Streamlining Your Audit & Coding Workflow With Technology

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Summary
Utilizing technology allows you to organize, manage, and streamline your workday. From EHR’s or CAC to BI tools, new technology is always hitting the market and giving us the potential to do more with less stress and effort. For example, new auditing software on the market can turn you into an auditing rock star. But, there are numerous points to consider before choosing which technology to try or a good auditing solution.

How Technology Improves Our Work and Lives
Today, we all use technology to help make our daily routines a little bit easier. Whether it’s a weather app to check the snow or surf, a social media app to connect and share with friends and family, or a reader app to enjoy our favorite novel, we all use technology to make our days better and easier.

In your organization, you probably benefit from various forms of technology, that makes your workday easier, such as electronic medical records (EMRs), hospital or medical practice management software, coding software, billing software, etc. Each of these applications gives you immediate access to information. Thankfully, our information is no longer painstakingly catalogued with reams of paper and stored in huge rooms or warehouses but is now housed and hosted on hard drives and in the cloud. What better way to make your life easier as a coder or an auditor than to capitalize on technology to lighten your personal workload and improve your organizational success?

Computer Assisted Coding (CAC)
Computer Assisted Coding (CAC) is changing the coding workflow across all healthcare settings. CAC technology continues to be incorporated into a coder and auditor’s work life. This technology turns the coder into an editor of what the CAC is delivering in the healthcare environment. It’s his/her responsibility to scan the entire EMR to determine if assigned codes by the CAC are accurate, in context, not duplicated, and that all pertinent information is accounted for.

In FY 2012, there were over 46 CAC vendors with 3M and OptumInsight vying for the top spot of market share. While 3M accounted for 70% of CAC purchases, and OptumInsight 45%, by FY 2013, organizations which had implemented CAC were off to a rocky start due to difficult implementations and the inability to see any benefit from the new technology. But, by FY 2015/2016, OptumInsight had won KLAS awards for their technology due to the Natural Language Processing (NLP) features.

“Computer Assisted Coding (CAC) is changing the coding workflow across all healthcare settings.”
CAC can help to streamline the workflow when implemented following the coding workflow design. Once any gaps in the flow are understood, the CAC can institute a more efficient and consistent process of coding which leads to better revenue on the backend of the revenue cycle process.

Some people suggest that in the absence of CAC the entire workflow from admission to discharge can cause business processes to exist for as long as 40 days. However, with the implementation of proper CAC, which would include modules for clinical documentation improvement (CDI), the process can be streamlined within a one-week time frame.

Electronic Coding and Auditing Tools

My home office is like a healthcare library with books, software, manuals, binders, newsletters, and magazines, all from various institutions and organizations related to healthcare revenue cycle items of one kind or another collected over my 25 years in the industry. A lot of it is no longer useful as it once was because in today’s workplace most of the tools utilized by coders and audit staff are web-based software programs.

A number of code search tools can be found online and EMRs have lookup tools built in. Each have their strengths and weaknesses based upon previously user familiarity and interface. Over time, vendors have learned that users want all the information available in one screen and have minimized the need to leave that screen at any time. This allows for a streamlined workflow in coding and auditing.

These tools are usually based upon a specific user’s access information. Therefore, profiles,
bookmarks, and notes, are all possible within many coding and auditing tools today. Saving a specific geographic preference for the hospital or physician providers you are coding or auditing helps do away with the need to scan through multiple spreadsheets in a data base. Being able to access notes, examples, images, and even videos, allows for more accurate coding and auditing when dealing with difficult specialties. Because the data is often hyperlinked, a simple click gives you access to the information you need for decision-making on your workflow.

Information is key. The struggle often comes from not knowing what data you might need access to and whether or not you have it. Understanding your workflow ensures that you're not limited in your resources. What types of data do you need access to in your role?

- CPT code set
- HCPCS
- ICD-9-CM and ICD-10-CM code set
- ICD-9-PCS and ICD-10-PCS code set
- APC data
- DRG data
- Official reference guides – American Hospital Association Coding Clinics, CPT Assistant, other
- Medicare data specific to hospitals, physicians, other provider types
- Medicare reference materials
- Claims data

Access to information is important but so is having it in a format that works for you within your work environment. It's essential for productivity, quality, and compliance.

Data Analytics

The utilization of business intelligence (BI) tools provide opportunities to decrease administrative costs, impact clinical decision support, assist in monitoring and maintenance for fraud and abuse, can improve patient care coordination, and benchmarking patient wellness. These are the results of coding and auditing for which analytics can benefit the organization.

In any organization, the BI tools that may already exist within current software platforms, may allow you to target high-risk patients by disease. Knowing these patients ahead of time, allows caregivers to tailor treatment plans and delivery of care. The results can provide predictive information related to costs and reimbursement. These scenarios obviously lie within the realm of risk assessments and possibly even a different type of coding than you’re currently involved in or aware exists. However, it's not outside of the realm of possibility that risk adjustment coding may overtake other forms of coding by payer landscape, organizational type, provider type, and specialty.

Analytics can also provide a wealth of information related to problematic procedures and services within a particular specialty. For example: You're coding, auditing, and billing staff are aware of potential issues related to a particle orthopedic surgery procedure where numerous services, including supplies, are challenged by an insurance organization. A BI tool can detail this information so that all parties, including providers, are aware of the situation. This can help facilitate education and training for all stakeholders within the organization around coding documentation guidelines, coding principles, billing requirements, and reimbursement information.

When analytics are utilized for auditing purposes, BI tools are instrumental in rooting out errors based upon previous data and
After all, analytics have been the cornerstone of success for the Recovery Audit Contractor (RAC) initiatives of the Centers for Medicare and Medicaid Services (CMS). Contractors utilize BI tools and proprietary algorithms in tandem with Medicare regulations to determine where hospitals, physicians, and other providers have flaws in their coding and billing processes.

**EXAMPLE**

RAC Contractor Connolly utilized advanced data mining techniques to identify multiple instances of unbundling. This was also applied to other types of MRI and CT scans where unbundling was taking place. The financial impact for each unbundled claim represented an overpayment of approximately $1,500. The total impact in one year was nearly $750,000.

The question to ask is, “How is my organization utilizing data analytics to preempt coding risks?”

**Linked Documentation**

Within the technology you’re using for coding or auditing, it’s best practice to have documentation linked. That way, information is readily available in a third-party audit so auditors can quickly see where information was gathered, what resources were utilized for determinations, and which policies and procedures were under scrutiny.

CAC programs have this type of development built in. When you hover over various CPT or ICD codes, the particular document, its page number and possibly the area of text, is highlighted and can be viewed for quick reference.

A few things to ask yourself: Are your other coding resources interactively developed the same way? Can you warehouse your coding policies and procedures within your tools? Can you easily connect your reference information for various coded procedures and services within your favorite coding resource? Has your vendor considered such items?

**Rich Site Summary (RSS) News Feed**

Getting valuable information at your fingertips is important. Scott Quick, CEO of LucidHub, provides some valuable insight concerning the RSS news feed features which are available to all today.

“Healthcare is arguably one of the most information intensive industries in the world. Combine that fact with the massive changes underway in patient care, provider reimbursement, and regulatory compliance — and it raises an extremely important question: How is any healthcare professional expected to keep pace with the avalanche of new information produced each day?

While there is no panacea for information overload, there are relatively inexpensive tools available to help you organize the most mission critical information, consume it efficiently, and even collaborate with others to extend its value throughout your organization. Looking to Life Sciences, Pharmaceutical and Legal industries for inspiration, we’ll find the discipline of Current Awareness an ideal place to begin addressing this pressing issue.

In 2009, the Journal of the Medical Library Association defined Current Awareness as services that ‘alert scholars, researchers, and health care practitioners to recently published literature in their fields of specialization.’ A more contemporary view might include — the organization, delivery
and socialization of the mission critical information.

Government agencies, healthcare consultants, medical societies, industry associations, Science, Technology, Engineering, and Mathematics (STEM) publishers and news outlets all produce content that’s vital to your day-to-day job. If you’re like most professionals, your inbox is choked-full of email notifications from these sources — all vying for your attention. Compounding the problem, how often is that content either duplicated or completely irrelevant? And yet in other cases, you may have gotten wind of a change to CPT code, modifier, billing rule or compliance policy... but searching the Internet can be time consuming and the results suspect.

Rather than culling through endless emails or wasting time scouring the Internet for relevant information, why not use an aggregation tool to pull all those sources into a single news feed? If your aggregation tool is advanced enough, you can apply filters to weed out the noise and create meaningful topics that are easy to follow.

Pulling together and filtering relevant information into aggregated feed is only part of the solution. Aggregated feed should be delivered in a form, and on a schedule, that is easily consumed and personalized to the preferences of the user.

Ideally, the tools that you choose should allow for three personalized deliver options: News Feed - a near real-time feed of articles that are published into a secure portal alongside other relevant information. Daily Briefings - delivered via email containing a summary of aggregated topics with article experts and direct links to the source. Weekly Digests - emails that recap the articles for convenient scanning offline.

The first two-thirds of a comprehensive Current Awareness solution gets you a long way down the road. But to be truly valuable to your organization, you must have the ability to share vital information securely, tag it with metadata, add additional insights, associate it with other relevant content, and track who is actually reading it.

Social business technologies, such as intranets, have long promised to increase business performance. One of the missing links is the delivery of highly relevant information — uniquely tailored to the needs of a team or department — into those collaborative workspaces. Yes, sharing, commenting and searching are valuable. But being notified of, the ability to act upon and socialize relevant information is paramount.

Information has always been an asset, but now it needs to be viewed even more strategically. In a world where truly vast amounts of unstructured content is growing exponentially in both quantity and importance, healthcare organizations face the very real possibility that critical knowledge will lie fallow, untapped and unavailable to help improve patient care, optimize revenue capture and maintain regulatory compliance.

Leveraging a secure Knowledge Center, infused with current, highly relevant information, organized by specialty, tagged with value-added metadata and combined with the social functionality of sharing, commenting and searching can supercharge business performance.”

**Auditing Software**

The long days of reviewing stacks of paperwork on your desk are over. But, spreadsheet tools like Microsoft Excel are not ideal for healthcare because medical record coding and auditing require the ability to store and access information that can be utilized for educational, compliance, and management decisions. And, a spreadsheet database lacks flexibility when other needs arise. Plus, there’s the continued problem with how easy it is to corrupt, delete, or change data, along with a poor user interface for coding purposes.

Up until now, solutions for auditing software have been lackluster, ineffective, or extremely scaled down. Luckily, new auditing software on the market can turn you into an auditing rock star. But, first, you might want to consider a few things before picking a good auditing solution.

**What to Look For When Buying Auditing Software:**

- Can the software incorporate tailored coding and auditing policies and procedures?
- Does the software have robust reporting capabilities?
- Does the software have inclusive coding tools and resources?
- Is documentation and training education easily available within the product?
- Can the software be customized for both government and commercial payers and include Medicare carrier guidance?
- While the audit software might have multiple quality metrics, can you add additional metrics by specialty if desired without the need for vendor design changes?
- Will you be able to adapt various types audit methodologies within the tool?
- Does the product foster post-audit education and training based upon previous audit data, benchmarking, and allow for easy feedback for providers and other staff?
- Can you add notes at various points throughout the software which will continue for the life of the audit or audit setup?
- Are screens easily navigated by a user?
- Can information be imported and exported with ease?

One of the most important features of auditing software is restricted access to the users. Providing authorized access from an administrative level is important for compliance purposes. The security features of medical billing and coding software should be comparable to audit software, with the ability to keep track of the access details, the details edited and data details transferred over the Internet.

**Third-Party Coding/Auditing Vendor**

Often, there’s a need for additional resources to perform coding and auditing services. There are a host of issues competing for top budget priorities. Schedules and job descriptions are stretched to the breaking point for many in the industry. Frequently, there’s a lack of qualified talent within the organization to complete particular projects. When this happens, an organization is likely to turn to an outside third-party vendor for services to help alleviate coding and auditing backlogs, promote continued compliance for the organization, and provide additional auditing and monitoring services that can benefit the coding and auditing staff, and the organization as a whole.
A short checklist to consider when choosing a vendor:

- Staff qualifications for needed specialties with current certifications
- Project management experience for short and long term needs
- Full-service organization with excellent reputation and referenceable expertise
- Vendor staff are not listed with any State and Federal regulatory exclusion databases
- The vendor QA’s their own coding/auditing work
- Vendor has staff who can provide education to providers, coders, and auditors
- The organization can help develop customized policies and procedures for your organization’s coding and auditing needs
- The vendor has familiarity with various coding and auditing nuances across the entire country and not just one State or region

Utilizing an external vendor for coding/auditing allows an organization to adequately assess internal operations. Strengths and weaknesses are likely to be revealed, and with no agenda, your external vendor will deliver results, follow-up education, training, process improvement, and overall compliance. Since they do the heavy lifting for your organization, they can be a great supplement to your internal operations.

A third-party vendor can also develop business strategy around new markets, find solutions for current problems, be available for onsite meetings with multiple staff to summarize findings and discuss next steps in the process.

“Be efficient and organized so you can worry less and focus your attention.”

WORK SMARTER, NOT HARDER, WITH TECHNOLOGY

In your organization, you probably benefit from various forms of technology, that makes your workday easier. Leveraging the technology available to you, and opening up to newer technology, allows you to work smarter, instead of harder. And gives you the ability to be efficient and organized so you can worry less and focus your attention on other aspect of your day-to-day.
Lamon Willis is a healthcare professional with more than 20 years of experience in hospital and physician revenue cycle, practice management, compliance, coding, billing, and client services. He has been providing healthcare consulting and solution services to hospitals and physician organizations throughout the country.