

Coding's Promising Future: CAC and ICD-10 Offer Opportunities, Require Professional Development

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The increasing complexity of the coding process and the pressure to reduce accounts on hold and accounts receivable days and improve cash flow are enough to have every good coding professional seeking solutions. Healthcare reform calls for us all to continually review areas for improvement, which for coding means accurate and compliant coding and reimbursement that can withstand the review of any auditor. It also means increased productivity and decreased costs.

Although computer-assisted coding (CAC) will not change some of the underlying documentation issues that affect coding, it could enhance the process for coding professionals. CAC will not undermine or negate the coding professional's skills and clinical knowledge-in fact, it is likely that using CAC tools will refine and enhance these skills.

Understanding CAC

CAC uses either natural language processing or structured data input to generate codes.

Natural language processing can help boost a coding professional's productivity by mapping terminology to relevant text. In this type of system, steps in the workflow process could prevent coders from receiving the record until key documents are available.

On the other hand, structured data input is driven by healthcare providers documenting care. Structured input requires HIM professionals' expertise regarding health record content management.

In either case, coding professionals need to review the codes generated by CAC to ensure accuracy and proper reimbursement.

Preparing for ICD-10

The implementation of ICD-10-CM/PCS is a vital step in improving the quality of healthcare and maximizing recent federal initiatives like ARRA. That was part of the message conveyed at AHIMA's 2010 ICD-10 Summit, which took place in April in Washington, DC. The event featured HIM and coding experts from around the country discussing how the transition to ICD-10-CM/PCS in 2013 will affect the healthcare industry.

It is important that healthcare leaders recognize that, though this is a technological change, it is not just an IT issue. The transition will affect business processes throughout an organization and the entire healthcare industry. Precise coding and detailed documentation will become more important.

I recently read "The ICD-10 Invasion: 'Keep Calm and Carry On'" by Rhonda Butler in the April issue of AHIMA's *ICD TEN* e-newsletter. The title of the article says it all. We must remember that coding will not change with ICD-10. We must embrace the changes that this new opportunity brings. (You can receive *ICD TEN* by visiting <http://newsletters.ahima.org/Newsletters/ICDTen/subscribe.html>.)

All AHIMA-certified professionals will be required to participate in a predetermined number of mandatory baseline educational experiences focusing specifically on ICD-10-CM/PCS starting January 1, 2011. For more information on ICD-10 CEUs, visit www.ahima.org/certification/recertification.aspx.

We as HIM professionals have always embraced lifelong learning. Now we must take full responsibility for this proactive process for ourselves and our organizations. So let's keep moving forward proudly toward our future.

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Article citation:

Bowen, Rita K.. "Coding's Promising Future: CAC and ICD-10 Offer Opportunities, Require Professional Development" *Journal of AHIMA* 81, no.7 (July 2010): 10.

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