

Transitioning Transcriptionists

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By Carol Person, MS, RHIA and Minnette Terlep, BS, RHIT

Facing a diminished role, transcriptionists at Sanford Health worked with the organization to move into open, and in-demand, coding roles

The need for transcription was diminishing at Sanford Health, and transcriptionists needed to make a choice-transition into another role in the facility, or face reduced hours. Accepting the challenge, many transcriptionists began the journey of transitioning into coders, a role suddenly in high demand at the healthcare organization due to the ongoing ICD-10-CM/PCS (ICD-10) implementation. Sanford Health's story is similar to many other organizations in the country that are helping transcriptionists move into hot coding jobs.

One Door Closes, Another Opens

Sanford Health, based in Sioux Falls, SD, has been implementing its electronic health record (EHR) over the past six years. Sanford USD Medical Center, the flagship organization for Sanford Health's Sioux Falls Region, gradually phased in their EHR, with full implementation realized in November 2011.

Between 2006 and 2011, the health information management (HIM) department participated in the planning and implementation of each phase. Recognizing the impact the complete EHR would have on the organization's dependence on the traditional dictation/transcription model, HIM discontinued hiring transcriptionists in early 2007 and strengthened its partnership with coding and transcription vendor Amphion Medical Solutions to handle overflow transcription.

At the same time, the anticipated diminishing need for transcription services was shared with the transcription team to provide them the opportunity to make personal decisions and preparations related to their career. The goal was to obtain right-sizing through attrition. But in November 2011, as Sanford USD Medical Center implemented its final phase of EHR implementation, the major impact of reduced dictation was realized. While there had been definite down-sizing through attrition, the reduction had not been great enough. People were seeing the need for transcription to diminish.

At the same time, the organization was completing its preliminary work in preparing for ICD-10. There was a growing need for coders that far exceeded the supply. Rising to the challenge on both fronts, Carol Person, enterprise executive director of HIM and hospital coding for Sanford, proposed an idea to capitalize on the talents of its transcription staff and repurpose those skills and talents into open coding roles.

The skills seemed to match. The transcriptionists had proved they were dedicated to the organization and had abilities that brought a wealth of medical-related knowledge to the table. In addition, the transcriptionists were used to regular productivity and quality monitoring, and had demonstrated their ability to manage the privilege of working from home.

Executive leadership endorsed the idea and offered strong support to immediately move forward. Sanford's HIM department, in partnership with Amphion, officially launched a project that facilitated intense classroom training followed by practice and quality review on actual Sanford patient medical records. The project would require 100 percent review until competency was demonstrated by the transcriptionists. Recognizing her team did not have the time or expertise for this level of training, Person looked to vendor Amphion to join the project plan.

Survey: Transcriptionists Identifying New Career Paths

Earlier this year, the American Health Information Management Association (AHIMA) and the Association for Healthcare Documentation Integrity (AHDI) collaborated by publishing two surveys that assess the needs of

transcriptionists as well as the needs of the managers and directors who oversee transcription services.

The results of these surveys showed an overwhelming need to identify transition plans and career paths for the transcription professional: 73 percent of managers and supervisors indicated they did not have a plan in place and 87 percent indicated a need to identify skill and knowledge gaps when working with electronic health records (EHR).

The survey captured four main job categories where transcriptionists are currently making career changes. Emerging roles that were most often reported in the survey consisted of a “chart integrity auditor” and an “EHR technician.” In these positions, transcriptionists use their expert medical language skills to enter data directly into the EHR for discrete capture, and use their keen focus on quality to perform audits for documentation accuracy and completeness.

Two other roles were mentioned in the survey. The “IT trainer” role focuses on education and training providers to use speech recognition. Transcriptionists bring knowledge and experience in transcription technology, clinical workflow, and structured data capture tools to the table for this opportunity. The final role mentioned was coding professional. More facilities like Sanford Health are investing in training their current workforce for future roles—especially in light of the demand for coding professionals. Transcriptionists bring their medical language and disease process knowledge to this role. Additional education, training, and mentoring is needed to help these professionals make a smooth transition. Watch for more information as AHIMA and AHDI collaborate to create new resources to aid transcription professionals in career transitions.

Better than Recruiting

Recruiting coders over the past several years had proven to be a daunting challenge for Sanford’s human resources, and there was recognition within the organization that the costs to recruit and retain employees for these roles would nationally significantly rise in preparation for ICD-10. The transition plan included using a three-year loan forgiveness model with employees committing this same period of time to the organization in lieu of educational expenses and agreement to passage of the CCS exam within one year of training completion.

As initial plans were being made, there was growing unrest amongst the organization’s transcriptionists as they saw the previously predicted reduced need for transcription services now playing out before them. Employees were being asked to take reduced hours based on daily work volumes.

By February 2012, the organization was able to share the news of the coding training program. There was immediate, positive feedback from the team with recognition that this was a win for both employees and the organization. With the help of human resources, employees completed an application process for one of the eight coding training positions. From the 32 member transcription team, 14 people applied for the eight coding slots. Applicants completed an online assessment supplied by Amphion. Interviews were conducted with each applicant using a shared interview model including a human resources representative, the coding director, and the HIM executive director.

Training began in April 2012. The employees continued to be paid and receive full benefits throughout the training program. Though eight employees were selected, one chose to withdraw before training began and another withdrew about 45 days into the program after recognizing that coding was not a good fit for them. In order to begin to re-align the transcriptionists into the coding team, the coding director provided two existing coders to join the trainees for portions of their training. One of the provided coders held a coding trainer role, while the other was a more recent addition to the coding team. While these two individuals did not participate in the training, they joined the group physically by sharing space with them while at the same time carrying out their regular coding responsibilities each day. This decision reaped many positive benefits, including creating an outlet for the trainees to have questions answered first-hand, and building a bond between the trainees and their new team members.

Amphion elected to use the ICD-9-CM portion of the *Basic ICD-10-CM/PCS and ICD-9-CM Coding* book authored by Lou Ann Schraffenberger, MBA, RHIA, CCS, CCS-P, FAHIMA as the primary text, and the *Basic ICD-9-CM Coding*

Exercises, also authored by Schraffenberger, along with exercises from the AHIMA-produced *Clinical Coding Workout*. The CPT education was provided using the *Basic Current Procedural Terminology and HCPCS Coding* by Gail I. Smith.

Teaching Transcriptionists Coding

The instruction was provided in an on-site classroom from April through October 2012 and via online webinar lectures and online chats with the instructor that was staggered throughout 14 weeks of training. The students were in class eight hours a day. Portions of the day were dedicated to chapter lectures. The remainder of the day was used for reading assignments and completion of assigned coding exercises. In addition, practice cases using actual Sanford medical records supplemented the coursework. The students participated in ongoing testing of coding concepts following completion of each of the chapters in the primary textbook. The testing results were shared with Sanford's coding managers so they could continually monitor the progress of each student.

Following completion of the training, the students began coding outpatient diagnostic records with 100 percent quality monitoring provided by Amphion. Amphion assigned one consultant to monitor two Sanford coders' work. In total, six coders were being monitored 100 percent by three Amphion consultants. Each day the students received detailed coding review worksheets that listed all coding errors, the correct codes, and the rationale for the code assignments that were changed. At the end of the day, each consultant and the two students assigned to them participated in a call so that the consultant could comment on the errors made that day.

Detailed summary reports were provided to Sanford staff each time a student completed the coding of 100 records. Sanford staff requested that Amphion continue 100 percent monitoring of each type of outpatient record (OP Diagnostics, ER, and Ambulatory Surgery) until each coder achieved 95 percent accuracy in two consecutive reports. Once the trainees reached the 95 percent accuracy level, Sanford staff assumed responsibility for monitoring the trainees' quality-which was done at a more aggressive rate than would be applied to an experienced coder. This was done to ensure a high level of coding competency continued.

Results of the Transition

The results have far exceeded Sanford's expectations, according to Nicole Downs, Sanford's Sioux Falls Region coding director. "This has been a huge win for us," she says. "We would never have had the resources to train this many coders in this short a period of time."

Hoping to duplicate the transcription program's success, Downs has begun identifying experienced outpatient coders who could make the transition to inpatient coding to help the organization prepare for ICD-10. A similar training program will be launched to help transition the individuals who sign up to make the career move.

The trainees have provided positive feedback and the transcription team is now right-sized at 24 employees. With help from their vendor and the hard work of its HIM department, the organization now has six well-trained coders with a strong commitment to Sanford Health, Downs says. And all six transcriptionist-turned-coders recently passed their AHIMA CCA certification exam and are expected to pass their CCS exam in 2013.

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