

Sleeping Beauty Awakens: Rewarding Coders in the New DRG Era - Ever Since the Phoenicians, Gratitude Has Currency:

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Introduction: Remember Sleeping Beauty, awakened by a prince's kiss?

Imagine that the new DRG system is our Sleeping Beauty, slumbering in potential.

With the right incentives in place, we can awaken it to its full power! Years ago, Don Hindle used to talk about the diffuse brain in the health care system that needed to be harnessed in order to make the projects work.

Inspired by a timeless truth - "Since the Phoenicians invented money, there is only one way to express gratitude" (Portuguese proverb) - this paper proposes a bold approach: reward coders for accurate and efficient work.

Background: DRG coding in a large university hospital with more than 100,000 admissions per year is a challenging task. The University Clinical Centre of Ljubljana has been involved in DRG implementation since 2004. As there were no formal training programs for DRG coders at the time of inception, Slovenia has developed a modified clinical coder model that includes clinicians as the persons responsible for the accuracy of the coding information, as well as nurses as facilitators and other members of the staff. We have always promoted the diversity of professional cultures as a catalyst for the implementation of change in the hospital. In 2023, with the introduction of a new version of the DRG 10 grouper system, version 10 (a leap from version 4), the hospital was catching up, but was still faced with chronic challenges such as under-coding and knowledge gaps. It seemed that the traditional approaches were not going to be enough.

Solution: With the current availability of online coding training programs such as eHealth Education's Diploma of Clinical Coding eHrol, we created a group of coders that included approximately one third of physicians with some previous coding experience, some complete beginners, and the remainder of staff with various non-medical backgrounds who had been involved in the coding and billing process for years. As the people selected were fully committed to their work, we proposed a novel solution: a reward system that recognizes the coders' crucial role, as well as the allocation of part of their time as dedicated to the program, partly working from home. This, like the prince's kiss, is a source of motivation and commitment.

In addition, 6 members of the coder group are also active in a separate group that has been set up with the intention of continuing data analysis and improvement and benchmarking. It is interesting to note that the bottom line benefits of both groups at this point in time greatly exceed the investment in training and rewards.

Methodology: This paper is a preliminary report based on insights from leadership and successful coder training initiatives. We analyze the impact of reward systems in similar contexts and propose a framework specifically designed for the DRG environment.

Expected outcomes: By empowering coders, we are envisioning Increased coding accuracy and efficiency, Improved adoption of the new system, Improved coder morale and motivation, Optimized financial performance for the hospital and desired outcomes for the country as a whole.

Significance: This paper offers a fresh perspective on how to address the challenges of recruiting, training, acknowledging and rewarding of DRG coders, where recommendations can be beneficial to different DRG environments. It goes beyond traditional compliance-driven approaches and promotes a culture of value and incentives. In essence, it unlocks the true potential of the system to benefit coders, facilities and ultimately patients.