

Reality check:

Debunking health care automation myths

Escalating demands to streamline coding and billing often leads revenue cycle departments to think about coding automation and how to best leverage artificial intelligence (AI). However, there are misconceptions about AI technology when it comes to its application in health care automation, so let’s dispel some popular myths.

Four AI myths and realities in health care coding automation

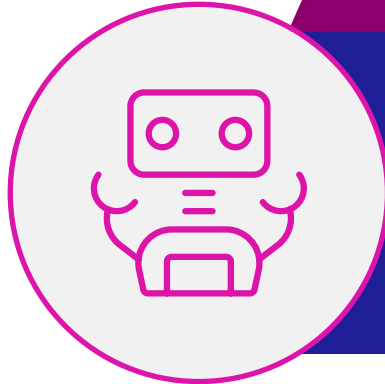
Myth #1:
AI will make medical decisions instead of a physician.

Reality:
AI can assist and help accelerate decision making, but it does not have the last word.

AI solutions can automate simple coding tasks, which then frees up time for coders to focus on the complex cases, and for physicians to make informed medical decisions. It does not replace the physician’s knowledge or expertise.



Myth #2:
AI will replace medical coders. Bots are coming for your jobs!



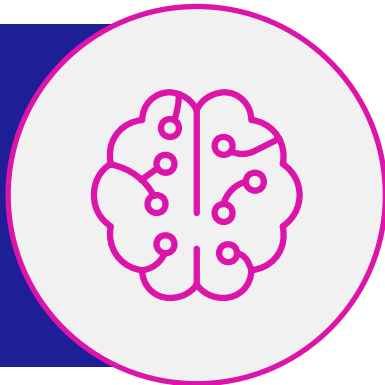
Reality:
Coder’s roles will evolve, but their skills remain essential.

Smart automation is upon us, but moderate and complex visits will continue to benefit from a coder’s expertise and oversight.

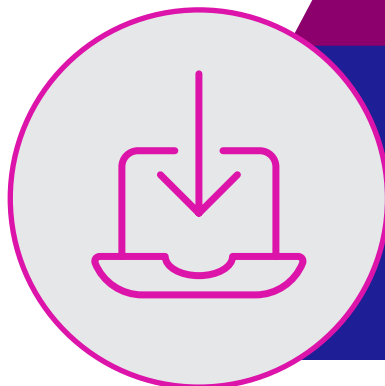
Myth #3:
AI doesn’t make mistakes. It is smarter than people.

Reality:
AI is only as good as the quality of the training data and clinical expertise it uses.

Data science by itself is not enough. Subject matter expertise and core nosology judgement is key to make it work.



Myth #4:
AI is install it and forget it.



Reality:
Adjustments must be made and learning new patterns is required.

Regulatory changes mean data sets need constant updating and careful monitoring to make necessary adjustments.

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Total solution: Expert-guided automation

Automation in coding continues to evolve and 3M is here with you every step of the way. From the release of **3M™ Codefinder** 40 years ago, to the introduction of computer-assisted coding with **3M™ 360 Encompass™ System** in 2012, 3M continues to automate workflows where it matters the most. **3M™ Code Confidence** gets coding teams closer to an autonomous coding experience by auto-dropping the facility’s historically accurate, auto-suggested codes – those with high precision – for final code set completion.

3M’s total solution is a full coding workflow, where qualified charts are fully automated through clinical expert-guided AI models, and semi-autonomous and guided workflows are there for those codes that need further attention.

Connect with 3M today to learn how we can get your organization on the path to automation.

As with any case study, results, outcomes and/or financial improvements should not be interpreted as a guarantee or warranty of similar results. Individual results may vary depending on a facility’s circumstances.