Maintaining Productivity During the Transition to ICD-10-CM/PCS

Save to myBoK

by Melanie Endicott

Tune in to this monthly online coding column to learn from AHIMA's coding experts about challenging areas and documentation opportunities for ICD-10-CM/PCS.

Coding supervisors are worried about predicted productivity losses in the transition to ICD-10-CM/PCS. There are multiple strategies to mitigate this anticipated productivity loss, as well as retain your skilled coders.

Training

The most effective way to keep productivity levels high during the transition is to ensure that the coders are well-trained in ICD-10-CM/PCS. This is not just a one-day, or even one-week, intensive educational session. Effective training involves continuous, ongoing practice in applying ICD-10-CM/PCS codes to actual patient health records. Many organizations are planning to do dual-coding beginning 6-12 months prior to implementation, which is an excellent method to really learn the nuances between ICD-9-CM and ICD-10-CM/PCS. It may not be practical to dual-code EVERY chart, but even just a couple charts per day is better than not doing anything at all.

Hire More Coders

Contract coding companies are happier than a Slinky on an escalator to provide contract coders to organizations during the transition. However, many of these companies are already booked up through the transition and finding skilled ICD-10-CM/PCS coders in 2014 may be a real struggle. Look no further than your local community college for highly trained coding professionals. There are over 200 CAHIIM-accredited (Commission on Accreditation for Health Informatics and Information Management Education) Associate degree HIM programs in the United States.

Graduates from CAHIIM-accredited colleges and university must meet rigorous standards and achieve a very high level of coding proficiency. Those students graduating in the spring/summer of 2014 will be perfectly poised to meet the industry's demands of skilled ICD-10-CM/PCS coders, plus, they won't have the added baggage of the years of ICD-9-CM knowledge to weigh them down. To view a listing of the CAHIIM-accredited programs in your area, go to http://www.cahiim.org/accredpgms.asp.

Use Technology

Another tool that is proven to assist with increasing productivity is computer-assisted coding (CAC). CAC can assist in assigning the codes from the documentation up front, and then the coders are able to verify the validity of the codes in an auditor-type role. After some time and practice with CAC systems, coders are typically able to increase their productivity significantly. However, implementing CAC and ICD-10-CM/PCS simultaneously could be as messy as a soup sandwich. Coders will need time to assimilate to the CAC system and become comfortable with the way it works. Organizations should consider implementing CAC well in advance of, or even after, ICD-10 implementation to ensure that coders are not over-burdened with too many changes.

What to Expect

Outpatient coders should expect to see a very small loss of productivity since ICD-9-CM and ICD-10-CM codes have very similar guidelines, structure, and use. Inpatient coders will likely see a productivity drop due to ICD-10-PCS being a very different system in both structure and application than the current ICD-9-CM procedure codes. It is imperative that inpatient coders be trained in-depth on ICD-10-PCS and need several months of practice assigning these procedure codes prior to implementation.

Following the above principles will help to mitigate productivity losses and a smooth transition to ICD-10-CM/PCS. Keep calm and code on!

Melanie Endicott, MBA/HCM, RHIA, CDIP, CCS, CCS-P, FAHIMA, is senior director of HIM practice excellence, coding and CDI products development at AHIMA. She has over 15 years experience in HIM and coding, with her most recent focus being in ICD-10-CM/PCS, and has presented numerous times at the regional, state, and national levels on HIM and coding topics. She was previously a director of HIM practice excellence, focusing on coding products, resources, and education, at AHIMA. Melanie is an AHIMA-approved ICD-10-CM/PCS trainer and an ICD-10 Ambassador.

Original source:
Endicott, Melanie. "Maintaining Productivity During the Transition to ICD-10-CM/PCS" ([Journal of AHIMA website](#)), August 01, 2013.

Driving the Power of Knowledge