Developing Coding Professionals That Can Code Any Claim

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by Mary Butler

Prior to the implementation of ICD-10-CM/PCS, Chloe Phillips, MHA, RHIA, director, HIM and clinical revenue at Brookwood Baptist Health, and her team had a decision to make. Would her organization continue using CPT codes on outpatient and physician claims, or would they dual code them using CPT and ICD-10 PCS? Most health systems opted to continue using CPT codes alone, since those codes drive revenue. But the other significant factor is the fact that ICD-10-PCS requires much more training to use properly.

But rigorous coding training is something Brookwood Baptist has in spades, under Phillips' management. So when it came time for Phillips to decide if her team of coding professionals—all of whom work off-site—would use CPT or PCS/CPT, she brought the decision to her organization's coding roundtable.

"We really strive to seek feedback and employee engagement, and that's how I wanted to have engagement. They [the coding professionals] are going to be the ones coding these records," Phillips said.

The members of the roundtable were clear: they wanted to move forward to train on and use PCS after the October 1, 2015 go-live date. Several of the coding professionals at Brookwood are cross-trained and can code inpatient and outpatient claims, and they felt that understanding PCS would serve the facility and their own careers well.

"They felt that knowing PCS was a very knowledgeable skill set that would provide them with sustained marketability and functionality," Phillips said.

Brookwood Offers Extensive Training for Coding Professionals

Phillips' coding team can operate at the level it does because of the extensive training Brookwood offers coding professionals and the way Phillips has organized her workforce. She created a tiered career ladder for coding professionals, which has four levels. Level 4 coding professionals are at the top of the ladder, and they can code both inpatient and outpatient claims. One-third of Phillips' workforce are level at level 4. Level 3 coding professionals only work on inpatient claims. Coding professionals at level 2 can code any outpatient claims. Brookwood currently has no level 1 coders, which are the equivalent to entry level, due to the intensive "post-grad" training Phillips provides to recent graduates of RHIA and RHIT programs.

These post-grads, as Phillips calls them, may have little to no formal on-the-job training. The post-grad program was started in 2008 to create a foundation of coding professionals to choose from when vacancies in levels 2-4 opened. To be accepted into the post-grad program, individuals must have an RHIA or an RHIT. Phillips works with local universities and community college HIM programs to find recruits. After a selection and interview process that includes an exam and interviews. Based on their test results, post-grads are hired in to the level and service line Phillips and her colleagues feel they fit into best.

"If they do very well on their outpatient test, and they do really well on outpatient service line, we bring them in and start their training on outpatient, which is the basic outpatient diagnostic cases, ER, then to surgeries, and then to PCS coding and alterations. If they come in as inpatient, we'll start them off on our inpatient cases and promote them up our service line for inpatient," Phillips explains.

Maintaining a High Standard

In order for post-grads to move up the various coding service lines, they need to have three consecutive weeks of achieving a 98 percent accuracy rate on the claims they're coding—and that's with a 100 percent review of all the records they've coded.

Not only are they coding actual cases, but they're logging a lot of classroom hours. Phillips and her other coding team leaders score the post-grad claims just like auditors evaluate a hospital's claims during an audit.

"If it takes somebody longer to get off of the service line, we recognize they're on their level, but if you start giving them leeway from the get go, it's a lot harder to break a bad habit than create a good habit. So we are very stringent on their coding scores because again, their whole program is we're paying for individuals to come on to our facility to get paid, and they get benefits, same benefits coders get, they get every benefit our coding staff gets, but they get a lower pay wage and they have to learn how to code certain things by service line before they can move on to the next service line," Phillips explains.

The payoff is that coders who can hack it in the post-grad program get first dibs on level 2-4 jobs that open up, and Brookwood gets to reap the benefits of experienced coding professionals that are more likely to stick around. This system also helps them recruit for outpatient coding jobs, which typically are harder to fill than inpatient coding spots.

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