualifications required for each position at Albany Medical Center. | |
|---|---|
| Coding Apprentice | Recent graduate; completion of a coding course; credential such as CPC, CPC-A, CCA, CCS; little or no coding experience |
| Coder I | Successful progression as a Coding Apprentice; minimum six months coding experience |
| Coder II | Five years experience as a Coder I |
| Senior Coder | RHIT, RHIA, CCS, or CPC; college degree; greater than five years coding experience |
| Sr. Coder – Lead | RHIT, RHIA, CCS or CCP, college degree; greater than five years coding experience; audit and chart review experience |
| Coding Trainer | RHIT or RHIA with a coding credential; greater than five years coding experience; teaching experience |
| Coding Auditor | RHIT or RHIA with a coding credential; greater than five years coding experience; chart audit experience |

Coding Apprentice Program

Albany staff realized that in order to have a successful coding apprentice program, a coding trainer would be required. Working with a consultant and Albany's human resources department, staff was able to obtain approval to hire a full-time coding trainer. This position is responsible for training and mentoring the apprentice staff, developing curriculum, and designing the criteria for the coding apprentice to advance to the Coder I position.

Initially, four individuals were hired as coding apprentices. The program started with emergency department coding training. Working with the coding trainer, all four apprentices were promoted to Coder I positions within six to eight months of starting the program. Promotion was based on meeting or exceeding established quality and productivity goals for a specified period of time. Two of these individuals have been successfully cross-trained in inpatient and ambulatory surgery coding. Four additional apprentices are progressing in the program and three new coding apprentices have recently been hired to Albany's team.

Albany contracted with an external training program that provides learning modules in anatomy and physiology, medical science, medical terminology, ICD-10-CM/PCS, and CPT coding. The apprentice staff study the modules and complete a competency-based assessment for each lesson. Each day is spent completing the modules, coding emergency department records, and attending classroom training. The trainer reviews each record coded by the apprentices and provides feedback.

Another benefit of the apprentice program is the advancement of internal HIM employees who are interested in a career in coding. Four of the apprentices were internal candidates who met the criteria to apply for the program and others are completing their coding classes.

Developing Community Outreach

Albany partnered with a community group and local college to provide a scholarship to qualified individuals who are enrolled in a coding program. After successful completion of the coding program and earning their coding credential, these individuals were welcome to apply for the apprentice program at Albany.

Staff felt very fortunate that the leadership of their organization recognized the value in supporting the career development of employees, and supported providing opportunities for newly credentialed coding professionals. The career ladder and apprentice programs have proven to be successful initiatives for Albany, and also provide opportunities for local coding professionals. Notable positive results include increased job satisfaction, incentive programs, advancement opportunities, and employee retention.

Janis Leonard (LeonarJ@mail.amc.edu) is the HIM director at Albany Medical Center in Albany, NY.

Article citation:

Leonard, Janis. "Building the Coding Career Ladder" *Journal of AHIMA* 88, no.5 (May 2017): 62-63.

Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.