Indian Health Service

Managing your Coding backlog – Best Practice

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Objectives

➢ **Identify your Coding backlog**

➢ **Learn potential contributing elements**

➢ **Areas for improvement & Helpful solutions**

➢ **Reporting and Analysis of data**

➢ **Initiate a tool for tracking trends**

What is coding backlog?

Per our internal control policy a coding backlog is visits that have not been reviewed/completed within a 4 day time frame for Outpatient Ambulatory encounters and 30 days for Inpatient Admissions.

A backlog can consist of many types of visits ranging from Administrative encounters, Ancillary Visits, Ambulatory encounters and Telemedicine. (A backlog refers to a compilation of encounters, face-to-face or non face-to-face) When there is a substantial backlog, it can create several issues for medical coders, patient health information and the facility as a whole.

Coding backlog effects – Patient Care/Facility

1. **Clinical Data for Patient Health Information**

2. **Data that supports continuity of care**

3. **Leads to delayed reimbursements for healthcare facilities**

4. **Slow down the entire billing cycle**

5. **Ability to generate meaningful data for research, analysis, and decision-making in healthcare.**

6. **Impacts research studies, quality improvement initiatives, and healthcare planning.**

Coding backlog effects-Coders

1. Impact the overall productivity and efficiency of medical coders.

2. Challenges to maintain a consistent workflow and meet coding deadlines.

3. Increased stress and work overload for coders (potentially affecting the accuracy and quality of their coding work)

4. Employee burnout

5. Insufficient time for Coding Education

6. Hinders the coder ability to meet Internal Control Policy

Causes of Medical Coding Backlogs

Complex regulations

◦ **Complex Coding Guidelines:** Medical coding guidelines can be intricate and subject to frequent updates. If coders are not well-versed in these guidelines, they may struggle with accurate and timely coding.

◦ Solution: Develop a system for coders to access and stay updated on coding guidelines. Provide resources such as coding manuals, online references, and coding workshops. Encourage coders to participate in professional coding associations to stay informed about the latest updates. Having awareness of Clinical Workload volume can help with adequate staffing solutions. Suggestion of having lead coders for a coding department of more than 15 coders.

Lack of qualified staffing

◦ **Staffing Shortages:** Insufficient staffing levels, particularly in medical coding departments, can lead to backlogs. This can occur due to limited resources, high turnover rates, or unexpected absences. Also the increase of patient care services rendered like new clinic established. Clinical Workload volume can help with adequate staffing solutions. Suggestion of having lead coders for a coding department of more than 15 coders.

◦ Solution:
   ◦ Increase the number of qualified coders. Encourage getting certified
   ◦ Identify individual coding strengths
   ◦ Recruitment, Retain Coders
   ◦ Retention bonus for certified coders
   ◦ Training opportunities

Inefficient Workflow Processes

◦ **Inefficient Workflow Processes:** Inefficient workflows and lack of standardized processes can hinder productivity and contribute to coding backlogs. This includes issues like poor communication, redundant tasks, or delays in accessing necessary documentation.

◦ Solution: Evaluate and streamline coding workflows. Identify bottlenecks, eliminate redundant steps, and improve communication channels between coders, healthcare providers, and other relevant stakeholders. Thorough knowledge of all platforms, such as electronic health record (EHR) systems or coding software can help coders awareness of how to process the different encounters effectively.

Training Issues

◦ **Lack of Training:** Inadequate training of medical coders can contribute to errors, slower coding processes, and subsequently, backlogs. Inaccurate coding can lead to claim denials or delays in reimbursement.

◦ Solution: Invest in comprehensive training programs for coders, ensuring they are proficient in relevant coding systems (such as ICD-10-CM, CPT, HCPCS). Continuing education and regular coding updates can also enhance their skills and knowledge. Routine department discussions and communication to share knowledge and concerns or questions.

Technical Issues

◦ **System Downtime or Technical Issues:** Technical glitches, system downtime, or interruptions in coding software can disrupt coding operations and lead to backlogs.

◦ Solution: Implement robust backup systems and ensure regular maintenance and updates of coding software and hardware. Develop contingency plans to address technical issues promptly and minimize downtime. Having backup coding methods, such as manual coding options, can help mitigate the impact of system failures.

Employee Burnout

Problem: Work stressors have taken a toll on HIM staff, which has further compounded the turnaround time for coding and the contribution of medical coding backlogs.

Solution: Team building, employee recognition program, exercises to build morale, communication, team work, create positive work environment

Aging population

Aging Population has lead to an increase in the demand for medical services. An increase in services for this population means an increased need for coders and billers to handle their claims. As the population continues to grow, the federal government will most likely need to adjust policies to address the increased costs of providing healthcare to these individuals. This means requiring a higher degree of proficiency with more complex coding and billing.

Solution: Standardization, Foster Team Work, Training opportunities for higher level complexities, Productivity Standards

Coding Backlogs can be extremely costly and hinder the Reimbursement process

1. The reimbursement can be delayed and, as a result, the facility could be paying more interest expense on debt or missing investment income from the cash it could be holding.

2.   Falling behind can lead to the facility ability to bill for some percentage of procedures.

3. Work done under pressure often causes an increased number of errors, with A/R follow-up work requiring more time and effort.

4. Organizations often don't have enough time and resources to audit the process for completeness or stay current through consistent training.

How to tackle backlogs – Best practices

Who is doing what?

Identify Coder Strengths

Identify challenges

Sharing of knowledge

Create a team mentality

Your coding team must be your extended team: Medical coding is not just simply selecting the right codes and using them for billing purposes. A medical coder role is to review the documentation and assure to apply correct codes that reflect the services rendered, choose accurate procedural codes, choose accurate modifiers based on clinical scenarios, appeal denials with the necessary information, and conduct coding audits to ensure compliance with payer coding guidelines.

Stay on top of coding advancements

Be aware of Advanced Technologies: Medical coding has been revolutionized by the use of Electronic Health Records (EHR). In addition to the EHR system, there are also a variety of other technologies and solutions that can increase the accuracy and quality of medical coding

Seek out training to become knowledgeable of the E.H.R and how it works and effects your coding responsibility.

Audit Regularly

Coding Quality Auditing must be regular: Monthly coding audits can save your service unit a great deal of money, as well as time. Some facilities and specialties may require more frequent audits than others because of the complexity of medical coding.

Communicate, Communicate & Educate

Transparency in Communication: If coding services are outsourced, the provider and coding team must have transparent communication with each other to ensure that all procedures are documented properly. Coders should be notified immediately whenever there is a possibility of audit findings or changes to coding standards so that they can immediately modify workflows to improve coding quality.

Suggestion of routine coding and billing meetings to share common errors or denials that can help improve the Revenue Cycle. Coding department to be aware of new oncoming providers and providers leaving. Identifying workload that can be prioritized to bring coding queue down.

Changes happen- Be in the know

Stay on top of healthcare changes:

Updates to the CPT, HCPCS, and ICD-10 are performed annually. Your coders should know and understand all the recent changes in coding. It is also crucial that they understand what effect value-based care and new reporting guidelines will have on patient care costs.

CMS

AAPC

HCPCS

AMA

IHS/HIMS

ORAP

CODING ANALYTICS, AUDITS & REPORTING

➢Quarterly audits for coding accuracy

➢ Standardize performance elements

➢ Standardized coding competencies for each Grade level.

➢ Annual assessment of coding workload with patient work

load

Creating a coding specific analytic report that will allow coding team to

Track changes and have knowledge of workload.

CODING ANALYTICS, AUDITS & REPORTING, CONT.

Coders have a specific Menu that reflects what is in the queue.

EHRC

➢Total coding queue

➢Visits with 3rd Party Payers

➢Unmerged Orphan visits

➢Incomplete visit totals and

➢The breakdown of incomplete visits per providers and clinics

CODING ANALYTICS, AUDITS & REPORTING, CONT.

Executive Team Report

Report can include:

Number of visits in Coding Queue and how many w/3rd party.

Types of clinics and services

Number of incomplete w/3rd party

Type of deficiencies, total by providers

Top providers and top deficiencies

May also include the dollar amount collected using the OMB rate

TRACKING TRENDS

Create a backlog analysis

Determine what type of audit is needed

Frequency (Monthly, Quarterly, etc)

Differentiate Provider deficiencies from coding backlog.

Discussion Recap

To Summarize:

Big backlogs require concentration and focused effort to address. Team work and consistent communication can help with bringing a coding backlog down.

While the immediate response will always be to dig in and simply do the work and code accurately and proficiently, resolving the cause of the backlog is equally important to prevent it from recurring.

BEST PRACTICES

Recommendations

Suggestions

Achievements

Goals

Tips

Questions

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