The Work of a Coder:
Survey Tells Us Who We Are

More than 12,000 of you responded in January to the Work of a Coder survey. It revealed some surprising results, further defining us as a profession and helping to debunk some stereotypes.

The survey, made available online through a Web link, was open to responses for six weeks. It garnered 12,068 respondents, of which 93.5 percent were professional coders certified through AAPC. The survey collected demographic information regarding work environment and credentials, and included 40 questions specific to work and working relationships. Completing the exam were 8975 coders, or 74.4 percent of participants. The data aggregation engine for the survey was provided by SurveyMonkey.com.

The results found at www.aapc.com/workofacoder/ were completed by coders in all walks of life. Half work in physician practices. Billing company employees comprise 11.8 percent of responses, and outpatient hospital employees, 9.8 percent. The weight of the numbers in physician practices is reflective of AAPC membership. The survey goes further into the actual tasks performed in the office.

But that's where the ho-hum part of the survey ends. Here are some of the interesting results:

- Most of those surveyed (92 percent) felt relationships between providers and payers are positive.
- Respondents like the idea of working from home, and frequently mentioned noise in the office as a problem affecting productivity. In all, 31 percent of respondents said they work at home some of the time, and 8 percent said they worked at home full-time. The highest number of telecommuters is found among billers; 39 percent work at home some of the time and 13 percent work at home full-time.Only half said professional coders review EOBs and handle appeals at their office.
- Six out of 10 said their physicians have a solid knowledge of coding and compliance, and seven out of 10 say their physicians comply with coding documentation requirements.
- Most (93 percent) say they are provided with necessary resources and that their employers pay for their CEUs (71 percent). Only 62 percent of employers pay for membership dues.
- Fifty-six percent of respondents said their physicians perform coding duties in their practice. Of those physicians who code, 71 percent do so regularly or all the time. Of those who code, three out of four do so using cheat sheets or EMR pick lists.
- Most physicians, however, don't have formal coding education while their coders do.

This exhaustive survey by the Academy helps confirm the role of the coder while clarifying misconceptions in a profession that continues to grow and change. For a more specific look, check out www.aapc.com/workofacoder/.

The Work of a Coder:

Quotes

"I am very lucky. I work for a physician that understands coding and the importance of proper coding and compliance. He helps me keep informed on changes and also helps me with my education and CEUs."

"My employer understands & appreciates the value I bring to the company. I also have taken on an unofficial role as an educator and compliance officer to inform our company about coding changes and compliance issues. I am very fortunate to be working for a company like this one."

"In the past, they were content in coding everything as pain and only providing one dx per claim. I have proven that by being creative and using specific Dxs and different Dxs for different tests, reimbursement for these services have increased with fewer appeals necessary. Yes, I have made a difference in their practice."

"The coding department is always the ones to blame when revenue isn't being generated fast enough".

"When the coders go to classes and return with information, the providers do not always accept what we have learned as accurate".

"I love my physicians but sometimes I think that they think the coders are the bad guys because we give them back charts to dictate as well as needing more information. We don't have the same relationship as the other administrators in our office. Everybody is laughing and having great relationships with everybody else, except for us. We have to be in an office together (3 coders) and trudge away coding, trying to make ends meet at the end of the month, while is seems like everybody else isn't even working. The coders put in a ton of hours. Sometimes I wish I could be the one out there building relationships with the physicians to let them know that we do have a personality and that we're not the bad guys". CE

Work of a Coder:

Which Hat Do You Wear?

AAPC Survey Reveals Coders Can Be Enforcers or Rescuers

by Sheri Poe Bernard, CPC, CPC-H, CPC-P

Sorting through the thousands of responses to AAPC's The Work of a Coder Survey, it is clear that coders love coding.

But for coders working in physician offices or clinics, a strong division arises between those who love coding and love their jobs, and those who love coding but are downright miserable in the workplace. How do we account for the difference?

It may boil down to something as simple as perception. Consider this analogy: We all, intellectually, appreciate the fact that our neighborhoods and our families are kept safe by police and firefighters, either of whom would risk their life to protect you from harm's way. Emotionally, however, each creates a very different response in us.

When we think about an encounter with a police officer, what images do we conjure? We think of someone who demands that we slow down, or someone who waits to give us a ticket. The police officer is seen as an obstacle between us and our goals. He may have public safety as his goal, but to us, he's an unwelcome enforcer.

When we think about an encounter with a firefighter, what images do we conjure? We think of someone saving a cat in a tree, or rescuing a sleeping family from a house fire. The firefighter is seen as someone who makes himself an obstacle between us and certain danger. His goal is public safety, and we look upon him as our lifesaver.

When your physician sees you heading his way, who does he see: the police officer or the firefighter? An obstacle and enforcer or a welcome lifesaver? The answer will correlate directly to your own job satisfaction.

If you are a firefighter, bravo! You're part of a team with common goals and mutual respect. Your physician may see you as a firefighter because of your own communication skills and team-building activities, or you may be benefitting from groundwork laid by your predecessor. It's also possible that you work for a provider who independently figured out your role. Count yourself lucky, as this survey respondent does:

> "The relationship between coders and physicians is collaborative, and communication is essential to compliance and reimbursement. We are the "business side" to the medical office and we are valued as "equal partners" in the success of our practice. My employer generously provides resources and training (including conferences) for the coders in equal measure to other members of the practice (medical staff & providers)."

If you are a seen by your providers as a police officer, work to change your hat. Consider new communication tactics and work approaches. The fact that you are perceived as an enforcer is not necessarily your fault. It could be that your physician doesn't appreciate impediments to his clinical calendar, even when they lead to higher reimbursements. Or it could be that a previous coder employee warped the physician's view on the value of coders. What can you do to help your physician see you differently? We may find some answers if we look at the activities of firefighters:

Prevent and educate. The best fire is the one that is prevented. Work with your physician to reduce future errors by ensuring he or she understands the problem. Bring documentation or examples to illustrate your case, and keep your explanation as concise as possible. Remember:
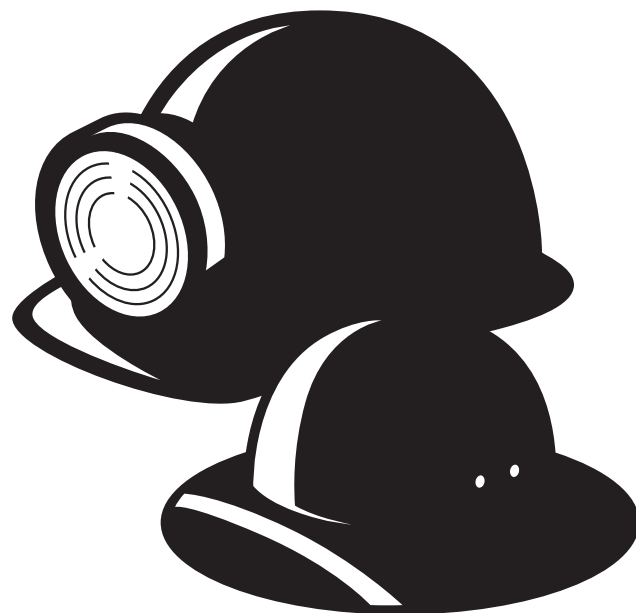
Never forget you and your physician are on the same team. Firefighters work in large teams and each player has a critical role. In teamwork, there is no right or wrong. Instead, everyone is committed to mutual success.

- **Don't fan the flames.** Keep your voice level and unemotional. Don't use "hot button" words like "always," "never," or "wrong." Once a physician is put on the defensive, communication suffers.

- **Speak in positive tones.** Many people only point out what is wrong; be sure to praise what is right. Outline steps to improve the rest. Put dollar amounts to your suggestions to move your image from "enforcer" to "money-maker."

Size up the problem. Before firefighters enter a building or climb their ladders, they assess the situation to determine which approach will be most effective. Coders seeking information from their providers should do the same. Ask neutral, introductory questions, and agree where you can. An emphatic nod accompanied by "Absolutely!" or "So true!" can get frank answers to your follow-up questions. Follow-up questions can help you sort feelings from facts. Wear down resistance with good humor and an earnest desire to fix the problem. Leave your ego at the door.

Preserve and control. Do what you can to diffuse the heat. The best way is to remain emotionally neutral yourself, even when faced with a confrontational doctor. Don't respond to aggressive or angry questions with an answer. When you answer an angry question, it sends a message that the question's tone is appropriate and you are the rightful recipient of anger. Instead, ask another question, or make a comment acknowledging the physician's concern: "I know exactly how you feel—this is so frustrating!" Not only will this help to cool the situation, but it also results in you gaining a reputation as an even-tempered professional.

Search and rescue. Successful search and rescue is dependent upon devising a plan and following it through. Do your homework before each encounter with the physician team. Have copies of coding or compliance rules you plan to cite. Be organized in your written and verbal communications, and link your concerns to the "vital signs" ($$$) of the business. How is this going to safeguard the practice and increase revenues?

Foster teamwork. Never forget you and your physician are on the same team. Firefighters work in large teams and each player has a critical role. In teamwork, there is no right or wrong. Instead, everyone is committed to mutual success. If your language and attitude communicate self-righteousness, teamwork is doomed. A team culture in which everyone is chasing mutual goals is what you seek. Look at how everyone suffers in this survey respondent's office:

> "I have been met with resistance and outright anger when I have asked the physicians to correct, complete or comply with whatever would be necessary to warrant the code they wish to be sent on to the insurance company. Now I just down-code the fee ticket if it is not documented it was not done."

Many times, we make the mistake of thinking our coding abilities are enough. But it is human nature to value trust more than competence. Earn your providers' trust, and they will see your competence. Use facts, data, and coding and compliance rules to allow your physicians to make their own analyses. Don't feel their need to validate. The facts are a reflection of your abilities. Trust is developed over time, and they will eventually be comfortable with your presentation of the facts without having to investigate the issue themselves. When that happens, you'll know you've changed hats and are a bona fide coding firefighter.

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