

# PENGETAHUAN *CODER* TERHADAP KELENGKAPAN DAN KEAKURATAN DALAM PEMBERIAN KODE DIAGNOSIS BERDASARKAN ICD-10

Aulia Fajar Rahmadhani<sup>1</sup>, Ratna Prahesti<sup>2</sup>

## INTISARI

**Latar Belakang :** *Coding* adalah aktivitas pengolahan data rekam medis buat memberikan kode menggunakan alfabet atau angka atau kombinasi dari keduanya yang mewakili komponen data. Pemahaman *coder* akan tata cara *coding* dan ketentuan-ketentuan yang ada pada ICD-10 dapat mempengaruhi kelengkapan dan keakuratan kode. Pemahaman *coder* akan sistematis *coding* serta ketetapan yang ada di ICD-10 dapat mengubah keakuratan atau ketepatan kode.

**Tujuan Penelitian :** Mengetahui pengetahuan *coder* terhadap kelengkapan dan keakuratan pemberian kode diagnosis berdasarkan ICD-10.

**Metode Penelitian :** Peneliti melakukan tinjauan literature secara sistematis dari tahun 2018 hingga 2022. Data dikumpulkan dari satu database (*Google Scholar*), menggunakan kata kunci keakuratan kode diagnosis, kelengkapan kode diagnosis, dan pengetahuan *coder*.

**Hasil :** Lima jurnal dimasukkan dalam review. Hasilnya menunjukkan hasil dari pengetahuan *coder* terhadap kelengkapan dan keakuratan dalam pemberian kode diagnosis berdasarkan ICD-10 adalah: (1) kurangnya pengetahuan *coder* terkait pemberian kode diagnosis, (2) latar belakang pendidikan petugas *coder* yang bukan lulusan D-3 Rekam Medis, (3) kode diagnosis masih banyak yang tidak lengkap dan tidak akurat, (4) kurangnya pelatihan kepada petugas *coder* dan menyebabkan pengetahuan petugas *coder* terkait pengkodean diagnosis masih rendah.

**Kesimpulan :** Hasil *review* dari kelima jurnal menunjukkan bahwa Pengetahuan petugas *coder* masih kurang dalam melakukan pengkodean diagnosis. Tingkat pengetahuan petugas *coder* masih kurang dan rendah dan menyebabkan kode diagnosis tidak lengkap dan akurat. Penyebab kode diagnosis tidak lengkap dan akurat disebabkan dari beberapa faktor yaitu; tidak adanya Standart Prosedur Operasional (SPO) terkait pengkodean diagnosis, kurangnya pengetahuan petugas *coder* dalam melakukan pengkodean diagnosis, pendidikan petugas *coder* bukan lulusan D3 RMIK dan yang melakukan pengkodean diagnosis tenaga perawat dan dokter.

**Kata Kunci :** Keakuratan Kode Diagnosis, Kelengkapan Kode Diagnosis, Pengetahuan *Coder*

<sup>1</sup> Mahasiswa Program Studi Diploma 3 Rekam Medis dan Informasi Kesehatan Universitas Jenderal Achmad Yani Yogyakarta.

<sup>2</sup> Dosen Pembimbing Program Studi Diploma 3 Rekam Medis dan Informasi Kesehatan Universitas Jenderal Achmad Yani Yogyakarta.

## CODER KNOWLEDGE OF COMPLETENESS AND ACCURACY IN PROVISION OF DIAGNOSIS CODING BASED ON ICD-10

Aulia Fajar Rahmadhani<sup>1</sup>, Ratna Prahesti<sup>2</sup>

### *ABSTRACT*

**Background :** Coding is the activity of processing medical record data to provide a code using the alphabet or numbers or a combination of the two that represent data components. The coder's understanding of coding procedures and the provisions contained in the ICD-10 can affect the completeness and accuracy of the code. The coder's understanding of systematic coding and the provisions contained in the ICD-10 can change the accuracy or precision of the code.

**Objective:** Knowing the knowledge of the coder about the completeness and accuracy of giving a diagnosis code based on ICD-10.

**Method :** Researchers conducted a systematic literature review from 2018 to 2022. Data were collected from a single database (Google Scholar), using the keywords diagnosis code accuracy, diagnostic code completeness, and coder knowledge.

**Results :** Five journals were included in the review. The results show that the results of the coder's knowledge of the completeness and accuracy of providing a diagnosis code based on ICD-10 are: (1) lack of knowledge of the coder regarding the provision of a diagnosis code, (2) the educational background of coder officers who are not graduates of D-3 Medical Records, (3) the diagnosis codes are still incomplete and inaccurate, (4) the lack of training for coder officers and causes the knowledge of coder officers related to diagnostic coding is still low.

**Conclusion :** The results of the review of the five journals showed that the knowledge of the coder officers was still lacking in coding diagnoses. The level of knowledge of coders is still lacking and low, causing the diagnosis code to be incomplete and accurate. The cause of the incomplete and accurate diagnosis code is caused by several factors, namely; the absence of Standard Operating Procedures (SOP) related to diagnosis coding, lack of knowledge of coder officers in coding diagnoses, education of coder officers who are not D3 RMIK graduates and who perform diagnosis coding for nurses and doctors.

**Keyword:** Diagnostic Code Accuracy, Diagnostic Code Completeness, Coder Knowledge.

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<sup>1</sup> Student of Diploma 3 Study Program of Medical Record and Health Information, Jenderal Achmad Yani University, Yogyakarta.

<sup>2</sup> Supervising Lecturer for Diploma Study Program of Medical Record and Health Information, Jenderal Achmad Yani University, Yogyakarta.