

WHAT IS A CLINICAL CODER?

Clinical Coders (CCs) translate descriptions of medical diagnoses and procedures into codes, which are recorded as health care data. These data are used by the Victorian Government Department of Health to meet reporting requirements to the Commonwealth, to assist in health service planning, to monitor patient safety, to assist in research, and are also used as underpinning information for the acute public hospitals funding model.

CCs may perform the following tasks:

- read and analyse medical records to help identify all diagnoses, operations and procedures relevant to the current period of patient care
- clarify inconsistent, doubtful or non-specific information in a medical record by consulting with the responsible medical practitioner
- allocate codes to patients' current period of care, using knowledge of the information contained within the International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Australian Modification (ICD-10-AM), the Australian Classification of Health Interventions (ACHI) and the Australian Coding Standards (ACS).
- conduct assessment of work to make sure that there is continuous improvement in ICD-10-AM/ACHI coding and collection of quality health data
- assess the medical record content and highlight shortcomings to management
- maintain ICD-10-AM/ACHI/ACS coding books to make sure they are updated to the current version being used
- assist with the education of clinical staff with regard to ICD-10-AM
- work with computing and finance staff
- assist with medical research and casemix projects.

CCs work closely with medical staff such as doctors who record information within patients' medical records. Coders then translate this medical diagnoses and procedures information into codes.

Personal requirements and abilities of CCs:

- the ability to abstract – this is the process of identifying conditions and procedures documented in the medical record that need to be coded
- a good knowledge of medical terminology, anatomy and physiology
- the ability to undertake precise and detailed work
- good communication and interpersonal skills
- the ability to work as part of a team
- good organisational skills
- an interest in health care procedures
- computer literacy
- a willingness to continually update skills and knowledge
- a willingness to have work regularly checked and audited.

Education and training to become a CC:

- Bachelor of Health Sciences & Master of Health Information Management (four year course for school leavers and special entry applicants), La Trobe University, Melbourne. See: <http://www.latrobe.edu.au/courses/health-information-management>
- Bachelor of Health Sciences (major in clinical coding and exit from the above degree after three years), La Trobe University, Melbourne. See: <http://www.latrobe.edu.au/courses/healthinformation-management>
- Master of Health Information Management, (graduate entry, two year course), La Trobe University. See: <http://www.latrobe.edu.au/courses/health-information-management/postgraduate>
- Various distance education courses in Clinical Coding through the Health Information Management Association of Australia (HIMAA). See: <http://hima2.org.au/education/>
- Bachelor of Science (major in Health Information Management) OR Masters in Health Information Management at Curtin University, Perth. See: http://handbook.curtin.edu.au/courses/indexes/faculty_of_health_sciences.html

Employment opportunities:

CCs work mainly in public and private hospitals. Roles vary depending on the hospital's casemix (type of services offered), and size. For example, a coder in a country regional area may be responsible for the production of data for a number of hospitals, involving travel to each. In larger institutions, the role of the coder may also include supervision of coding staff, data analysis and education. Coders may also work in specialist research and clinical units and for health insurance funds.

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