Clinical Documentation Improvement in Radiology

Fundamental disconnects exist between radiologists, administrators, billers, and coders. These disconnects adversely impact clinical documentation and coding. Further complicating the issue is the lack of clinical documentation received from referring physicians.

How can HIM Help?

As more and more HIM departments become responsible for radiology coding, there is an opportunity to work together with radiology peers through cross-education, collaboration and documentation standardization.

Cross-Education:

- Understand the entire radiology revenue cycle: from requisitions to professional fee billing.
- Educate your radiology peers and radiologists on the nuances of ICD-9-CM diagnosis coding.
- Identify liaisons on both sides: HIM and Radiology.

Collaboration:

- Review and update your radiology chargemaster annually.
- Keep abreast of Local Coverage Determination (LCD) changes.
- Work together with medical staff to get complete information from referring physicians.

Document Standardization:

- Implement standard report templates for most common procedures.
- Put process in place for reimbursement and documentation issues.
- Track and trend documentation errors for peer-to-peer education.

NOTES

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