

Coder meeting 6/11/08

7 Hospitals attended the meeting; 11 Birth Registrars were in attendance.

I. C VanDerMeid will bring Perinatal Forum oral health workgroup materials to our next Coder meeting as those in attendance expressed an interest in seeing them. She will also bring her version (her own creation) of the ACOG form for all to see.

II. Corning Hospital's Birth Registrar is having problems with knowing how to code the insurance questions. The group suggested she speak to someone in billing who would be familiar with the insurances offered in her region.

III. Time was spent coding the medical chart provided by Lakeside. We compared answers with those provided by Dr C Glantz and D Hayes (neither of whom were able to be at the meeting). Differences/questions that arose from our discussion were as follows. We look forward to comments from Dr Glantz and D Hayes.

1. Membranes were artificially ruptured- is this considered augmentation?

According to Dr. Glantz: [I would not consider AROM to be augmentation unless an accompanying note says something about slow progress, inadequate contractions, or that it is being done specifically for augmentation or stimulation of labor.](#)

2. Number of visits and last visit date continue to be problems. Some counted NSTs and observations. In some hospitals NSTs are done in the physician's office and so they are included in the prenatal record while others never receive a record of any of these visits. Number of visits is therefore inconsistently coded in our region.

3. Discussed the correct 1<sup>st</sup> visit date since exam occurred on 3/8 but was initially seen on 2/8. At A/O one physician never gets the OB history until the 5<sup>th</sup> month. How are they supposed to code 1<sup>st</sup> visit which by definition includes both physical exam and OB history?

4. Many coded 'other vaginal bleeding' since 'profuse bleeding' was noted on 5/10/06 visit. This was not coded by Dr Glantz or D Hayes.

According to Dr Glantz: [As best as I can tell, the "profuse bleeding" was from cervicitis during an office visit, and the bleeding stopped as soon as the speculum was removed. Despite the vivid adjective, this does not sound at all significant to me, and I would not code it.](#)

5. Most felt 'other serious chronic disease' should be coded since pregnant teen had cut herself twice.

6. Because she was noted in psych eval to be using marijuana most felt illicit drug use should be coded as 'yes'.

IV. Analysis of missing information by hospital for 2007 in the fields of prenatal weight, height and delivery weight was distributed. It was noted that St James Mercy and Schuyler Hospitals had not missing information in these fields.

V. Analysis of BMI categories by pregnancy related hypertension for the year 2007 by hospital was distributed and reviewed.

VI. Arnot Ogden is having trouble getting reimbursed for travel to our Coder meetings and wondered if they could perhaps join the meeting by phone. Corning Coders invited them to drive to Corning and then all drive up together.

VII. Next meeting date will be announced.