# Autonomous Medical Coding

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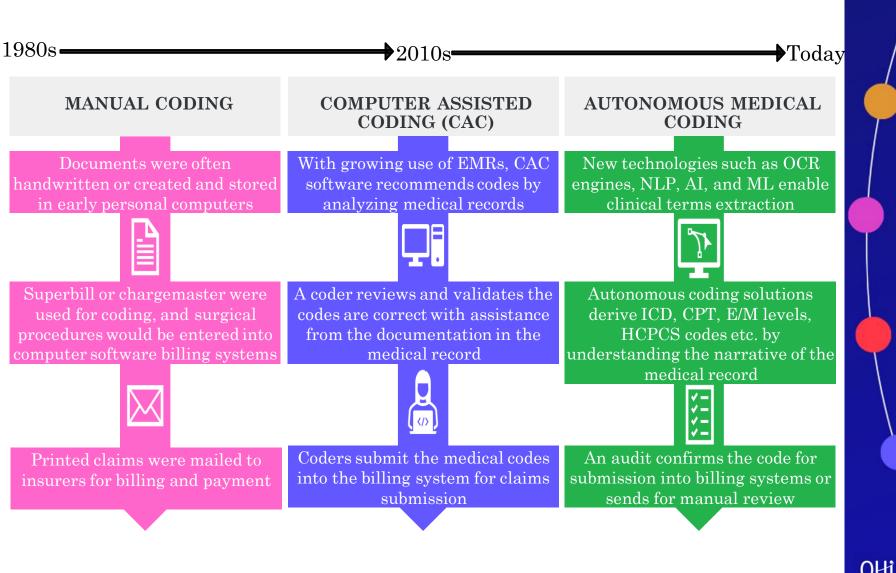


Ohio Health Information Management Association

# Current State of Medical Coding



## **Evolution Of Medical Coding**



## NLP Models in Everyday Life

Google

Ask

yahoo! Aol.



#### ChatGPT



#### What is Autonomous Medical Coding?

Autonomous medical coding, also known as "self-coding" or "Al-powered coding," refers to the use of artificial intelligence and machine learning algorithms to automate the medical coding process. In autonomous medical coding, the software is designed to identify and assign codes to diagnoses, procedures, and other relevant medical information in a patient's medical record, without the need for human intervention.

The goal of autonomous medical coding is to provide an efficient and accurate method for capturing and communicating medical information. It uses natural language processing, image recognition, and other advanced techniques to understand and categorize medical data. The software can analyze vast amounts of data in real-time and identify patterns, relationships, and anomalies in the data to make informed coding decisions.

Autonomous medical coding has the potential to greatly improve the accuracy and speed of medical coding, reduce the risk of coding errors, and improve the quality of healthcare data. However, it is important to note that autonomous medical coding is still a relatively new technology, and its development and implementation is an ongoing process. Further research and development is needed to ensure that autonomous medical coding software is reliable, consistent, and aligned with existing medical coding standards and regulations.



## **Current Coding Technologies**

	EMR Coding Functionality	CAC Solutions	Autonomous Coding Solutions
HUMAN INTERACTION	Exception Based	Required (for every chart!)	Not Required
INTEGRATION & USAGE	Embedded into workflow Coders need to review exceptions	Requires workflows changes Coders must review each chart section and select final codes based on CAC suggestions	No workflow changes Coders only need to review complex charts flagged by software
ACCURACY	Known for assigning non- specific codes and symptoms	Known for suggesting inaccurate codes	Accuracy consistently over 95%
CODE EXPLANATION	No NLP, pulling from orders, registration or previous encounters; very specific rule sets	No visibility into coding rationale	Clear rationale and full transparency (for every code assigned!)
TIME	Within seconds	Within minutes	Within seconds

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## Autonomous Medical Coding



## **Underlying Technology**

Artificial Intelligence (AI)



...the practice of utilizing machines to mimic human intelligence to perform tasks, solve problems and autonomously achieve goals.

#### Machine Learning (ML)



...is a type of artificial intelligence model that can "learn" from data patterns.





...is a way of enabling computers to understand, interpret, and generate human language in a meaningful way.



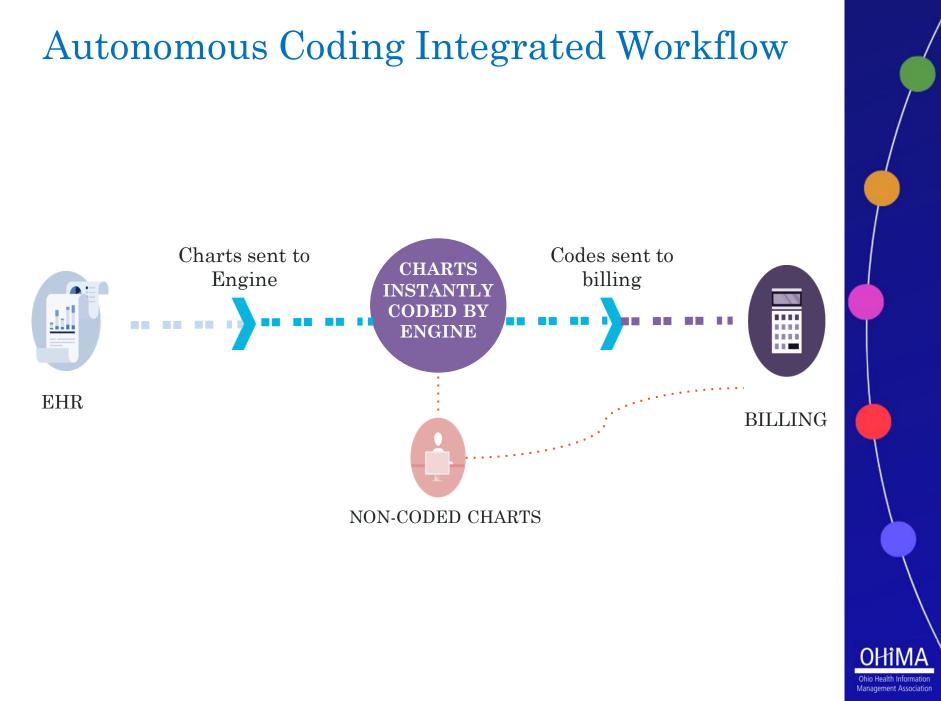
- NLP is like the communication between the players on the team, who use words and signals to pass the ball and work together.
- NLP is like the language of the team, helping the players understand each other and work together better.

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Example



- AI is like the coach of the team, who tells the players what to do and when to do it.
- AI is like the brain of the team, making decisions and giving orders.
- ML is like the players on the team, who learn from their mistakes and improve over time.
- ML is like the muscles of the team, getting stronger and more skilled as they practice and play.



## **Reasons for Dropped Charts**

~ 5 - 10% of charts cannot be coded due to engine understanding gaps

- 2
  - ~ 10-15% of charts cannot be coded due to conflict in documentation
  - ~ 10%-15% of charts cannot be coded due to low confidence in one code on the chart
- 4

3

~ 10-15% of charts cannot be coded due to missing documentation

**Covered Charts** 

Reasons	s for Dropped Charts
Reason	Example
Engine Understanding Gaps	Rare conditions; Edge Cases
Conflict in Documentation	Ambiguity around whether a diagnosis was negated or not, ambiguity around whether a condition is from the past vs. current, or laterality conflicts
<b>Partial Coding</b> - Low Confidence in 1 Code on Chart	The engine suspects two ICD codes need to be reviewed for an Excludes1 note, but all other ICD codes, CPT, E&M, and Provider attribution are correct The engine found a trauma code but the engine could not identify an external cause code; but all other ICD, CPT, E&M, and Provider Attribution are accurate.
Missing Documentation	Missing ED note or missing provider signature

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## **Benefits and Limitations**

#### Autonomous Coding: Limitations

- Currently only covers certain specialities, primarily in outpatient
  - Not a 100% solution (only codes a certain percentage of charts)

Machine Learning based autonomous coding often requires >1 year of data to "learn" and lacks "explainability"

#### Autonomous Coding: Benefits

- Lowered risk of staffing challenges (e.g. finding experienced coders, attrition, and retirement)
- Enhanced accuracy, consistency, and compliance due to configuring one machine vs. training multiple coders

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- Reduced risk of claims denials and delays in reimbursement
- Improved quality of healthcare data through capturing additional codes

Increased efficiency through reduced time and effort required to manually code medical records (e.g. 10,000 charts coded in a day)



## Autonomous Medical Coding Onboarding

Training / Configuration	<ul> <li>Provide training on organization specific coding guidelines and philosophies</li> <li>Train human coding staff on how to validate the engines' results, and provide feedback for continuous improvement</li> </ul>
Validation / Auditing	<ul> <li>Validate the autonomous medical coding results</li> <li>Conduct regular audits and quality assurance checks to ensure that the codes assigned are accurate and compliant</li> </ul>
Evaluate / Performance Improvement	<ul> <li>Evaluate the impact of the autonomous coding system on the organization's operations, such as efficiency, productivity, and cost savings</li> <li>Validate autonomous coding engine is continually improving its knowledge base and learning from audits</li> </ul>

## Automated Medical Coding Potential

#### Ancillary Outpatient Services

- > Emergency
- > Pathology
- > Radiology
- > Physical Therapy
- > Occupational Therapy
- Speech Therapy
- > Home Health

#### **Outpatient Service Lines**

Anesthesia

 $\geq$ 

- ➢ Family Medicine ➤
- Internal
- Neurology
- > Obstetrics &
  - Gynecology
- Pediatrics General Surgery
- General Surg
   Pain
  - Managemen

- > Cardiology
- > Orthopedic
- > Gastroenterology
- > Urology
- Endocrinology
- > Ophthalmology
- > Oncology
- Behavioral
- Health

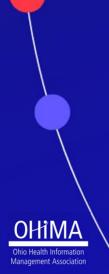
#### Inpatient

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- Inpatient
- > Observation
- ➢ Hospice

## **Emerging Potential Use Cases**

# HCC Coding CaptureQuality AuditsCharge Reconciliation



## **Steps for Success**

#### Current Coding Challenges

Evaluate the existing coding processes to identify areas where autonomous coding could bring value, such as reducing coding errors, increasing efficiency, or freeing up staff time for more complex coding tasks.

#### Technical Capacity

Determine whether the organization has the technical infrastructure and expertise to implement an autonomous coding partner.

#### Coding Philosophy

Document your organization's coding philosophy and guidelines compliant with coding regulations.



## Careers

## Health System

Certified professional coder (CPC)

Coding auditor

Billing auditor

Denial coding analyst

Quality assurance coder

Coding analyst













### Vendors

Product

Coding auditor

Quality Assurance Coder

Subject Matter Expert -Product

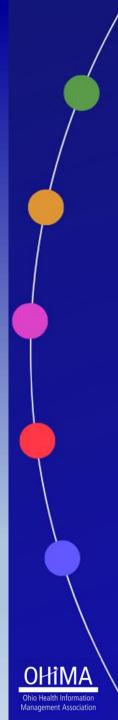
Product Sales Enablement

Compliance Auditor

#### HI CAREERS IN REVENUE CYCLE



Scan the QR Code for all resources related to the revenue cycle at: <u>ohima.org/revenue-cycle</u>



## THANK YOU FOR JOINING!

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