

“There are many coder training and assessment tools available, but none that score and analyze with real cases in a true production environment; identifying your coders' ICD-10 strengths and hospital's revenue risks.”

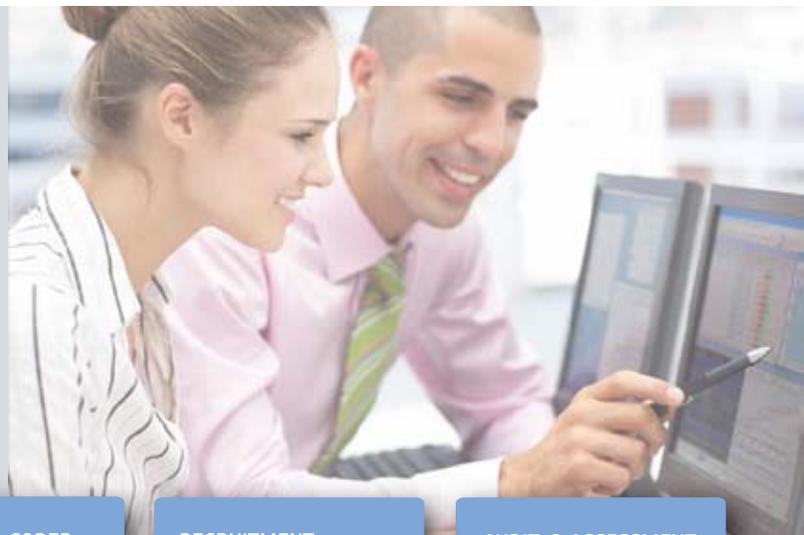
## Measure Coder Knowledge to Mitigate ICD-10 Risk

Central Learning ® is a web-based coder testing and assessment tool for ICD-10. Based on coding from real medical records, instant scoring and consistent answer keys. Central Learning automatically identifies coding strengths and weaknesses—intelligence to help hospitals mitigate their ICD-10 revenue risk.

### Central Learning is simple to use. Here's how it works.

1. Cases are assigned to coders as if they are in production
2. Coders log into the application to access their worklist
3. Coders open the case in the application or in your own EMR
4. Coders enter codes into the application's coding abstract screen
5. Central Learning scores the coding of each case immediately after coder completion
6. Central Learning stores, compiles, and reports each coder's accuracy rate
7. Central Learning identifies the strengths and weaknesses of each coder
8. Coder performance report card is generated for each coder

### Central Learning® is user-friendly for all levels of a coder's experience



**NEW TRAINEE**  
currently enrolled in coding program with no actual practice, only theory

**PRE-PRODUCTION CODER**  
a recent graduate coder with limited medical coding experience or is coding a new patient type

**PRODUCTION CODER**  
a coder who is in full production but does not have a full load of cases

**RECRUITMENT**  
standardization of cases per patient Type for recruitment or taking the place of a multiple choice exam

**AUDIT & ASSESSMENT**  
after in-services; continuous assessments, etc

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## Coders trained in ICD-10. Now What? Options to Assess Coder Proficiency

 **CENTRAL LEARNING**  
Product of AVIANCE Suite

### Manual Process: Traditional Coding Audit

### Automated Coding Audit & Assessment

Auditors required

Maximum

Minimum

Record Selection

Manual

Automatic

Case  
Assignment

Coding of distinct cases;  
disparate assessment &  
comparison

Coding of the same medical  
record cases; equal  
assessment & comparison

Reviews

Manual

Automatic

Answer Key

Based on auditor; subjective

Created by a forum of  
coders; objective

Tracking/Trending

X



Data Analysis/Drill Downs

Limited/None

Complete/specific codes

Turnaround Time

2-3 weeks

Immediate

Productivity Assessment

X



Resources Required

High cost; in-house staff or  
contracted services

Low cost; no in-house staff  
or contracted services

Pay 40% less than a traditional audit. Contact Joe Gurrieri, RHIA, CCS  
at [joe.gurrieri@himoncall.com](mailto:joe.gurrieri@himoncall.com) for pricing and details.