Clinical Coding: Part of the HIM Mosaic

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by Linda Kloss, RHIA, CAE, executive vice president/CEO

Many in healthcare today understand coding only in the context of billing, not recognizing that the very same coded data are used for important healthcare operations, policy, epidemiology, and many other uses. For 75 years, AHIMA has been the professional forum to advance the quality of health information, and coding is a vital part of the HIM mosaic.

The New Coding Reality

AHIMA gleaned valuable data on the coding profession through the Association's work force research. In "Coders Today: Where They Work, What They Earn," Scott MacKenzie, AHIMA's director of market research/senior marketing manager, discusses these results and finds that today's salaries for coders better reflect the competencies and skills required to be effective.

Ensuring AHIMA's Coding Leadership

Coding leadership is a priority for AHIMA. Significant resources are devoted to:

- Supporting the needs of current coders and coding managers: As a member-centered, not-for-profit association, professional development for members is a mission-critical commitment. AHIMA offers a full range of resources for new through expert coders and those who manage coding functions, including e-learning, audio seminars, regional seminars, the National Convention, textbooks and practice publications, the FORE Library: HIM Body of Knowledge, "Coding Notes" and "Compliance Check" articles in the *Journal*, the monthly "CodeWrite" electronic newsletter and online Communities of Practice for virtual networking, and Coding Roundtables for networking in person in your own community.
- Supporting advances in coding and classification systems and vocabulary: AHIMA is a member of the Coordination and Maintenance Committee for ICD-9-CM, the editorial review board for *Coding Clinic*, and the CPT Editorial Panel. At the request of the National Center for Health Statistics, AHIMA is currently conducting a study of factors in implementing ICD-10-CM and is co-chairing a panel to redesign evaluation and management criteria for outpatient services. AHIMA also completed research on rules for mapping from SNOMED to ICD-9-CM.[1]
- Advocating for sound coding policy: AHIMA advocates replacing ICD-9-CM with ICD-10-CM and replacing ICD-9-CM Volume III with ICD-10-PCS for inpatient procedural coding. In addition, the Association has submitted formal opinions and testimony on coding and reimbursement policy one or two times per month for the past several years.[2] AHIMA has worked to convince payers to abandon practices that violate official coding guidelines and lead to inconsistent coding practice—and unreliable healthcare data.
- Developing the highly skilled work force grounded in HIM: Due to the coder shortage, training programs have proliferated but most don't meet AHIMA's coder training criteria, which demands solid and comprehensive training to prepare individuals for success as coders.[3] Indeed, AHIMA's entry-level and advanced coder education and certification are the gold standards in the industry. Based on valid national job analysis, certification exams evaluate skills needed for proficient coding. AHIMA has served as an official registry of credentialed individuals since the 1930s and requires periodic assessment and reappraisal of continuing competency.

Healthcare terminologies and code sets will continue to be part of this mosaic even as HIM becomes e-HIM.

Notes

1. See "AHIMA Project Offers Insights into SNOMED, ICD-9-CM Mapping Process," pages 52–55.
2. Available at www.ahima.org/dc.
3. For qualifications to be an approved coding training program, go to www.ahima.org and click on "HIM Careers."

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