



General session

Modernizing staff recruiting, training, and quality among professional coding auditing teams

2023 Fall member retreat

Adam Freebairn, MOL, CPC, CHC
Director of Professional Coding and Reimbursement

Intermountain Health

San Diego

2023 Fall member retreat speaker

About me:



Adam Freebairn, MOL CPC, CHC

Director of Professional Coding and Reimbursement, Intermountain Health

Adam Freebairn is an accomplished healthcare professional with 20 years of experience in professional medical coding. In his current role for the past 9 years, Adam has driven success and efficiency in coding and reimbursement processes.

With a master's degree in Organizational Leadership from Gonzaga University and a bachelor's degree in Ornamental Horticulture and Residential Landscape Design from Utah State University, Adam brings a diverse educational background to his role.

He remains passionate about enhancing healthcare delivery through meticulous coding practices and reimbursement strategies, aligning with Intermountain Health's mission and vision.

He holds certifications as a Certified Professional Coder (CPC) and Certified in Healthcare Compliance (CHC).

Adam is a dedicated family person, proud father of four children, and loving husband to Tifani.

Intermountain Health at a glance

We are a mission-driven, nonprofit healthcare system where everyone is a caregiver.

- **Our Mission:**

- Intermountain Health is dedicated to the mission of "helping people live the healthiest lives possible."
- Our Catholic entities serve the mission of *"We reveal and foster God's healing love by improving the health of the people and communities we serve, especially those who are poor and vulnerable."*

| Organization Facts & Figures | |
|------------------------------|---------|
| Clinic locations | 385 |
| Regional hospitals | 33 |
| Staffed beds | 4,700 |
| States | 7 |
| Caregivers | ~64,000 |
| Providers | ~2,700 |

Learning objectives

Modernizing staff recruiting, training, and quality among professional coding auditing teams

- Discover one peer organization's philosophy behind intentional change in an industry that is rapidly evolving from multiple perspectives and narrow in on professional revenue cycle, more specifically
- Access a new model for lower cost, quality care with the understanding that historical quality auditing structures can contribute to rising healthcare costs
- Avoid second-hand consequences of team-based decision making—explore new ways to improve alignment between disparate revenue cycle support teams to progress toward industry-leading performance



Agenda

Medicine 3.0

Reimagining care and support - Slides 6-8

How to operationalize (organizationally)

The coding structure reimagined - Slides 9-12

How to operationalize (process)

The professional coding quality program reimagined - Slides 13-18

Ratios

Slides 19-20

Final word on Medicine 3.0

Slides 21-22



Medicine 3.0

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Medicine 3.0

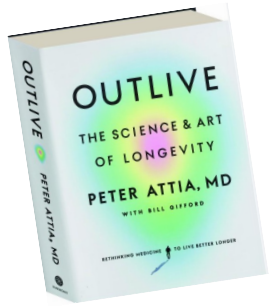
Overcoming the illusion of knowledge

**“The greatest obstacle to discovery is not ignorance—
it is the illusion of knowledge.”**

– Daniel J. Boorstin

Medicine 3.0

"Think different" – Steve Jobs



Outlive: The Science and Art of Longevity
by Peter Attia, MD

He had a recurring dream: **Catching eggs**

"... I was beginning to wonder how 'success' was defined. The reality was that nearly all these patients would still die within a few years. The egg would inevitably hit the ground. What were we really accomplishing?"

"... the only way to solve the problem was not to get better at catching the eggs. Instead, we needed to try to stop the guy who was throwing them."

Medicine 2.0 vs. Medicine 3.0

Fee for service vs. Fee for **value**

"Nearly all the money flows to treatment rather than prevention—and when I say 'prevention,' I mean prevention of human suffering."

- Peter Attia

Medicine 3.0

At Intermountain Health

| | Reimagined Primary Care | Reimagined Coding Support |
|--|--|---|
| Placed in the driver's seat | Patient | Provider |
| Focus on wellness | Patient | Provider Revenue Cycle |
| Partnership | Patient - Provider | Provider - Consultant |
| Personalized prevention plan | Patient-specific history, exam, appropriate screening (performed and scheduled), education, ongoing regular monitoring | Provider-specific history, exam, appropriate screening (performed and scheduled), education, ongoing regular monitoring |
| Multidisciplinary support team | Leveraged by PCP | Leveraged by Consultant |
| Surgical intervention and adjustment of prevention plan | Restore patient's health | Restore provider's revenue cycle performance |



How to operationalize (organizationally)

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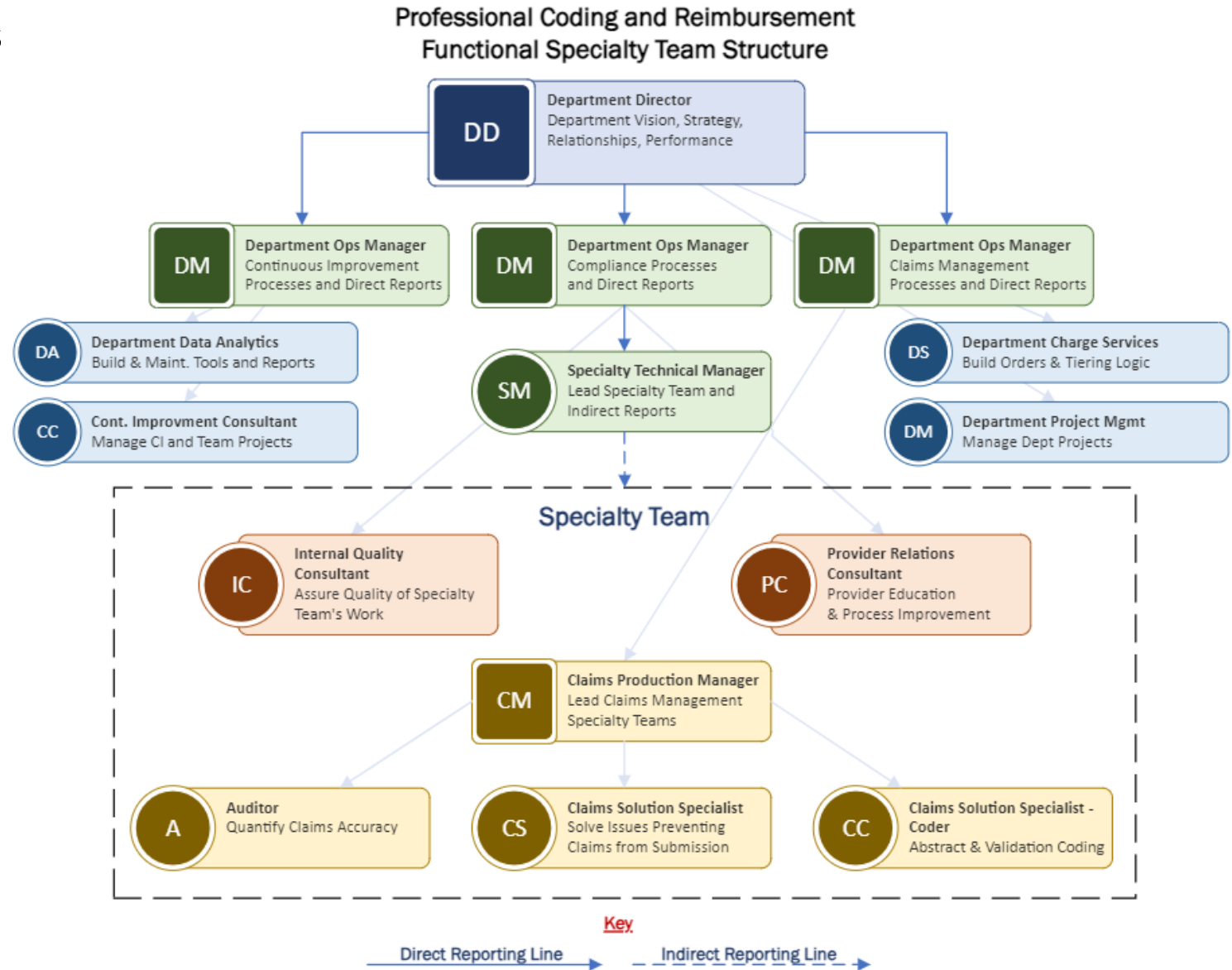
Reimagined coding structure

Fundamental unit – Specialty teams

Department Structure:

Director and Operations Managers

- Specialty Team
 - Specialty Technical Manager
 - Consultants, auditors, coders, Claims Solution Specialists (CSS)
- Specialty Team support
 - Analytics
 - Continuous Improvement
 - Internal Quality
 - Project Management



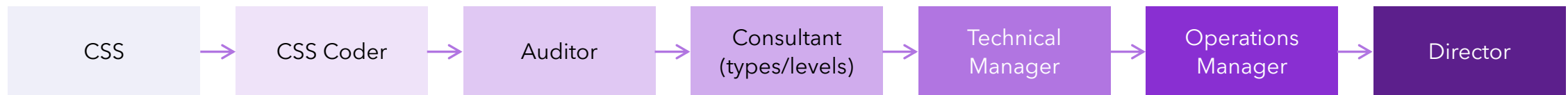
Reimagined coding structure

Specialty teams – Recruiting/training/mentoring/retention

Centralize all professional coding functions under a single, industry-experienced leader.

- Coder job satisfaction is higher when led by those with experience in their industry.
- It's easy to pull the wool over the eyes of a leader who doesn't know professional coding, be it production or quality.

Build a career path where you can vet people at the lowest level and work to train, mentor, and promote from within.



Specialty Team organization lends to ongoing training and mentoring for improved collective competence over time, as well as evaluation of fitness for future promotions.



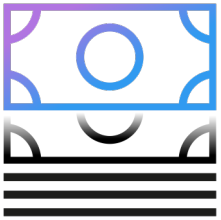
How to operationalize (process)

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Reimagined Professional Coding Quality Program

Key metrics

Three key performance indicators (KPIs) for coding quality auditing teams:



Financial error rate

(charges supported/charges reported)

- CMS insists on **<5%**



Trending rate

(% of audits identifying a problem that requires, per Federal Regulation, voluntary disclosure/repayment)

- The **lower** the trending rate, the fewer repayments are necessary



Trending severity

(Average dollars per incidence of voluntary disclosure/repayment)



Reimagined Professional Coding Quality Program

Continuous improvement - Getting to the roof

Leveraging Intermountain's Continuous Improvement Model

(a variant on "PDSA" - Plan. Do. Study. Act.)



(Personalized Prevention *PLAN*)

Initial education and collaboration between Coding Consultant and provider identifying audit scope, timeline, steps, and goals

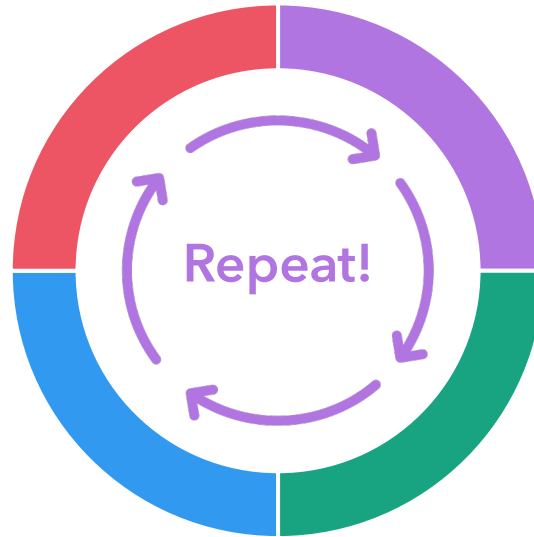


Our team audits and evaluates provider coding practice and outcomes

- Certified coders and Claims Solution Specialists (CSSs) manage billing/coding edits as a final pass to ensure claim accuracy before claims release
- Certified Coding Auditors audit provider coding practices and revenue cycle outcomes every 4 months



Providers render and code their services, procedures, and surgeries



Consultants share audit results with providers, collaborate to identify root causes of identified issues, and design improved processes for better revenue cycle outcomes

Reimagined Professional Coding Quality Program

Taking out the person throwing eggs

A deeper dive into the primary goal of the ACT step–

The goal is to take out the person on the roof throwing eggs, which helps to:

- ✓ Build a culture of continuous improvement that is vital to the success of this program
- ✓ Prevent/reduce the need for additional coding/billing FTEs
- ✓ Develop strong collaborative working relationships with other departments

Examples of improved processes as an outcome of the ACT step:

- Modifier and place-of-service flexing per payer policy (through IT dept)
- Clarified order labeling (through Charge Services division)
- New vs. established patient decision support form (through IT dept)
- Payer coverage and rate negotiation (through payer contracting dept)
- Modified appeals process (through central appeals unit)

Reimagined Professional Coding Quality Program

Additional points



Frequency:

- **3x** per year for providers with typical full-time production
- Less frequent for providers with low production (e.g., part-time, administration) or consistently superior results, **but never less than 1x per year**
 - *More frequent than 3x per year wouldn't give enough time to perform and present the audit nor sufficient time for new encounters to be produced prior to the next audit cycle*
 - *Less frequent and you lose traction on gains and open the opportunity for errors to start, metastasize, and eventually require radical intervention (increased trending rate and severity)*



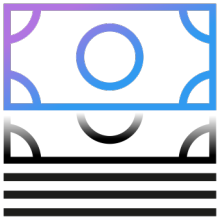
Scope:

- **15-20** charts per audit (**45-60 charts per provider per year**) covering all services at risk for over and under-coding
 - Address greatest risk first, lesser risk on subsequent reviews
- Identified patterns of error are resolved according to Federal Regulation

Reimagined Professional Coding Quality Program

Intermountain's results

Since implementation (a two-year roll-out):



Financial error rate

↓ 79%

Improved interdepartmental collaboration and connectedness:
the right meetings with the right people, facilitated by an experienced Specialty Coding Consultant or technical manager



Trending rate

↓ 68%

Improved provider-consultant relationship
(part of the team vs. adversary) and provider satisfaction



Trending severity

↓ 83%

Revenue cycle transparency for executive leadership



Ratios

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Staffing Levels

Getting the Ratios Right

Intermountain's ratios:



Coding consultant to
provider ratio:

1:160



Auditor to
provider ratio:

1:160

Considerations:

- Small health system ratios will require more consultants and auditors per provider given the limitations of individual mastery and necessary redundancy in training
- Our physicians code their own services with very few exceptions
- Intermountain's model reduces the need for certified coder FTEs



Final word on Medicine 3.0

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Medicine 3.0

The aspirational vision

“There comes a point where we need to stop just pulling people out of the river. We need to go upstream and find out why they’re falling in.”

– Bishop Desmond Tutu



Thank you

Questions?

Adam Freebairn, MOL, CPC, CHC

Adam.Freebairn@imail.org

801.232.5155