

# AI Medical Coding vs. Manual Coding: A Professional's Guide to the Digital Health Revolution

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Published: June 21, 2023 | AI Cardiology

DOI: [10.5281/zenodo.17997472](https://doi.org/10.5281/zenodo.17997472)

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## Abstract

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# AI Medical Coding vs. Manual Coding: A Professional's Guide to the Digital Health Revolution

The healthcare industry is undergoing a profound digital transformation, and at the heart of its financial and administrative engine lies medical coding. This critical process—translating healthcare services, diagnoses, and procedures into standardized alphanumeric codes—is the bedrock of billing, reimbursement, and public health data. For decades, this has been the domain of highly trained human coders. Today, however, the rise of Artificial Intelligence (AI) is challenging this status quo, sparking a vital debate: **AI medical coding versus manual coding**.

This article provides a professional and academic analysis of this shift, examining the efficiency, accuracy, and future implications for healthcare systems and coding professionals.

## The Foundation: Manual Medical Coding

Manual medical coding relies on the expertise of certified coders who meticulously review clinical documentation, such as physician notes, operative reports, and lab results. They apply their deep knowledge of coding systems—ICD-10-CM, CPT, and HCPCS—to assign the correct codes.

**Key Characteristics of Manual Coding: Accuracy through Judgment:** *Human coders excel at interpreting ambiguous or complex clinical narratives, applying clinical context, and making nuanced judgments that AI often struggles with [2].* **Complexity Handling:** They are essential for complex, multi-specialty cases and for navigating payer-specific rules and regulatory changes. **Time and Cost:** *The process is inherently time-consuming and*

*labor-intensive, leading to high operational costs and potential backlogs.*

### ***The Disruption: AI-Powered Medical Coding***

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*AI in medical coding primarily leverages Natural Language Processing (NLP) and Machine Learning (ML) to automate the code assignment process. These systems ingest vast amounts of clinical text and structured data, identifying key terms and concepts to suggest or automatically assign codes.*

***The Promise of AI: Efficiency and Speed:*** AI can process documentation in seconds, dramatically accelerating the coding cycle and reducing the time from service delivery to billing [1]. ***Enhanced Accuracy (in specific tasks):*** Studies suggest that AI-based NLP systems can achieve high accuracy rates, sometimes exceeding 90%, in routine code assignments by eliminating human error and ensuring consistency [5]. ***Cost Reduction:*** By automating routine tasks, AI reduces the need for extensive manual review, lowering administrative overhead and optimizing the revenue cycle [9].

### ***A Comparative Analysis: Accuracy and Reliability***

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While the speed of AI is undeniable, the debate often centers on accuracy. The research presents a mixed picture, suggesting that the effectiveness of AI is highly dependent on the complexity of the task and the sophistication of the model.

Feature	Manual Coding	AI-Powered Coding		---		---		---		<b>Speed</b>			
Slow, labor-intensive		Instantaneous, high-throughput		<b>Nuance/Context</b>									
High, excels at complex interpretation		Moderate, struggles with ambiguity and novel cases [2]		<b>Consistency</b>		Variable, subject to human fatigue/error							
High, consistent application of algorithms		<b>Upfront Cost</b>		Low		High (Software, Integration, Training)		<b>Long-Term Cost</b>		High (Salaries, Training)		Lower (Operational Efficiency)	

Crucially, recent academic findings caution against over-reliance on general-purpose AI models. For instance, Large Language Models (LLMs) have been shown to perform poorly in medical code querying, often generating imprecise or fabricated codes [2]. This highlights that AI is currently best utilized as an **assistive tool** rather than a complete replacement for human expertise.

### ***The Future: A Collaborative Model***

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The consensus among digital health experts is that the future of medical coding is not a binary choice but a collaborative model: **Augmented Coding**. In this hybrid approach, AI handles the high-volume, routine cases, freeing up human coders to focus on the complex, high-value tasks that require clinical judgment and deep domain knowledge.

This synergy allows healthcare organizations to maximize efficiency while maintaining the necessary level of accuracy and compliance. AI acts as a powerful first-pass filter and auditing tool, flagging potential errors or under-coding for human review.

For more in-depth analysis on this topic, including the ethical and regulatory

frameworks surrounding AI in healthcare, the resources at [www.rasitdinc.com](<https://www.rasitdinc.com>) provide expert commentary and professional insights into the digital health landscape.

## **Conclusion**

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The transition from purely manual to augmented medical coding is an inevitable step in the evolution of digital health. AI offers a compelling solution to the challenges of scale, speed, and cost in the modern healthcare system. However, the human element—the certified coder's clinical judgment and ability to interpret complex narratives—remains indispensable. The most successful healthcare organizations will be those that strategically integrate AI to enhance, not eliminate, the role of the professional coder, ensuring a future of more efficient, accurate, and sustainable healthcare finance.

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