Effects of ICD-10 on Coding Productivity

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By Melanie Endicott

In the years leading up to ICD-10-CM/PCS implementation, doomsdayers chanted horror stories of expected productivity losses of up to 50 percent. Now that we are nearly six months post-implementation, I've yet to hear about an instance where such a prediction came true. In fact, I've heard over and over that productivity levels are almost at the same level in ICD-10 as they were in ICD-9. This is especially true in facilities that had robust training and dual/double coding in place leading up to the implementation date. These coding professionals were able to easily make the transition from ICD-9 to ICD-10.

So what can you do if your coding productivity is being negatively affected by the implementation of ICD-10? First off, the coding manager/director should have discussions with their staff regarding any areas that are challenging. Is the staff struggling with the nuances of ICD-10-CM or is it the procedure codes (ICD-10-PCS) that are causing the most difficulty? Focused training on the challenging areas may be needed to assist the coding professionals.

Another potential slowdown in productivity could come from incomplete documentation and the need for the coding professionals to have to dig deeper into the health record to find the level of detail they need to accurately assign the ICD-10 codes. If this is the case, then there may need to be education for the physicians on documentation needs. If your facility has a CDI program, this is where they will come in to educate the physicians on the nuances of ICD-10 and the need for more complete and accurate documentation. The physician query forms should have been updated for ICD-10 needs, and this is a great form of education to inform the physician of what type of verbiage is needed to accurately assign a code.

Now I'd like to hear from my readers out there. Please comment on this blog and let us know how ICD-10 has affected your productivity. Any great tips you'd like to share?

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Original source:
Endicott, Melanie. "Effects of ICD-10 on Coding Productivity" (Journal of AHIMA website),
March 10, 2016.

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