

Project Instructions: Complete a PowerPoint presentation exhibiting your recommendations for the scenario below.

Grading Scale:

1. Overall creativity in regards to the PowerPoint presentation and recommendation.
2. Feasibility of recommendations
3. Professionalism:
 - a. Does your PowerPoint exemplify work of an HIMT professional?
 - b. What was your demeanor during your presentation? Were you professionally dressed? Did you use proper grammar? Did you engage your audience? Did you speak in a tone loud enough for everyone to hear? Was the language used applicable to the audience?

Project Due Date: Submit your project on April 7, 2019 at 11:59pm in the designated drop box under the lessons tab in Black Board. **Failure to submit projects on or before the designated due date will result in a ZERO for the project!!! No exceptions.**

Presentation Date: Each student will be required to present your presentation on [REDACTED]. A presentation date will be assigned by your instructor. **Failure to present on the assigned due date will result in a ZERO for the project. No exceptions!!!!**

Scenario:

The health information management team at Anywhere University Hospital (AUH) contracted with an auditing firm to perform full assessment coding review. The results from this baseline assessment are provided in four tables:

- Variation Log by Type of Error
- Variation Log by Coder
- Variation Log by MS-DRG
- MS-DRG Relationship Assessment

You are the inpatient coding manager at AUH. Your director has asked you to develop an ongoing review and monitoring schedule for the next year based on the results from the outside review.

Include internal and external reviews, coding in-services, physician workshops, and external seminars/educational sessions that will be performed and or provided for your staff. The schedule should be specific (include volumes and/or percentages of charts to be reviewed). Keep in mind that on average it takes 18 minutes to review one inpatient chart. Budget provides for \$15,000 for external reviews. The average cost for reviewing one inpatient record by an external review team is \$55.00 (fully loaded).

In addition to preparing the schedule, outline how you will maintain coding quality statistics and report them back to the HIM Director and Compliance Committee at your facility.

- How will you reward your staff members who show great improvements?
- How will you reward and/or recognize that your staff has made improvements overall?

Your Coding Team consists of:

- Coding Manager (you)
- 1-Data Quality Auditor (1 FTE)
- 8-Inpatient Coders (8 FTE)
 - 2-RHIA, CCS
 - 3-CCS
 - 3-RHIT

Results of the full assessment coding review for AUH:

Two audits were performed:

1. Coding quality review by MS-DRG
2. MS-DRG Relationship Analysis

| Variation Log by Type of Error | % of errors |
|---|--------------------|
| Inaccurate sequencing or specificity principal diagnosis, affect MS-DRG | 17% |
| Inaccurate sequencing or specificity principal diagnosis, non affect MS-DRG | 16% |
| Omission CC, affect MS-DRG | 33% |
| Omission CC, non affect MS-DRG | 2% |
| Inaccurate principal procedure, affect MS-DRG | 3% |
| Omission procedure, affect MS-DRG | 4% |
| More specific coding of diagnosis or procedure, non affect MS-DRG | 12% |
| Inaccurate coding | 5% |
| Missed diagnosis or procedure code | 8% |

| Variation Log by Coder | | |
|-------------------------------|-------------------|-----------------|
| Coder | Error Rate | Standard |
| Coder 1 | 3% | 5% |
| Coder 2 | 9% | 5% |
| Coder 3 | 8% | 5% |
| Coder 4 | 2% | 5% |
| Coder 5 | 4% | 5% |
| Coder 6 | 16% | 5% |
| Coder 7 | 12% | 5% |
| Coder 8 | 3% | 5% |

| Variation Log by MS-DRG* | | |
|---------------------------------|---------------|-------------------|
| MS-DRG | Volume | Error Rate |
| 470 | 420 | 2% |
| 313 | 233 | 14% |
| 392 | 232 | 1% |
| 291 | 232 | 17% |
| 247 | 220 | 3% |
| 292 | 216 | 5% |
| 871 | 213 | 12% |
| 641 | 209 | 0% |
| 194 | 195 | 3% |
| 293 | 193 | 1% |
| 885 | 188 | 3% |
| 312 | 177 | 0% |
| 191 | 175 | 7% |
| 287 | 173 | 2% |
| 310 | 171 | 15% |
| 689 | 157 | 11% |

| | | |
|-----|-----|-----|
| 603 | 143 | 2% |
| 379 | 137 | 3% |
| 192 | 131 | 9% |
| 683 | 116 | 11% |
| 189 | 114 | 1% |
| 069 | 110 | 2% |
| 190 | 92 | 12% |
| 193 | 87 | 10% |
| 690 | 76 | 4% |
| 065 | 76 | 5% |
| 195 | 72 | 2% |
| 066 | 52 | 2% |
| 064 | 41 | 5% |
| 906 | 35 | 2% |

*MS-DRG descriptions provided below

| Variation Log by MS-DRG* Set | | |
|-------------------------------------|------------|----------|
| MS-DRG Set | Hospital % | Nation % |
| 064 | 24.3% | 21.4% |
| 065 | 45.0% | 43.8% |
| 066 | 30.8% | 34.8% |
| | | |
| 190 | 23.1% | 15.2% |
| 191 | 44.0% | 33.5% |
| 192 | 32.9% | 51.3% |
| | | |
| 193 | 24.6% | 17.5% |
| 194 | 55.1% | 54.2% |
| 195 | 20.3% | 28.3% |
| | | |
| 291 | 34.6% | 29.2% |
| 292 | 36.7% | 38.8% |
| 293 | 28.8% | 31.9% |
| | | |
| 689 | 67.4% | 21.7% |
| 690 | 32.6% | 78.3% |

*MS-DRG descriptions provided below

| MS-DRG | MS-DRG Title (FY 2008) |
|---------------|---|
| 064 | Intracranial hemorrhage or cerebral infarction w MCC |
| 065 | Intracranial hemorrhage or cerebral infarction w CC |
| 066 | Intracranial hemorrhage or cerebral infarction w/o CC/MCC |
| 069 | Transient ischemia |
| 189 | Pulmonary edema & respiratory failure |
| 190 | Chronic obstructive pulmonary disease w MCC |
| 191 | Chronic obstructive pulmonary disease w CC |
| 192 | Chronic obstructive pulmonary disease w/o CC/MCC |
| 193 | Simple pneumonia & pleurisy w MCC |

| | |
|-----|--|
| 194 | Simple pneumonia & pleurisy w CC |
| 195 | Simple pneumonia & pleurisy w/o CC/MCC |
| 247 | Perc cardiovasc proc w drug-eluting stent w/o MCC |
| 287 | Circulatory disorders except AMI, w card cath w/o MCC |
| 291 | Heart failure & shock w MCC |
| 292 | Heart failure & shock w CC |
| 293 | Heart failure & shock w/o CC/MCC |
| 310 | Cardiac arrhythmia & conduction disorders w/o CC/MCC |
| 312 | Syncope & collapse |
| 313 | Chest pain |
| 379 | G.I. hemorrhage w/o CC/MCC |
| 392 | Esophagitis, gastroent & misc digest disorders w/o MCC |
| 470 | Major joint replacement or reattachment of lower extremity w/o MCC |
| 603 | Cellulitis w/o MCC |
| 641 | Nutritional & misc metabolic disorders w/o MCC |
| 683 | Renal failure w CC |
| 689 | Kidney & urinary tract infections w/ MCC |
| 690 | Kidney & urinary tract infections w/o MCC |
| 871 | Septicemia w/o MV 96+ hours w MCC |
| 885 | Psychoses |
| 906 | Hand procedures for injuries |