

Innovative Coding Service Drives an Additional £15m in Annual Income

Trust Challenges

- Its clinical coding operation was sub-optimal
- Some episodes of care were not being coded
- Heavy reliance on contract coding staff
- PbR Deadlines were not regularly being met



How CEC Healthcare Helped

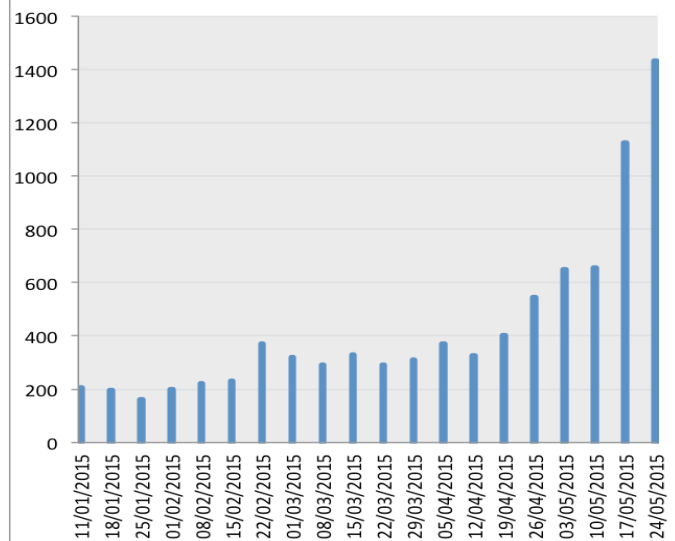
- We initially supplemented the trust's in-house team with our own coders
- Building on this success, our innovative service bureau model was introduced to compliment and support the in-house team
- This model enabled the trust to make use of our management structures as well as gain access to experienced remote coders
- The current scope of engagement is 25% of the caseload, with plans to increase further



Results

1. *Enhanced Income and Cash Flows, through:*
 - CEC HC identifying and correcting uncoded Outpatient procedures. This has provided the trust with an extra income of approximately £1.25m per month
 - Efficient coding ensuring PbR deadlines are no longer missed, improving cash flows
2. *Cost Savings between 10 and 25 percent, due to:*
 - A more efficient coding operation
 - Releasing valuable management time and office space
 - Alleviating the dependency on agency staff
 - No recruitment or retention costs associated with new permanent coders

Number of Outpatient Procedures Coded per Week (January- May 2015)



CEC HC introduced its service bureau to the trust in March 2015. The dramatic increase in the number of cases being coded since then – a 350% increase – is providing the trust with a substantially increased income stream.