

Taking Data to the Next Level

Save to myBoK

by Jane Jeffries, MFA, managing editor

“When I hear statistics on mortality or morbidity, I automatically think of the methods used to collect and tabulate the data and the hard work that goes on behind the scenes. I’m glad to be a part of that process.”

—Joyce Frazier, RHIA,
medical systems specialist, CDC NCHS

It’s pretty difficult to turn a career setback into an opportunity, but that’s just what Joyce Frazier, RHIA, did when she lost her job as an assistant director of medical records in a government hospital due to military downsizing. After performing a self inventory and evaluating her skills, “I decided to step outside of my comfort zone,” Frazier said. Through networking at an AHIMA national convention, Frazier found a DRG coordinator position, which served as a stepping stone to where she is today.

It Starts with Data

Frazier, a medical systems specialist at the Centers for Disease Control and Prevention National Center for Health Statistics (CDC NCHS), supports the National Health Care Survey (NHCS), a family of surveys designed to answer questions about utilization of healthcare services. The data, from ambulatory, inpatient, and long-term care facilities, are used by policy makers, planners, researchers, and others to monitor diseases, use of healthcare resources, and trends in healthcare utilization. Frazier serves as the ICD-9-CM expert and liaison on all coding matters related to the surveys.

Using data these surveys collect, she recently presented a paper to the World Health Organization Collaborating Center for the Family of International Classifications on the Reason for Visit Classification, a coding system developed by the NCHS to classify the patient’s subjective opinion about the condition or event that caused him or her to seek medical attention.

“The clients I serve include survey analysts, statisticians, epidemiologists, research scientists and students, healthcare marketing firms, and anyone else interested in using data from our surveys. It’s impossible to predict what the next phone call is going to bring,” Frazier says.

Frazier often sees the fruits of her labor on the news or in healthcare articles, when data from NCHS surveys are cited. “I feel a sense of achievement. That’s when the data reaches the public and the constituents that make decisions about healthcare,” she says. “So much of what we do goes unnoticed, but I know that behind the statistical findings are the medical record and coder.”

Given this reliance on coding, it’s vital that Frazier stays on top of coding changes, which is no small commitment. “I attend the Classification Work Group Meeting at NCHS, which reports on the status of classifications,” says Frazier. “I also attend Coordination and Maintenance meetings, listen to NCVHS meetings via the Web, and read the *Federal Register*, the *Journal*, and the E-alert.”

Networking Pays Off

Remember how Frazier got her DRG coordinator position? It wasn’t the first or last job she got through staying in touch with her peers. In fact, she nabbed the assistant director position while waiting during her son’s doctor’s appointment.

“I walked into the medical records department, introduced myself to the manager, and said I was looking for ways to improve the environment I was working in,” she says. Instead, she got a job offer. “I thought she was thinking, ‘The nerve of this woman!’ Instead, she was creating a job description for me,” Frazier says.

Several years later, while helping a friend and fellow HIM professional look for a job, Frazier's friend found the perfect job at the CDC—for Frazier. Frazier got the job and her friend got her old DRG coordinator job.

"I have always been proactive and networked with other AHIMA members," Frazier says. "I recommend this field all the time and encourage people to stay abreast of the field and be active in their local associations. There is so much to look forward to in the future—I see a lot of opportunities for us."

Article citation:

Jeffries, Jane. "Taking Data to the Next Level." *Journal of AHIMA* 74, no.1 (2003): 120.

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