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Introduction

Computer codes are a systematic arrangement of letters and numeric values to contain a specific information which is normally confidential and relevant within an organization. In this case of an organization in healthcare sector, the codes will represent the in-patients. The codes are usually unique in nature and are organization specific in most cases.

- Discuss how you would carry out your various responsibilities as a coding manager

As a coding manager the job description I would recommend for an in-patient coder generally entails assigning codes to medical records and information while working within set guidelines, procedures and policies. In addition, he maintains a database of all codes and based on the data documented the Information Systems can analyze data for managerial decision making including payments and reimbursements (Alexy & Reitzig, 2012). The day to day duties of the coder include analysis of patient records and assigning appropriate ICD-9/10 codes in consultation with the providers, classification of related cases and grouping them together, formulates coding reference guides and interpretations, working with other departments including accounts for financial reconciliation and proper billing and record database maintenance (Lieberman, 2004). The qualifications for this role include degree in Medical Record Technology or equivalent and one to two years of experience in inpatient coding using ICD9/10 in a busy medical care facility. Excellent computer and communication skills are also desirable.

The key goal of Clinical Documentation Improvement program is to ensure a parallel review of medical records to improve on the precision and

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authenticity of provider documentation since the clinical language of the ICD-9 or 10 codes do not necessarily match the cases in practice (Booth, Roberts & Sikes, 2011). In addition, CDI program aim to have better synergy (collaboration) with other sections and departments in the facility. The final core goal of CDI program is to abridge the information gap between the coding staff and the service providers.

Specific goals of CDI program include the generation of codes, ensuring consistency and compliance to policies and guidelines, capturing data and provide a Health Information Management system, Capturing inpatient data such as projected mortality, collecting and documenting Present on Admission (POA) indicators precisely, to record and document patient's safety indicator conditions and to educate service providers on the documentation program (Lichtenthaler, Hoegl & Muethel, 2011). Based on the job description for the inpatient coder, as a Coding Manager I would liaise with the Human Resources division for recruitment in several ways. First is to attract a pool of talents that have Bachelors in Medical Records Technology and have over one year experience in a busy Medical Facility (Laudon, 2012). The coding human resources will be notified of the opportunity via employment websites and the facility's website so that applications may be sent by those interested. Secondly, in liaison with Human Resources department we will carry out screening so as to have a selected few interested candidates for the first phase of interviews. After screening and selection, the Human Resources department may conduct preliminary interviews to confirm eligibility and qualification. Qualified candidates will be recommended for final phase of technical and practical

interviews at the coding section. Based on their capabilities, I would recommend the best qualified candidate(s) to the Human Resources for recruitment.

- Describe how the responsibilities of the Charge Description Master (CDM) committee bring coders, billing staff, and CDM staff together to ensure revenue cycle success.

There are cases of revenue losses that have been reported in healthcare organizations. Some of the losses result from staff not working in synergy. By putting in place the Charge Description Master that brings coders, billing staff and CDM staff together there are several advantages that will be achieved including curbing revenue losses. The revenue cycle is enhanced as a result. The teams coding team will be able to develop and explain the codes to the other team members while the billing team will provide the costs and charges to the whole team (Bramley & Reid, 2007). By acting in liaison, the different systems are integrated into various gates. The billing and invoicing process will need to be within these gates to ensure leakage of revenue is checked. An integrated system will ensure that each of the teams is consulted and involved in the charging system hence better revenue cycle.

- Describe strategies a coding manager would use to improve coding accuracy and productivity

As a coding manager, I would employ several strategies to ensure accurate coding. First, I would recommend that the organization invests in the education and training of coding staff members. This will be very significant in ensuring that the staff members become efficient, competent and updated

in terms of coding systems and applications. Secondly, I would carry out consistent and regular audits to ensure compliance to the set coding guidelines and procedures. Audits are very important to ensure sustainable systems and they provide avenues for continuous improvements (Baltzan & Phillips, 2010). The next stratagem to ensure accurate coding that I will employ is to keep the coding resources and references updated. I will ensure that codes are reviewed regularly and that the codes database is refreshed during each review. Finally, I would ensure that the organization coding department is aligned to the industry coding practice and standards.

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