

**Guide to
Digital
Transformation
In Clinical Code
Auditing**

Introduction

The need for more efficient code auditing isn't going away

"As the Code Focus Business Development Manager at Data Agility, I speak to many Health Information Services (HIS) staff about the challenges they face – from meeting deadlines and targets in coding the medical record, to clinical coding audits, addressing deficient and missing documentation, and providing good clinical care.

These challenges were conveyed and presented at the most recent National HIMAA Conference, where I took part in numerous delegate discussions around manual clinical coding and auditing, involving multiple spreadsheets and risky manual information transfer.

What stood out is that most Health Information Managers (HIMs) understand how a digital model can achieve greater efficiencies and accuracy. However, the full abilities of a digital transformation are often overlooked.

That's why I've written this document. I hope it will give you and your colleagues a better understanding towards the beauty of a digital clinical coding auditing and workflow management tool, how it can be customised and implemented, and how it can save your organisation considerable amounts of time, improve data quality, and help you recognise opportunities."

Yours sincerely,

Callum Haggerty
Business Development Manager
Code Focus
Parent company: Data Agility



The Current State Of Coding And Auditing:

Is it keeping up with an increasingly digitised environment?

This question goes to the root of the problem. Whilst other areas of the health system are progressively switching to automated systems, is it possible for traditional 'ways of doing things' to keep up?

When it comes to clinical coding and auditing HIS departments are still spending vast amounts of time on:

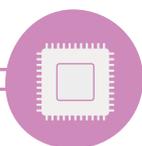
- Navigating extensive Excel spreadsheets.
- Transferring and manipulating data on spreadsheets.
- Siloed systems – which require data re-entry.
- Tedious time consuming processes.
- Disjointed work allocations.
- Reporting accuracy issues.
- Tracking and management of query forms.

Naturally the above situations vary in complexity with every hospital. However, managers must ask if their key personnel are being used to their best advantage?

Enter the digitised world of coding and auditing



Episode code is entered into PAS (Patient Admin System) by coders.



PAS seamlessly integrates with coding auditing software in real-time and advises on code accuracy.



Manual tasks are automated – reducing mistakes and freeing up auditors to apply their knowledge. Historical data is always available for insights and reporting.



Auditors can segment data quickly for reporting. They can also spot historical inaccuracies, missing information and episodes of value. Functionality is fully configurable and unique audit rules can be applied.



Data is shared securely and seamlessly via the cloud providing input to/from other departments improving communications and enabling a remote workforce.



Real-time updates provide instant insights to the budget's health and performance. DRG changes and government funding adjustments are also automated.

Overall Benefits

What can be achieved with digital transformation of clinical coding auditing process?

As the diagram above suggests, there's an impressive array of benefits that a digital platform affords the HIS and executive management overall:



Reliable data for more accurate reporting

Human error is greatly reduced, missing documentation and record deficiencies are highlighted, and funding that's undetermined during coding can be uncovered.

A more efficient HIS team

Tedious and repetitive data entry, searching multiple spreadsheets, administration of queries and a wide range of other clerical tasks can be automated. Audit work queues can also be created automatically (and display all information required in a single view) to provide further efficiencies for the team.

Improved coding performance

Inaccuracies can be cut dramatically. The team can also work to a 'first time right' approach – drawing from historical comments regarding changes to coding rules in the past. Funding changes are automated as well and can be found when searching historical events.

Identifying knowledge and performance gaps

A coder-auditor-coder feedback loop allows HIMs and clinical coders to learn and grow as they continue to use the system. Also, historical data trails provide managers with a deeper understanding of coder and auditor performances, knowledge gaps and any need for support – helping managers to act on adjustments as necessary.

Accurate reporting of Hospital Acquired Complications (HACs) and re-admissions

Audit features allow for itemisation of all codes and specialties, so auditors can flag all episodes of interest quickly and easily.



What Are The Daily Benefits For The Workplace?

Real-time data & automation from stage 1

The moment a code is entered into the Patient Administration System (PAS), it integrates and populates necessary sections within the platform. That means no further manual intervention is required (unless correcting a code), saving time and costly errors. Since all data is in real-time, it's more reliable and self-adjusting (should code updates to episodes be made).

Also, workflows for auditors become linked and managed using one solution. This consolidates all functions and provides real-time data capture and segmentation for reporting and analysis.

Prioritisation of coding

Coders will be able to address high-value episodes as a priority and avoid missing them in the workflow clutter.

This automated filtering of episodes also frees up the HIS, as they will no longer have to engage in manual communication, such as email, to let team members know about the prioritisation to code particular episodes.

Coding rules can be automated

High volumes of casemix data result in an ever-evolving range of coding rules. On a digitised platform, these rules can be configured – not just to ensure accurate and complex codes are applied properly from the start – but to highlight value categories and more.

Transparent work allocation for auditors

The days of missing jobs in the queue are over. Work queue rules can be set up and audits can be prioritised based on search requirements such as outstanding queries, overdue audits, complexity, urgency, and value.

Tasks can also be shifted into defined categories, such as analysis, education or monitoring.

And auditors can self-allocate work in bulk, or reassign jobs back to the queue, with explanations flagged in the history for the next person who picks up the job.

What's more, HIMs can track job progress at any point of time and be aware of resource requirements or changes to workflow if needed.

Standardised electronic workflows

Coding auditing software can be cloud-based and, so, has inherent benefits. Unreliable paper trails can be averted. The configured software adheres to the same formatting principles the audit team works to. And having access to a world of remote workers widens the talent pool tremendously.

'First time right' coding saves time

Manual, multi-step processes are eliminated, reducing risk of errors when taking data from other systems and exporting it to Excel spreadsheets. Multi-system workarounds are also unnecessary.

Feedback of corrected codes is centralised

All feedback communication is captured within the platform, alleviating time-consuming email searches. Also, real-time dialogue between coders and auditors or educators decreases administration time. And thanks to continuous coding feedback, the 'first time right' metrics are automatically adjusted within the platform.

National Weighted Activity Unit (NWAU) leakage

Mistakes happen. And they can happen in any department. With a coding auditing platform, coding errors or missing codes are immediately identified to ensure appropriate funding for all episodes.



How Can A Digitised System Inform Leadership Decisions?

Funding can be tracked in real-time against monthly target

With a digitised coding auditing platform, budget management and department processes are further optimised. For instance, you can keep a running total of your Activity Based Funding (ABF) budget and compare it to your actual budget, using real-time figures. This allows you to assess performance at any point of time and take corrective action immediately if necessary.

Reporting becomes more efficient and accurate

There are many different ways a digitised coding auditing platform can improve reporting. Key benefits include:

- Confidence of accuracy as manual entries and human error will be eliminated.
- Real-time reporting can be compared across sectors such as hospitals and campuses.
- Real-time reporting of varied sources or specialties allowing managers to compare data against the National Weighted Activity Unity (NWAU). The NWAU performance targets are easily found on the dashboard and highlight both pre and post audit metrics.
- Real-time reporting of pre and post-audit results for leadership teams and the executive.

Functionality that saves time and headaches

Reports can be segmented into three categories:

1. Hospital performance.
2. HIS operations performance.
3. Analysis of changes such as code rules, deficiencies, Diagnosis Related Groups (DRG), and unit trends.

Generic benefits include:

- Easy consolidation of multiple reports into one.
- Reduced reliance on others to prepare and share reports.
- All reports can be accessed through the system or shared via email.

Confidence that coding jobs will get done

All coding tasks will be allocated in the queue and must be either completed or reallocated, based on prioritisation of value and complexity. That means that no episodes on the list will be neglected due to others being easier to code.

Selecting the right people for each task

You can ensure coders receive tasks that align with their specialised skill set. This reduces backlogs and time, particularly with the coding of complex episodes. This also provides opportunities to allocate suitable work to trainee clinical coders creating user-specific learning curves.

Continuous education

A coder-auditor-coder feedback loop provides automatic capture, reporting, and analysis on coding errors to help with training. The platform can provide a full history of every coding change and why it was applied, further promoting a 'first time right' approach for coders. Deficiencies such as incomplete clinical documentation can also be flagged in real-time providing feedback to clinicians for quality improvement.

Insights for KPIs

Transparency and real-time reporting enables HIMs to spot team progress issues, set auditing KPIs and improve the productivity of both individual team members and the department itself.

Department insights

Managers can enjoy a deeper understanding of overall productivity, making quantitative and qualitative reporting much easier. Also, since workflows can be monitored easily in real-time, department KPIs can be better managed, easing the workload during high stress periods such as end of month reporting.

Data alignment with industry leaders

A good coding auditing platform should complement benchmark data from industry leaders. This promotes a continuous improvement in industry standards.



Weighing up costs

With the rate of automation in all areas of the healthcare system, the transformation to digital coding and auditing platforms is inevitable. Will the cost be worth it?

First, consider how it may pay for itself:

- Early identification of all funding and revenue opportunities.
- Ensuring recoverable costs are identified up front and not missed.
- More accurate reporting to help improve efficiencies.
- Retaining specialised, hard to find staff members due to:
 - Eradication of low-value repetitive tasks.
 - Greater job satisfaction and educational opportunities.
 - More opportunity to apply their knowledge.
 - Convenient resources to lift performance.
 - Flexibility within their working arrangements.

Who can help?

As with all change management, selecting the right business partner to implement a digital transformation is imperative. They must have a deep understanding of the sector and experience in collaborative design, implementation and inhouse training processes for the hospital involved.



Case Study

How Code Focus improved efficiencies and optimised results for Western Health

Western Health is a 980 bed Public health service in Victoria with 120,000 annual separations. It provides tertiary acute care, sub-acute care, community services, day hospital and transition care.

Western Health had a requirement to eliminate inefficiencies, improve productivity, report in real-time and optimise their budget results by digitising and automating auditing workflow.

Challenge

Western Health's Auditing team's efficiencies and productivity were impeded by using manual processes, involving 39 spreadsheets, each of which contained up to 26 cells for audit target criteria mapping.

Each Episode was manually checked by auditors, and if it met any target criteria, it would be manually entered into the relevant unit's spreadsheet in the specific cell.

WIES difference was both manually calculated and entered into these spreadsheets.

Reporting and analysis on this audit data was not possible given that cells contained free text. This process was associated with significant costs (time and labour) and laden with human error. Audit results were only available at the end of the month, the resulting lag time from patient discharge being 6-8 weeks.

Solution

Data Agility consulted with a range of stakeholders at Western Health and identified that Code Focus, a performance optimisation software solution was required.

We were then able to propose a way forward for implementation, including a series of detailed prioritisations to eliminate inefficiencies, improve productivity, allow real-time reporting and optimise their budget results.

Staff needed to shift their focus on improving their coding metrics. We could digitise and automate the auditing workflow to improve productivity, which would also deliver significant time saving.

A key area for improvement was time and labour efficiencies. The work backlog demanded additional headcount and Western Health was aiming to hire additional resources. Using Code Focus, they would be able to accurately align resources to demand, resulting in zero backlog.

Real-time, accurate reporting on each unit by the most common ICD & DRG changes was required by Western Health. Code Focus could deliver an improvement in accurate, complete and timely data. This would also lead to improved user and clinician education, in addition to improved quality in clinical documentation.

eQueries were used at Western Health, generated in Western Health's Digital Medical Record (DMR). These could be captured in Code Focus. eQueries would be able to be emailed to and from clinicians, improving efficiencies and effectiveness given it resolved projected funding gaps in a timely manner.

Coder, auditor and educator training was undertaken as part of the implementation. Initially, some of the coding team were unsure as to how they would manage with Code Focus. However, once they saw that there was no data entry because fields were auto-populated, that the user interface was simple and very easy to navigate, they felt very comfortable using the solution and adopted it very quickly.

Results

The installation of Code Focus at Western Health had a profound impact on the business. They now have a platform and solution that can cater to their needs and supports their organisational requirements.

Time Savings:

- Efficient and optimised auditing allows staff to focus on coding.
- Reduced average coding completion time from over 30 days to 17 days and decreasing.
- Decreased the number of episodes audited to achieve an optimised WIES target result.

Cost Savings:

- With time saved, it has eliminated the need for contract staff, reduced casual staff and overtime limits.
- Workforce capacity planning is optimised according to demand (surge and seasonality).

Improved metrics:

- Continuously improving coding 'first time right' metrics.
- 22,000 audits (B and C DRGs).
- 9,500 coding / ICD-10 changes.
- 6,500 DRG changes.
- 104% target.
- \$28.5m additional funding.

With Code Focus embedded at Western Health, the HIM department is continuously looking for ways to refine workflows and processes. Staff have now fine-tuned reports, in particular, focusing on unit trend reports to further improve quality and service planning whilst achieving an optimised funding result. HIM is very much focussed on continuing to apply learnings from Auditing to their Coding (First Pass) so as to optimise 'first time right' metrics.



Find out what a digital transformation would mean for your HIS.

A digital transformation requires a systematic process from obtaining a deep understanding of requirements and strategy development, to implementing and testing the platform with as little interruption to your work processes as possible.

To find out how Data Agility's Code Focus team can support your digital transformation strategy and implementation, contact me for a no obligation demonstration:

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CodeFocus