

Taking the Grow-Your-Own-Coder Movement to High School

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by Mary Butler

The HIM Problem

Rural hospitals in Kansas are trying to cut the cost of outsourcing coding by starting the credentialing process in local high schools.

The HIM Problem Solver

Sherry Farrell, MBA, RHIT, HIM coordinator at Seward County Community College/Area Technical School in Liberal, KS.

Attracting qualified professionals to healthcare jobs in small, rural communities is a problem that has forced federal and local officials to get creative. For hospitals in these towns, not only is it hard to draw physicians and nurses, but it's also hard to find health information management (HIM) professionals and HIM educators. The state of Kansas has the highest concentration of critical access hospitals (CAHs) in the US. These facilities have long been outsourcing medical coding, but cost pressures have motivated them to bring coding in-house.

Planting the Seed

When Sherry Farrell, MBA, RHIT moved to Liberal, Kansas about eight years ago, she started teaching at Seward County Community College/Area Technical School. When the school's administration found out she had an RHIT and an HIM background, they asked her to start a coding credentialing program. Liberal, which has a population of around 20,000 people, has the largest community-based hospital in its part of the state. The hospital had been asking the college to start a coding program for a long time, but the college itself had also struggled to find qualified instructors—a problem that has plagued other community colleges in the state. The closest community college with a coding program is three hours from Liberal in Hutchinson, KS.

Farrell says the local hospitals wanted to “grow their own coders” for “people who are already settled here, love the region, and want to stay here and support the community.”

Farrell had never built a program from scratch before, but accepted the challenge and started teaching classroom classes and online classes in coding. Then, in 2012, the Kansas legislature passed Senate bill 155, which offered tuition reimbursement for high school students enrolled in dual credit courses with college-level classes.

This bill opened the door for high schools to work with community colleges in creating programs for high school students interested in pursuing a career in coding. By the time students participating in the program graduate from high school, they have a diploma and a certificate in coding, if they successfully complete the required coursework.

How It Works

Under the program Farrell developed, which includes participants from 11 area high schools and 11 hospitals, students can start the program their junior year of high school. She requires the pre-requisites of medical terminology and anatomy and physiology, which are taught by high school teachers who are certified to teach at the high school and community college level.

Some of the participating high school students live too far from a community college offering these courses. Officials in these high schools have set aside times during students' school day that allows them to devote time to online HIM courses, an activity overseen by a counselor.

Another step in the process, which Farrell will add, is interviewing students interested in the program. This step will begin in the spring for enrollment in the fall semester. She says that having pre-requisite classes and an interview with someone working in the HIM field gives instructors a better picture of which students can handle a HIM curriculum.

"We choose students that are very disciplined, very dedicated, and are ready and mature enough to handle this...It's worked very well for us," Farrell says. "We've had some bumps in the road. It's still a work in progress, and you do occasionally miss a student who gets in here and doesn't realize how hard it's going to be. But we get college students the same way. We get college students coming into HIM thinking it's going to be a lot easier than it is."

After students clear the interview process and are formally accepted into the coding program, during the fall semester of their senior year, they take an introduction to HIM class, a class on the CPT coding system, a class on legal and ethical issues, a class on the use of computers in healthcare, and introductory pharmacology. In the spring they take patho-physiology, an ICD-10-CM/PCS course, a class on electronic health records (EHRs), a practicum that involves AHIMA's Virtual Lab (V-Lab), and job shadowing. So even students who went through Farrell's program, but who don't choose an HIM career path, can 39 hours of college credit.

Completing and passing all of the classes doesn't mean students are immediately ready to enter the workforce when they graduate, says Farrell.

"Hospital HIM Departments would like to get students right away (right out of college) to begin working with experienced coders and train them on the job after they receive a foundation in our program," Farrell notes.

The Benefits of Rural Settings

Farrell acknowledges that while students who grew up in small towns often leave them for college and to pursue jobs in faster-paced urban settings, they stand to gain a lot staying in their communities. Individuals working in the medical records departments in small hospitals have to wear a lot of hats, says Farrell. In large hospitals HIM domains such as privacy and security, compliance, quality, clinical documentation improvement, release of information, and coding are often broken down into many separate departments.

In CAHs, however, these functions are frequently delegated to just a handful of people working on all of them.

"I tell them in the classroom, 'work in a rural area for a while.' You can get a lot of experience doing that because you can do so many different things."

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