

Flowing with Coding's Changing Tide: The Evolving Role of Coders

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With the oncoming swell of ICD-10-CM/PCS (ICD-10) and computer-assisted coding (CAC), coders may be wondering what the future holds for their career. Some worry that the transition to ICD-10 will be very challenging for long-term coders who have been using ICD-9-CM for several decades. There is a concern that many of these expert coders will retire prior to implementation. In addition, there is the fear that CAC will replace coders.

While these and other issues are presently front-and-center in coders' minds, coders need to prepare for the rising tide of change in the healthcare industry.

Preparing for ICD-10-CM/PCS Implementation

The healthcare industry has been preparing for ICD-10 implementation for several years. Now that the implementation date has officially been set at October 1, 2014, proper preparation of employees is mandatory in order to be equipped for this oncoming change.

AHIMA has published a four-phase implementation approach, outlined in the ICD-10 Implementation Planning and Preparation Checklist posted on AHIMA's website. The approach includes a description of the tasks to be completed in each phase, as well as the individuals within the organization that will be affected.

Though the target audience for each of these phases varies, coding staff are involved in all four phases. During Phase I, a gap analysis of coding staff knowledge and skills (i.e., biomedical sciences, medical terminology, and pharmacology) for the ICD-10 environment should be conducted. Next, in Phase II, coders should increase their familiarity with the ICD-10 code sets and guidelines, as well as continue to fill in the gaps found in the Phase I analysis. Coders should be receiving intense education on the ICD-10 code sets during Phase III.

Training will not stop on the implementation date. Coders will continue to be trained during Phase IV to improve coding productivity and accuracy.

Following the steps outlined above will ensure that coders are well-prepared for ICD-10. Most healthcare facilities have an implementation plan in place to train their coders. However, coders in smaller facilities may need to take the initiative to train themselves. There are numerous training products available to coders to learn ICD-10, including online coursework, in-person workshops, webinars, and textbooks.

Riding the CAC Wave

Computer-assisted coding technology is changing how the coding process is accomplished across all healthcare settings. CAC allows coders to apply their analytical coding knowledge and become an "editor" of the computer-generated codes. Many hospitals have already implemented CAC-in most cases, aimed at the outpatient area-to improve coder productivity rates.

HIM experts agree that CAC will not replace coders. With CAC, coders must determine the final code selection based upon their knowledge of coding guidelines, clinical concepts, and compliance regulations. They will have the opportunity to agree or disagree with the coding options provided by the software.

To be successful with CAC, coders must use critical thinking skills, such as determining which suggested diagnoses and procedures should be coded. Coders must also have knowledge of anatomy, physiology, pharmacology, and coding guidelines when working with CAC.

Coders should embrace ICD-10 and CAC. These industry changes allow coders to assess their current skills and increase their knowledge. Both ICD-10 and CAC require strong analytical and critical thinking skills. With the continual changes in healthcare, coders must be lifelong learners and be open to change.

New Opportunities for Coders

There are many opportunities available to skilled coders, including clinical documentation improvement (CDI). The field of CDI is growing exponentially, and coders with strong clinical knowledge are the perfect fit for this very important position. CDI professionals review the provider documentation concurrently while the patient is still in-house to determine any gaps in documentation.

Both ICD-10 and CAC require specific and detailed provider documentation, which can be identified during the CDI process.

ICD-10 Implementation Planning and Preparation Timeline



Source: Bowman, Sue and Ann Zeisset. "[ICD-10-CM/PCS Transition: Planning and Preparation Checklist](#)." AHIMA, 2012.

References

Bowman, Sue and Ann Zeisset. "[ICD-10-CM/PCS Transition: Planning and Preparation Checklist](#)." AHIMA, 2012.

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