

Connecting Coded Data to Data Analytics

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What do population health, disease management, predictive modeling, and surgical case indices have in common? They are all a part of bridging coded data to real-time data analytics. Coding professionals have a long history of translating clinical documentation into a standard language. The healthcare industry has long sought a standardized data point for comparison needs. The benefits of ICD-10-CM/PCS have afforded the industry an expanded code set that has the potential to bridge these gaps.

Powerful Tools

Recent years have shown a change in focus for coding to that of secondary data usage. While claims data remains the most widely used source of coded data today, the addition of other elements such as medications, age, and geography makes the data richer and more meaningful.

Pairing code assignment to organizational data creates a powerful tool. Access to medical trends provides quality information back to the organization and knowledge of these trends allows for better patient care, improved cost control, and increased patient satisfaction. When paired with data analytics, coded data allows physicians to have access to vast predictive abilities for their patients. The importance of quality in coded data has morphed beyond the demands of revenue cycle activities to the source for measuring quality of care as well.

Long-Term Value

Accurate code assignment continues to play a key role in healthcare today. Data analytics allows organizations to be proactive in creating patient treatment plans, identifying trends, and predicting future patient populations. Understanding how to connect accurate coded data to data analytics will assist the organization in providing an accurate picture of their patients. As trends in Big Data continue to influence healthcare organizations, payers, and regulatory bodies, it is this connection that will allow for even larger data comparisons and research.

Being proactive puts every organization in the driver's seat of their own long-term sustainability. As the healthcare industry continues to push toward value-based payments, the need for a reliable connection between coded data and analytics lies directly ahead on the path to the future. This puts coding professionals on the front line in data analytics. Their ability to accurately code diagnoses and procedures plays a significant role in the development of population health efforts, disease indices, registries, and new clinical protocols.

Every organization must develop a long-term view of the value of coded data and its impact on data analytics.

Cultivate a New Mindset

Data is the future and many organizations and providers are focused on using healthcare data as a means to reinvent healthcare. To succeed in the future, coding professionals once more have the opportunity to reinvent themselves. Many coding professionals likely remember making the transition from code books to automated encoders. Encoders have provided multiple opportunities for coding professionals over the years—opportunities that the industry had not even conceived of 20 years ago.

Today's coding professionals are operating in an environment in which the weight of correct code assignment goes well beyond payment. And while payment is still crucial for organizations and providers, the data means so much more now as it is critical in determining the quality of patient care. Organizations that utilize data as an opportunity to proactively enhance quality of care will be those leading the healthcare industry in achieving reform goals.

Organizations should begin cultivating a new mindset for coders in the Big Data environment. Coding professionals need to expand their field of view to cover more than just the chart in front of them.

Web-Exclusive Online Column Discusses Coding Topics

CODE CRACKER IS a web-exclusive online column that posts new content on the *Journal of AHIMA*'s website every month. Facilitated by AHIMA's coding experts, the column addresses challenging areas of coding and explores opportunities for discussion among health information management professionals on coding-related topics.

The Code Cracker post for March, "Dense Breasts and Coding Mammography" discusses basics for mammography coding as it relates to dense breast tissue and the advocacy efforts of Nancy M. Cappello, PhD. After years of screening mammograms that always returned clear results, Cappello was shocked to receive a diagnosis of advanced stage 3 breast cancer. The reason the mammography hadn't found anything sooner was because she had dense breast tissue, which makes it difficult to detect abnormalities with standard mammography testing alone. Cappello also learned that it was not protocol for doctors to inform women they had dense breast tissue (she had never heard the term before her cancer diagnosis), even though it can only be detected by mammogram. Thanks to the efforts of Cappello and the advocacy group she founded, Are You Dense?, legislation has passed in several states to make it standard for doctors to inform women if they have dense breast tissue and for insurance companies to pay for ultrasound testing for women in this category.

The February post took on the topic of blockchain, asking "Is Blockchain Technology in Your Revenue Cycle Future?" While there has been much discussion about blockchain technology and what it could mean for areas such as the financial sector, what does the technology mean for health information management professionals that work in coding and billing? In order to answer this question, the author asks another: "What is blockchain technology and what does it have to do with the healthcare revenue cycle?" The post explores what applications of blockchain could mean in this context. "What if there were streamlined claims submissions, remittance, and payments for the provider with real-time determinations and claims adjudication for the payers?" Offering a brief explanation of blockchain technology and its origins, the author discusses the potential advantages it has to offer in the healthcare industry.

Check out the full post for these topics and future column posts at <https://journal.ahima.org/category/blogs/code-cracker/>.

Coded Data Tells the Patient Story

The impact and context of coded data showing an accurate patient picture will need to stand the test of time. Coded data tells the patient story five years, 10 years, and more down the road, and as such it is time to move past the notion that claims data is only needed for that one visit. Expanded roles for coders are achievable when they understand the bigger picture and seize opportunities to carry the patient story forward.

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Article citation:

Wiedemann, Lou Ann. "Connecting Coded Data to Data Analytics." *Journal of AHIMA* 90, no. 5 (May 2019): 46-47.

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