

An Assessment of the Targeted Billing and Coding Training Provided to RCORP Grantees: December 2022 to March 2023

KEY FINDINGS AND RECOMMENDATIONS

The following key findings and recommendations are based on an analysis of data from an assessment of Rural Communities Opioid Response Program (RCORP) grantees after completion of billing and coding trainings provided by the JBS International RCORP-Technical Assistance (TA) team and the Association for Rural & Community Health Professional Coding (ArchProCoding) from December 2022 – March 2023.

Key Findings

- Between December 2022 and March 2023, seven billing and coding trainings were conducted for individual grantee consortia. Out of 139 individual attendees included in our evaluation, 51.8% (n=72) provided feedback.
- Almost half of respondents (45.8%, n=33) identified as billing or coding staff, with one-third of respondents (30.6%, n=22) reporting they were administration/leadership or a health care provider (29.2%, n=21).
- Most respondents (88.7%, n=63) reported that overall the training was extremely helpful or very helpful.
- More than 90% of respondents strongly agreed or agreed that the billing and coding training materials/content were organized and easy to follow (97.3%, n=70), content was valuable and relevant to their job and/or organization (93.1%, n=67), length was appropriate for the amount of material (92.9%, n=65), the instructor was well prepared and knowledgeable about the topic (98.6%, n=70), and that interaction between participants was encouraged during the training (95.8%, n=69).
- The most frequently reported expected training outcomes included 77.8% (n=56) of respondents reporting they intend to share the information with other members of their organization, 63.9% (n=46) indicating they would apply the new information to the work of their organization, and 56.9% (n=41) reporting they would seek out more information on the topic and the resources shared during the training. Only 1.4% (n=1) of respondents reported that they expect no action to result from the training.
- Respondents reported that they found the materials, the facilitator and presenter, the information provided, and coverage of topics to be helpful, specifically calling out the coverage of the updates for 2023.
- While open-ended comments showed that respondents thought billing and coding training would be helpful to providers of clinical services, and that respondents would appreciate more provider-specific training, only 29.2% (n=21) of respondents were providers.
- Respondents' suggestions for improvement to the training included tailoring the training to specific groups, such as providers of clinical services, and including more information on Current Procedural Terminology (CPT).

Implications and Recommendations

- Respondents overall found billing and coding trainings to be helpful and reported that they plan to share and apply the information they learned in the training. JBS International RCORP-TA should continue providing targeted billing and coding trainings to RCORP grantees.
- We recommend considering offering additional billing and coding trainings that are tailored to providers of clinical services. Respondent suggestions indicated that providers of clinical services would greatly benefit from billing and coding training but may have different needs than professional coders.
- We recommend further evaluation in the following areas:
 - 1) Further evaluation of resultant outcomes of the billing and coding training. Following up with attendees at a later date would provide further information about how grantees are applying the information and what knowledge gaps remain.
 - 2) Further evaluation to determine if people in non-clinical roles (administrators/leadership, billers and coders, etc) would benefit from additional billing and coding training tailored to their roles. Findings from past WWAMI RHRC reports showed that grantees have reported common themes in their challenges and TA needs, citing topics such as billing and coding for sustainability and better reimbursement, billing and coding for peer support specialists and community health workers, and lack of understanding of laws and regulations related to billing and coding.^{1,2} People in non-clinical roles may benefit from additional trainings covering these topics. This recommendation is consistent with a recommendation from a prior WWAMI RHRC report in which we suggested further evaluation to determine the effectiveness of learning collaboratives or other billing and coding TA events that could assist multiple grantees.¹

PURPOSE

The purpose of this report is to evaluate billing and coding trainings provided by ArchPro Coding to individual Rural Communities Opioid Response Program (RCORP) grantees from December 2022 – March 2023. This analysis will aid in understanding grantees' perceptions of the helpfulness of billing and coding training and the extent to which the trainings met learning objectives, expected outcomes of the trainings, general feedback on what was helpful, and suggestions for improvement.

METHODS

WWAMI Rural Health Research Center (RHRC) evaluators developed an online assessment to obtain feedback from billing and coding training attendees. The instrument included questions about the respondent's role; to what extent the training met learning objectives, rating various aspects of training quality, anticipated results of attending the training, and confidence in applying training information. Attendees also responded to two open-ended questions about what they found most helpful at the training and suggestions for improving future training sessions. No questions were required.

At the end of each training session, a JBS International team member posted a link for attendees to provide online feedback in the Zoom chat. WWAMI RHRC evaluators sent up to four weekly follow-up email reminders to attendees to complete the assessment.



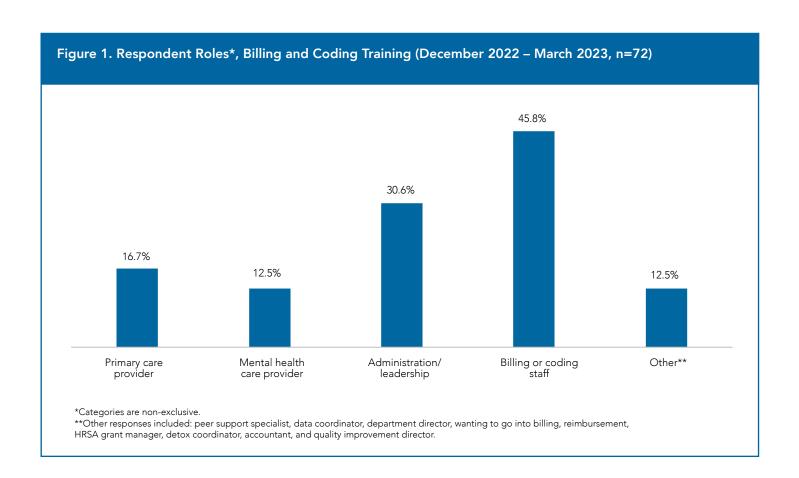
Analysis

Attendance at each training was determined from the Zoom participant sheets posted to the JBS TA Tracker after each session. We assumed that each name on the participant list was a unique individual unless otherwise specified. We calculated response frequencies for numerical ratings and two evaluators identified themes in open-ended comments, selecting illustrative quotes.

FINDINGS

Participants from seven grantees from the Implementation II, III, and IV cohorts took part in grantee-specific targeted billing and coding trainings from December 2022 through March 2023. A total of 143 individuals participated in these 7 trainings. We excluded four individuals from our sample. (Of the 4 attendees who were excluded, 2 attended the training for less than 10 minutes, 1 declined to participate, and 1 left their role for their organization.) Of the 139 billing and coding training participants included, 51.8% (n=72) responded.

Almost half of respondents (45.8%, n=33) reported their RCORP role as billing and coding staff and about a third (30.6%, n=22) administration/leadership or a health care provider (29.2%, n=21) (Figure 1). Most respondents (83.3%, n=60) reported only 1 role category, 15.3% (n=11) reported 2 role categories, and 1 reported 3 categories. The most common combination of roles was administration/leadership with billing or coding (6.9%, n=5).

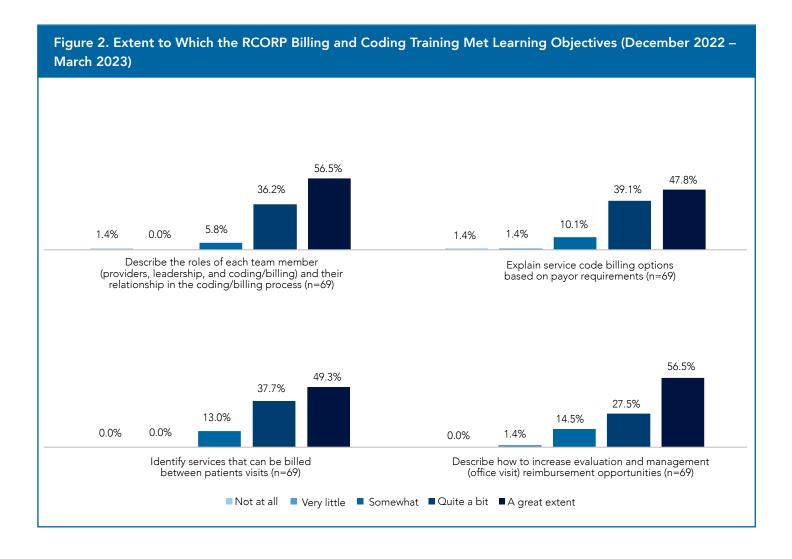




The objectives of the billing and coding trainings were as follows:

- 1. Describe the roles of each team member (providers, leadership, and coding/billing) and their relationship in the coding/billing process.
- 2. Explain service code billing options based on payor requirements.
- 3. Identify services that can be billed between patient visits.
- 4. Describe how to increase evaluation and management (office visit) reimbursement opportunities.

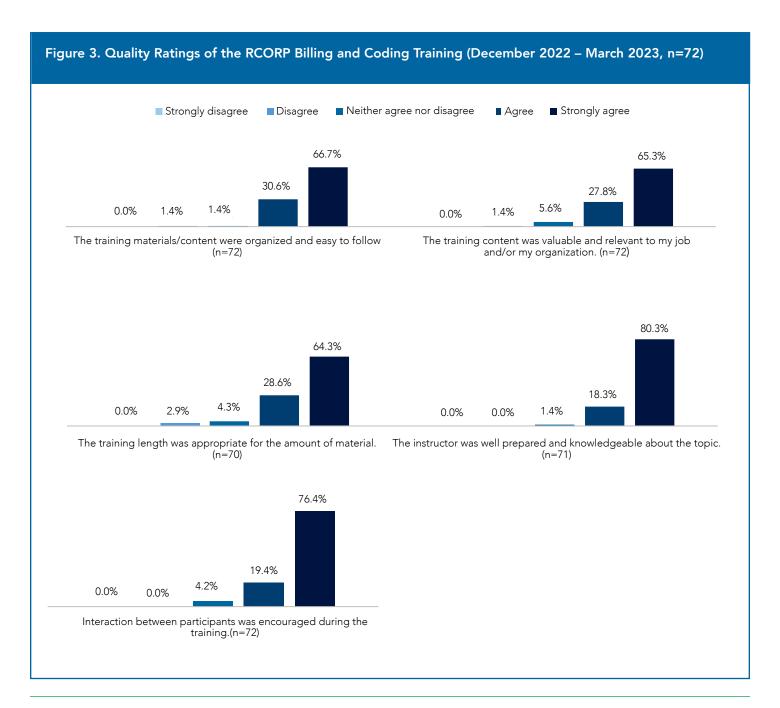
Attendees were asked to evaluate to what extent the training met each of these objectives (Figure 2). More than 90% of respondents (n=64) thought that the training met the objective of describing the roles of team members to "a great extent" or "quite a bit." Almost half of respondents felt that the training met the objectives of explaining service code billing options based on payor requirements (47.8%, n=33) and identifying services that can be billed between patient visits (49.3%, n=34) to a great extent, and more than one-third quite a bit. More than half (56.5%, n=39) reported that the training met the objective of describing how to increase evaluation and management (office visit) reimbursement opportunities to a great extent, and another quarter (27.5%, n=19), quite a bit.



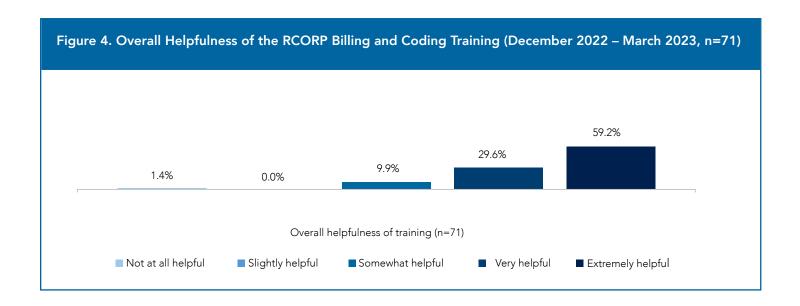
Attendees rated their agreement with five statements about the training:

- 1. The training materials/content were organized and easy to follow.
- 2. The training content was valuable and relevant to my job and/or my organization.
- 3. The training length was appropriate for the amount of material.
- 4. The instructor was well prepared and knowledgeable about the topic.
- 5. Interaction between participants was encouraged during the training.

More than 90% of respondents strongly agreed or agreed with all 5 statements about the training (Figure 3). Over three-fourths strongly agreed that the instructor was well-prepared and knowledgeable about the topic of billing and coding (80.3%, n=57) and that interaction between participants was encouraged during the training (76.4%, n=55).

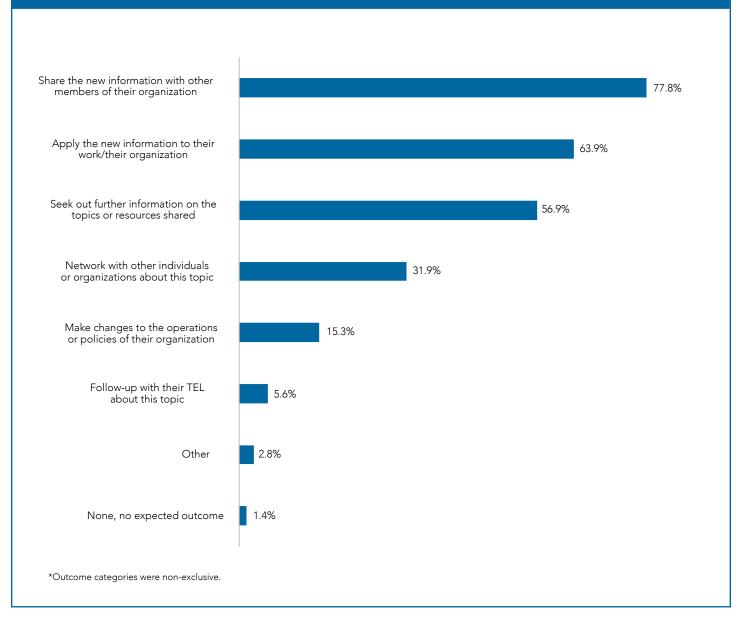


Nearly 9 of 10 respondents (88.7%, n=63) reported that overall the training was extremely or very helpful (Figure 4).

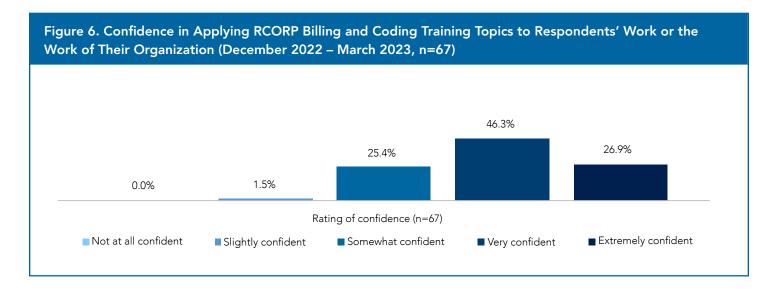


Attendees were asked to select from a list of outcomes that they expected to result from the training (Figure 5). More than three-fourths of respondents (77.8%, n=56) reported that they would share the information with other members of their organization. Nearly two-thirds (63.9%, n=46) indicated that they would apply the new information to the work of their organization. More than half (56.9%, n=41) said they would seek out more information on the topic and resources shared, and about one-third (31.9%, n=23) planned to network with others about the topic. About 1 in 7 (15.3%, n=11) indicated they would make changes to the operations/policies of their organization, and 5.6% (n=4) said they would follow-up with their Technical Expert Lead (TEL).





Almost three-fourths of respondents (73.1%, n=49) reported being extremely or very confident that they would be able to apply the topics and materials discussed at the training to their work or the work of their organization (Figure 6).



Open-ended Comments

Grantees were asked to comment on what was most helpful and suggestions for improving future trainings. Thirty-one respondents (43.0%) described what was helpful, which clustered around 6 themes (Table 1), and 12 (16.7%) provided suggestions to improve training, which clustered around 5 themes (Table 2).

Table 1. Most Helpful Aspects of RCORP Billing and Coding Trainings (December 2022 – March 2023, n=31)

Themes: what respondents found helpful	Illustrative quotes
Coverage of updates for 2023	"It was helpful that the presentation slides were sent prior to the meeting so each participant could follow along. Also, the instructor encouraged questions/feedback throughout." "The instructor and training was very informative and very easy to understand, I appreciate the questions and answers being discussed in a way all could follow along and understand."
The knowledge and capability of the facilitator and presenter	
The amount of information covered and practice questions	
The materials, including the PowerPoint slides and links/ resources	
Coverage of specific topics – mental health and substance use codes, medical decision making, and telehealth	
Questions/feedback	

Table 2. Suggested Improvements for RCORP Billing and Coding Trainings (December 2022 – March 2023, n=12)

Themes: respondent suggestions to improve training	Illustrative quotes
Tailor the training to providers of clinical services	"I think we need more frequent and specific trainings, ie trainings just for providers or trainings just for billers. In many FQHCs [Federally Qualified Health Centers] there are no professional coders and the providers are carrying the burden even though we are not educated in billing." "please include on invites that these trainings would benefit providers greatly."
Provide more information on Current Procedural Terminology (CPT) for providers of clinical services	
Provide more frequent and specific trainings to address different needs for people in different roles	
Provide more variety in topics covered, such as billing for behavioral health	
Split the session in two to reduce the volume	

DISCUSSION AND RECOMMENDATIONS

Discussion

In the December 2022 through March 2023 billing and coding trainings, a large majority of respondents reported finding the training to be extremely or very helpful. Most respondents agreed that the training met all its stated learning objectives and strongly agreed that the training was well organized, the content was valuable, and the training was an appropriate length. Quantitative results and open-ended responses both illustrate that respondents felt the instructor was highly knowledgeable and that they appreciated the detailed information provided. Open-ended responses also indicated appreciation for providing updates on the codes for office visits (E&M) and medical decision making.

Suggestions for improvement were relatively few, including tailoring training to different audiences. A handful of respondents mentioned that they would like provider-specific training. One person mentioned that in many Federally Qualified Health Centers (FQHCs) providers of clinical services are doing the coding even though they are not trained in that area. This presents an opportunity to develop billing and coding trainings that are specific to providers of clinical services, such as Current Procedural Terminology (CPT), which was specifically mentioned by respondents. Suggestions for more frequent and specific trainings track with findings from prior WWAMI RHRC reports reviewing grantees' challenges and TA needs that showed grantees face diverse billing and coding challenges. Furthermore, billing and coding was the most frequently reported area where grantees would like to receive TA for the reporting period of March 1, 2022 – August 31, 2022.

Most respondents anticipated that they would share the information they learned with their colleagues, apply it to their work, and seek out further information about billing and coding after the training. Most respondents left the training feeling extremely or very confident that they could apply the information they learned to their work or the work of their organization as a whole. Future evaluation could further assess outcomes following the training.

A limitation of this analysis is the potential for bias if the views of non-respondents are not reflected in the findings reported here.



Recommendations

Provide Additional Billing and Coding Training for Providers of Clinical Services

We recommend considering offering additional billing and coding trainings tailored to providers of clinical services. Respondents indicated that providers of clinical services would benefit from billing and coding training but may have different needs than professional coders.

Future Evaluation

We recommend further evaluation in the following areas:

- 1) Further evaluation of resultant outcomes of the billing and coding training. Following up with attendees at a later date would provide further information about how grantees are applying the information and what knowledge gaps remain.
- 2) Further evaluation to determine if people in non-clinical roles (administrators/leadership, billers and coders, etc) would benefit from additional billing and coding tailored to their roles. Findings from past WWAMI RHRC reports showed that grantees have reported common themes in their challenges and TA needs, citing topics such as billing and coding for sustainability and better reimbursement, billing and coding for peer support specialists and community health workers, and lack of understanding of laws and regulations related to billing and coding.^{1,2} People in non-clinical roles may benefit from additional trainings covering these topics. This recommendation is consistent with a recommendation from a prior WWAMI RHRC report in which we suggested further evaluation to determine the effectiveness of learning collaboratives or other billing and coding TA events that could assist multiple grantees.¹

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