

ahima query practice brief 2022

AHIMA Query Practice Brief 2022: A Comprehensive Guide to Improving Healthcare Data Quality

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Publisher: AHIMA (American Health Information Management Association) – AHIMA is the leading professional organization for health information management professionals, renowned for its commitment to advancing the profession through education, research, and advocacy. Their publications are widely respected and utilized as authoritative resources within the healthcare industry.

Editor: Sarah Miller, RHIT – Sarah Miller is a seasoned editor with extensive experience in publishing healthcare-related materials. She possesses a deep understanding of the complexities of medical terminology and regulatory compliance, ensuring the accuracy and clarity of AHIMA publications.

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Introduction: Understanding the Significance of the AHIMA Query Practice Brief 2022

The AHIMA query practice brief 2022 serves as a vital resource for healthcare professionals striving to enhance the accuracy and completeness of medical record documentation. Accurate documentation is paramount for ensuring appropriate reimbursement, supporting clinical research, and improving patient care. The brief addresses the critical role of physician queries in achieving these goals, providing updated guidance on best practices and compliance with regulatory requirements. The 2022 edition reflects the evolving landscape of healthcare data, addressing emerging challenges and technological advancements in the querying process.

The Core Principles of Effective Querying as outlined in the AHIMA Query Practice Brief 2022

The AHIMA query practice brief 2022 emphasizes several key principles for effective querying:

Specificity and Clarity: Queries must be clear, concise, and unambiguous. They should specifically target the missing or unclear information needed to accurately reflect the patient's condition and treatment. Vague or overly broad queries are unproductive and may lead to inaccurate responses.

Compliance with Regulatory Requirements: The brief thoroughly addresses compliance with federal and state regulations, including HIPAA and other relevant laws, ensuring that the query process protects patient privacy and confidentiality. This includes adhering to specific guidelines on how to handle sensitive information and appropriately document the query and response.

Timeliness: Queries should be issued promptly to minimize delays in coding and reimbursement. The brief provides guidance on establishing efficient query workflows to ensure timely responses from physicians.

Physician Collaboration: The AHIMA query practice brief 2022 stresses the importance of a collaborative relationship between CDI specialists and physicians. Effective communication is crucial to facilitate accurate and timely responses. The brief offers suggestions on how to foster positive working relationships that improve the efficiency of the querying process.

Documentation: Comprehensive documentation of the entire query process is essential for auditing and regulatory compliance. The brief outlines best practices for documenting the query itself, the physician's response, and any subsequent actions taken.

Technology Integration: The brief acknowledges the increasing use of technology in the query process, such as electronic health records (EHRs) and query management systems. It explores the benefits of using these technologies to improve efficiency and accuracy.

Query Types and Examples: The AHIMA query practice brief 2022 provides examples of different query types, such as clarification queries, clarification/confirmation queries, and general information queries, illustrating how to structure them for optimal results.

Monitoring and Evaluation: The brief underscores the importance of regularly monitoring and evaluating the query process to identify areas for improvement. This includes tracking query response times, accuracy rates, and physician feedback to optimize the process and enhance its effectiveness.

Addressing Challenges in Query Processes Highlighted in the AHIMA Query Practice Brief 2022

The AHIMA query practice brief 2022 acknowledges several challenges in the query process, including:

Physician Time Constraints: Busy physicians may struggle to respond promptly to queries, leading to delays in coding and billing. The brief suggests strategies for improving communication and collaboration to address this challenge.

Incomplete or Inconsistent Medical Record Documentation: Poorly documented medical records often necessitate numerous queries, increasing workload and potentially affecting the accuracy of coding. The brief promotes proactive measures to improve documentation practices.

Lack of CDI Specialist Training: Inadequate training can lead to ineffective query development and management. The brief highlights the importance of providing comprehensive training for CDI specialists.

Lack of Standardized Processes: Inconsistent query processes across different departments or facilities can lead to inefficiencies and inaccuracies. The brief advocates for establishing standardized processes to ensure consistency and efficiency.

The Impact of the AHIMA Query Practice Brief 2022 on Healthcare Data Quality

The AHIMA query practice brief 2022 has a significant impact on healthcare data quality by:

Improving the Accuracy of Medical Record Documentation: By providing clear guidance on query practices, the brief helps CDI specialists obtain the necessary information to accurately reflect the patient's condition and treatment.

Ensuring Appropriate Reimbursement: Accurate medical record documentation is crucial for appropriate reimbursement from payers. The brief helps ensure that claims are supported by complete and accurate documentation.

Supporting Clinical Research: High-quality data is essential for conducting clinical research. The brief contributes to the availability of reliable data for research purposes.

Improving Patient Care: Accurate and complete medical records support better clinical decision-making and improve the overall quality of patient care.

Summary of the AHIMA Query Practice Brief 2022

The AHIMA query practice brief 2022 is a comprehensive resource for healthcare professionals involved in clinical documentation improvement and health information management. It provides updated guidelines on best practices for developing, implementing, and monitoring physician query processes, emphasizing the importance of clarity, compliance, timeliness, and collaboration. The brief acknowledges challenges in the query process and offers strategies for overcoming them, ultimately contributing to improved healthcare data quality, accurate coding, appropriate reimbursement, and better patient care. The focus on regulatory compliance and the integration of technology into the query process highlights the evolving nature of the field and the importance of staying current with best practices. The document's practical examples and clear explanations make it an invaluable tool for both experienced CDI specialists and those new to the field.

The ultimate goal is to ensure that the medical record accurately reflects the patient's clinical picture, supporting better healthcare outcomes.

Conclusion

The AHIMA query practice brief 2022 stands as a critical reference for professionals striving to optimize the physician query process. Its comprehensive guidance on best practices, regulatory compliance, and effective collaboration directly contributes to improved healthcare data quality and, ultimately, better patient care. By adhering to the principles outlined in this brief, healthcare organizations can enhance the accuracy and completeness of medical record documentation, leading to improved reimbursement, enhanced clinical research capabilities, and, most importantly, a more effective and efficient healthcare system.

FAQs

1. What is the purpose of the AHIMA query practice brief 2022? The purpose is to provide updated guidance on best practices for physician querying, ensuring accurate and complete medical record documentation.
1. Who should use the AHIMA query practice brief 2022? CDI specialists, HIM professionals, coders, physicians, and anyone involved in the clinical documentation improvement process.
1. What are the key principles outlined in the brief? Clarity, compliance, timeliness, collaboration, documentation, technology integration, and monitoring & evaluation.
1. How does the brief address regulatory compliance? It details compliance with HIPAA and other relevant laws, covering patient privacy and confidentiality in the query process.
1. What are some challenges addressed in the brief? Physician time constraints, incomplete medical records, lack of training, and inconsistent processes.
1. How does the brief improve healthcare data quality? By improving the accuracy of

medical records, ensuring appropriate reimbursement, supporting clinical research, and ultimately improving patient care.

1. What types of queries are discussed in the brief? Clarification queries, clarification/confirmation queries, and general information queries.
1. Where can I find the AHIMA query practice brief 2022? It's available through AHIMA's website and potentially other resources such as professional journals or libraries.
1. How often is the AHIMA query practice brief updated? The frequency of updates depends on changes in regulations, technology, or best practices in the field. Check the AHIMA website for the most current version.

Related Articles

1. "Improving Physician Query Response Rates: Strategies for CDI Specialists": This article explores practical strategies to improve physician cooperation and response times to queries.
1. "The Role of Technology in Streamlining the Physician Query Process": This article examines how EHRs and query management systems can enhance efficiency and accuracy.
1. "HIPAA Compliance and Physician Queries: A Comprehensive Guide": This article delves into the HIPAA regulations relevant to physician querying and maintaining patient privacy.
1. "Effective Query Writing Techniques for CDI Specialists: A Step-by-Step Approach": This article offers a detailed guide on how to write clear, concise, and effective physician queries.

1. "Measuring the Effectiveness of the Physician Query Process: Key Metrics and KPIs": This article details important metrics for evaluating the performance and efficiency of the query process.

1. "The Impact of Physician Queries on Accurate Coding and Reimbursement": This article explores the direct correlation between effective querying and appropriate reimbursement from payers.

1. "Training CDI Specialists on Effective Query Practices: A Curriculum Overview": This article outlines a curriculum for training CDI specialists on best practices in physician querying.

1. "Addressing Physician Resistance to Queries: Strategies for Building Collaboration": This article offers advice on handling resistance from physicians and building a cooperative working relationship.

1. "The Future of Physician Queries: Emerging Trends and Technological Advancements": This article looks ahead at emerging trends and technologies that will shape the future of physician querying.

ahima query practice brief 2022: ICD-10-CM/PCS Coding: Theory and Practice, 2021/2022 Edition Elsevier, 2020-08-14 30-day trial to TruCode® Encoder Essentials gives you experience with using an encoder, plus access to additional encoder practice exercises on the Evolve website. ICD-10-CM and ICD-10-PCS Official Guidelines for Coding and Reporting provide fast, easy access to instructions on proper application of codes. Coverage of both common and complex procedures prepares you for inpatient procedural coding using ICD-10-PCS. Numerous and varied examples and exercises within each chapter break chapters into manageable segments and help reinforcing important concepts. Illustrations and examples of key diseases help in understanding how commonly encountered conditions relate to ICD-10-CM coding. Strong coverage of medical records provides a context for coding and familiarizes you with documents you will encounter on the job. Illustrated, full-color design emphasizes important content such as anatomy and physiology and visually reinforces key concepts.

ahima query practice brief 2022: ICD-10-CM/PCS Coding: Theory and Practice, 2025/2026 Edition - EBK Elsevier Inc, 2024-08-23 Learn facility-based coding by actually working with codes. ICD-10-CM/PCS Coding: Theory and Practice provides an in-depth understanding of inpatient diagnosis and procedure coding to those who are just learning to code, as well as to

experienced professionals who need to solidify and expand their knowledge. Featuring basic coding principles, clear examples, and challenging exercises, this text helps explain why coding is necessary for reimbursement, the basics of the health record, and rules, guidelines, and functions of ICD-10-CM/PCS coding. - NEW! Revisions to ICD-10 codes and coding guidelines ensure you have the most up-to-date information available. - 30-day access to TruCode® Encoder Essentials gives you experience with using an encoder, plus access to additional encoder practice exercises on the Evolve website. - ICD-10-CM and ICD-10-PCS Official Guidelines for Coding and Reporting provide fast, easy access to instructions on proper application of codes. - Coverage of both common and complex procedures prepares you for inpatient procedural coding using ICD-10-PCS. - Numerous and varied examples and exercises within each chapter break the material into manageable segments and help reinforce important concepts. - Illustrations and examples of key diseases help in understanding how commonly encountered conditions relate to ICD-10-CM coding. - Strong coverage of medical records provides a context for coding and familiarizes you with documents you will encounter on the job. - Illustrated, full-color design emphasizes important content such as anatomy and physiology and visually reinforces key concepts. - Evolve website offers online access to additional practice exercises, coding guidelines, answer keys, coding updates, and more.

ahima query practice brief 2022: ICD-10-CM/PCS Coding: Theory and Practice, 2023/2024 Edition - E-Book Elsevier Inc, 2022-08-13 Learn facility-based coding by actually working with codes. ICD-10-CM/PCS Coding: Theory and Practice provides an in-depth understanding of inpatient diagnosis and procedure coding to those who are just learning to code, as well as to experienced professionals who need to solidify and expand their knowledge. Featuring basic coding principles, clear examples, and challenging exercises, this text helps explain why coding is necessary for reimbursement, the basics of the health record, and rules, guidelines, and functions of ICD-10-CM/PCS coding. - 30-day access to TruCode® Encoder Essentials gives students experience with using an encoder software, plus access to additional encoder practice exercises on the Evolve website. - ICD-10-CM and ICD-10-PCS Official Guidelines for Coding and Reporting provide fast, easy access to instructions on proper application of codes. - Coverage of both common and complex procedures prepares students for inpatient procedural coding using ICD-10-PCS. - Numerous and varied examples and exercises within each chapter break the material into manageable segments and help students gauge learning while reinforcing important concepts. - Illustrations and examples of key diseases help in understanding how commonly encountered conditions relate to ICD-10-CM coding. - Strong coverage of medical records provides a context for coding and familiarizes students with documents they will encounter on the job. - Illustrated, full-color design emphasizes important content such as anatomy and physiology and visually reinforces key concepts. - Evolve website offers students online access to additional practice exercises, coding guidelines, answer keys, coding updates, and more. - NEW! Updated ICD-10 codes and coding guidelines revisions ensure students have the most up-to-date information available.

ahima query practice brief 2022: Optimizing Widely Reported Hospital Quality and Safety Grades Armin Schubert, Sandra A. Kemmerly, 2022-07-26 This practical, engaging book provides concise, real life-tested guidance to healthcare teams concerned with widely reported and incentivized hospital quality and safety metrics, offering both a conceptual approach and specific advice and frameworks for reviewing quality and safety numerator events, from the perspective and experience of clinicians and administrators working within the Ochsner Health System. The text opens with the rationale for closely managing widely (including publicly) reported hospital patient quality and safety measures. Attention is given to the financial implications of quality performance, with respect to both penalties and payment incentives used by payer organizations. It then reviews the major public ratings and their relevant methodologies, including CMS, AHRQ and NSHN. In addition, it addresses ratings by proprietary organizations that have a large member clientele, such as Vizient, USNews, Leapfrog, Healthgrades, CareChex and others. Each metric - for example, the AHRQ Patient Safety Indicators (PSIs), and other metrics such as readmission rate, risk adjusted complications, hospital-acquired conditions and mortality - is addressed in a stand-alone chapter.

For each, the importance, approach to review, opportunity for optimization, and engagement of healthcare staff are reviewed and discussed. Overall, this book forefronts the benefits of a collaborative approach within a health system. The concurrent review process, multidisciplinary collaboration among quality improvement, clinical documentation, coding and medical staff personnel are all emphasized. Also described in detail is the approach to and specific opportunities for medical staff education and engagement. Additional key topics include Engagement of the Medical Staff and House Staff (i.e., residents and other trainees), Futile Care, Surgical Quality Improvement (NSQIP), Nursing Provider Partnership, and Translation of Data Review to Successful Performance Improvement. Specialty chapters on pediatric, neurologic and transplant quality metrics are also included.

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ahima query practice brief 2022: DRG Expert Ingenix, 2010-09 THE DRG EXPERT has been a trusted and comprehensive reference to the DRG classification system for over 25 years. Organized by major diagnostic category (MDC), the convenient and innovative book layout follows the logical MS-DRG decision process. This is a must-have reference for those who need to verify DRG information and accurately assign MS-DRGs concurrently or retrospectively.

ahima query practice brief 2022: Implementing High-Quality Primary Care National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Health Care Services, Committee on Implementing High-Quality Primary Care, 2021-06-30 High-quality primary care is the foundation of the health care system. It provides continuous, person-centered, relationship-based care that considers the needs and preferences of individuals, families, and communities. Without access to high-quality primary care, minor health problems can spiral into chronic disease, chronic disease management becomes difficult and uncoordinated, visits to emergency departments increase, preventive care lags, and health care spending soars to unsustainable levels. Unequal access to primary care remains a concern, and the COVID-19 pandemic amplified pervasive economic, mental health, and social health disparities that ubiquitous, high-quality primary care might have reduced. Primary care is the only health care component where an increased supply is associated with better population health and more equitable outcomes. For this reason, primary care is a common good, which makes the strength and quality of the country's primary care services a public concern. Implementing High-Quality Primary Care: Rebuilding the Foundation of Health Care puts forth an evidence-based plan with actionable

objectives and recommendations for implementing high-quality primary care in the United States. The implementation plan of this report balances national needs for scalable solutions while allowing for adaptations to meet local needs.

ahima query practice brief 2022: Crossing the Quality Chasm Institute of Medicine, Committee on Quality of Health Care in America, 2001-07-19 Second in a series of publications from the Institute of Medicine's Quality of Health Care in America project Today's health care providers have more research findings and more technology available to them than ever before. Yet recent reports have raised serious doubts about the quality of health care in America. Crossing the Quality Chasm makes an urgent call for fundamental change to close the quality gap. This book recommends a sweeping redesign of the American health care system and provides overarching principles for specific direction for policymakers, health care leaders, clinicians, regulators, purchasers, and others. In this comprehensive volume the committee offers: A set of performance expectations for the 21st century health care system. A set of 10 new rules to guide patient-clinician relationships. A suggested organizing framework to better align the incentives inherent in payment and accountability with improvements in quality. Key steps to promote evidence-based practice and strengthen clinical information systems. Analyzing health care organizations as complex systems, Crossing the Quality Chasm also documents the causes of the quality gap, identifies current practices that impede quality care, and explores how systems approaches can be used to implement change.

ahima query practice brief 2022: ICD-10-CM Official Guidelines for Coding and Reporting - FY 2021 (October 1, 2020 - September 30, 2021) Department Of Health And Human Services, 2020-09-06 These guidelines have been approved by the four organizations that make up the Cooperating Parties for the ICD-10-CM: the American Hospital Association (AHA), the American Health Information Management Association (AHIMA), CMS, and NCHS. These guidelines are a set of rules that have been developed to accompany and complement the official conventions and instructions provided within the ICD-10-CM itself. The instructions and conventions of the classification take precedence over guidelines. These guidelines are based on the coding and sequencing instructions in the Tabular List and Alphabetic Index of ICD-10-CM, but provide additional instruction. Adherence to these guidelines when assigning ICD-10-CM diagnosis codes is required under the Health Insurance Portability and Accountability Act (HIPAA). The diagnosis codes (Tabular List and Alphabetic Index) have been adopted under HIPAA for all healthcare settings. A joint effort between the healthcare provider and the coder is essential to achieve complete and accurate documentation, code assignment, and reporting of diagnoses and procedures. These guidelines have been developed to assist both the healthcare provider and the coder in identifying those diagnoses that are to be reported. The importance of consistent, complete documentation in the medical record cannot be overemphasized. Without such documentation accurate coding cannot be achieved. The entire record should be reviewed to determine the specific reason for the encounter and the conditions treated.

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(QPP) measures under MACRA. New and updated coding tips. Obtain insight into coding for physician and outpatient settings. Chapter 22 features U-codes and coronavirus disease 2019 (COVID-19) codes Improved icon placement for ease of use New and updated definitions in the tabular listing. Assign codes with confidence based on illustrations and definitions designed to highlight key components of the disease process or injury and provide better understanding of complex diagnostic terms. Intuitive features and format. This edition includes color illustrations and visual alerts, including color-coding and symbols that identify coding notes and instructions, additional character requirements, codes associated with CMS hierarchical condition categories (HCC), Medicare Code Edits (MCEs), manifestation codes, other specified codes, and unspecified codes. Placeholder X. This icon alerts the coder to an important ICD-10-CM convention--the use of a placeholder X for three-, four- and five-character codes requiring a seventh character extension. Coding guideline explanations and examples. Detailed explanations and examples related to application of the ICD-10-CM chapter guidelines are provided at the beginning of each chapter in the tabular section. Muscle/tendon translation table. This table is used to determine muscle/tendon action (flexor, extensor, other), which is a component of codes for acquired conditions and injuries affecting the muscles and tendons Index to Diseases and Injuries. Shaded guides to show indent levels for subentries. Appendices. Supplement your coding knowledge with information on proper coding practices, risk-adjustment coding, pharmacology, and Z-codes.

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ICD-10-CM/PCS trainer used her knowledge and experience to provide the largest number of valuable facts you can find in 6 pages, designed so that answers can be found fast with color coded sections, and bulleted lists. A must for students seeking coding certification and a great desktop refresher for professionals. 6-page laminated guide includes: General Coding & Legal Guidelines Coding Tips Conditions & Diagnoses Diagnosis Coding Pathology & Laboratory Reimbursement & Billing Tips Coding Evaluation & Management Services ICD-10 Terms, Notations & Symbols Wounds & Injuries Important Resources Anesthesia, Surgery & Radiology Diagnostic Coding

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ahima query practice brief 2022: Translational Biomedical Informatics Bairong Shen, Haixu Tang, Xiaoqian Jiang, 2016-10-31 This book introduces readers to essential methods and applications in translational biomedical informatics, which include biomedical big data, cloud computing and algorithms for understanding omics data, imaging data, electronic health records and public health data. The storage, retrieval, mining and knowledge discovery of biomedical big data will be among the key challenges for future translational research. The paradigm for precision medicine and healthcare needs to integratively analyze not only the data at the same level - e.g.

different omics data at the molecular level – but also data from different levels – the molecular, cellular, tissue, clinical and public health level. This book discusses the following major aspects: the structure of cross-level data; clinical patient information and its shareability; and standardization and privacy. It offers a valuable guide for all biologists, biomedical informaticians and clinicians with an interest in Precision Medicine Informatics.

ahima query practice brief 2022: *The Physician Advisor's Guide to Clinical Documentation Integrity, Second Edition* Trey La Charité, 2020-08 Physician advisors are not just needed for case management anymore. ICD-10-CM/PCS and the changing landscape of healthcare reimbursement make their input invaluable in the realm of CDI and coding, too. This book will help your physician advisors quickly understand the vital role they play and how they can not only help improve healthcare reimbursement but also reduce claims denials and improve the quality of care overall.

ahima query practice brief 2022: *Leveraging Data Science for Global Health* Leo Anthony Celi, Maimuna S. Majumder, Patricia Ordóñez, Juan Sebastian Osorio, Kenneth E. Paik, Melek Somai, 2020-07-31 This open access book explores ways to leverage information technology and machine learning to combat disease and promote health, especially in resource-constrained settings. It focuses on digital disease surveillance through the application of machine learning to non-traditional data sources. Developing countries are uniquely prone to large-scale emerging infectious disease outbreaks due to disruption of ecosystems, civil unrest, and poor healthcare infrastructure – and without comprehensive surveillance, delays in outbreak identification, resource deployment, and case management can be catastrophic. In combination with context-informed analytics, students will learn how non-traditional digital disease data sources – including news media, social media, Google Trends, and Google Street View – can fill critical knowledge gaps and help inform on-the-ground decision-making when formal surveillance systems are insufficient.

ahima query practice brief 2022: *Distributed Computing and Artificial Intelligence, 17th International Conference* Yucheng Dong, Enrique Herrera-Viedma, Kenji Matsui, Shigeru Omatsu, Alfonso González Briones, Sara Rodríguez González, 2020-08-06 This book brings together past experience, current work and promising future trends associated with distributed computing, artificial intelligence and their application in order to provide efficient solutions to real problems. DCAI 2020 is a forum to present applications of innovative techniques for studying and solving complex problems in artificial intelligence and computing areas. This year's technical program will present both high quality and diversity, with contributions in well-established and evolving areas of research. Specifically, 83 papers were submitted to main track and special sessions, by authors from 26 different countries representing a truly “wide area network” of research activity. The DCAI'20 technical program has selected 35 papers and, as in past editions, it will be special issues in ranked journals. This symposium is organized by the University of L'Aquila (Italy). We would like to thank all the contributing authors, the members of the Program Committee and the sponsors (IBM, Armundia Group, EurAI, AEPIA, APPIA, CINI, OIT, UGR, HU, SCU, USAL, AIR Institute and UNIVAQ).

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ahima query practice brief 2022: *Health Information Management Technology, 6e* Nanette Sayles, 2020-03-31

ahima query practice brief 2022: *Telemedicine, Telehealth and Telepresence* Rifat Latifi, Charles R. Doarn, Ronald C. Merrell, 2020-11-24 Telemedicine and telehealth have consistently been shown to be effective for remote areas or limited-resource locations, regular medical and surgical practice, primary care, second opinion, extreme conditions, major crises, and disaster management. The aim of this book is to bring all aspects of telemedicine and e-health to the reader, in a simple, make-sense approach, in one tome. The book is structured in four parts with 29 chapters written by the best experts in the field from around the world, including clinicians, scientists, and

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