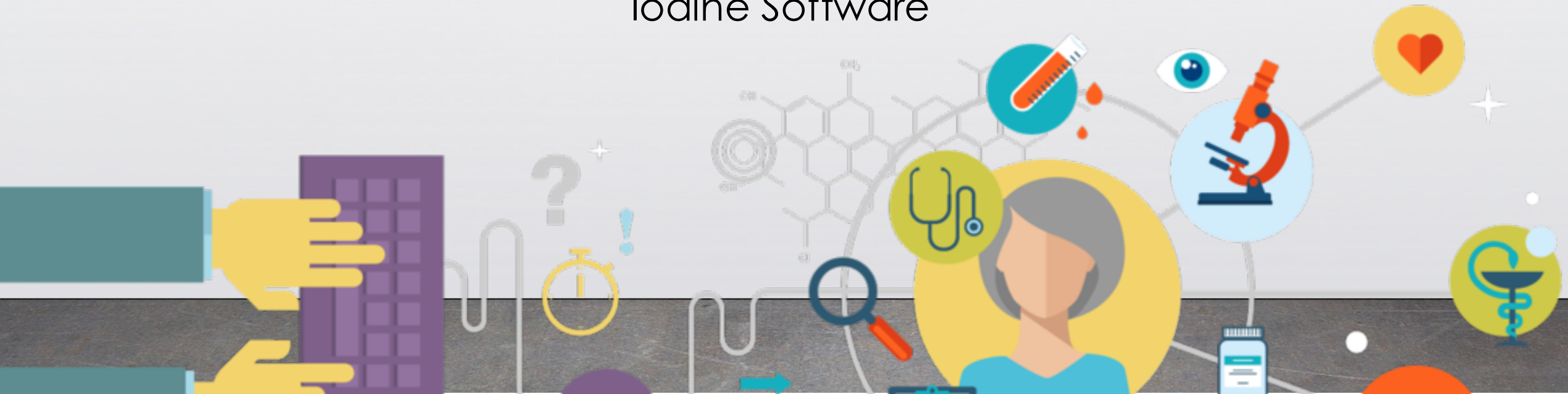

Validating CDI Data for Report Integrity

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Objectives

The learner will be able to:

- Articulate the role of validating data in a CDI department's ongoing performance improvement plan
- Define an objective validation process
- Formulate an objective validation process/program
- Create action plans based upon results
- Evaluate success of the validation process



CDI Data Accuracy

ACDIS White Paper

“...an auditing and monitoring process provides oversight for the CDI program, insight into physician documentation and collaboration, and objective evaluation of the performance and effectiveness of individual CDI staff members as measured against your facility’s policies and priorities.”

(D. Butler, 2011)

Every company manages data

Data Management Process

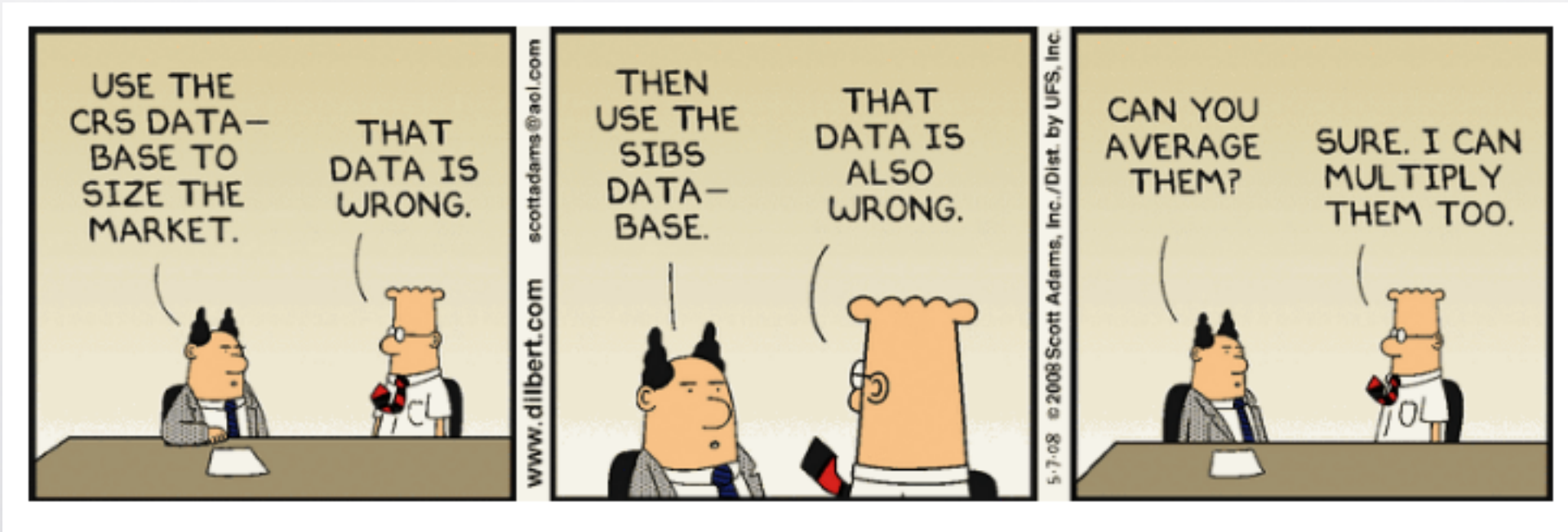




Why is CDI data different?

- CDI is not different
- CDI data:
 - Productivity
 - DECISIONS REGARDING STAFFING AND TECHNOLOGY
 - Results
 - DECISIONS REGARDING BUDGET
 - Physician engagement
 - DECISIONS REGARDING POLICY

Are good decisions being made?





Validation Process

- Review real time data
- Performance of staff and department level daily/weekly/monthly
- Usually imbedded in reports in CDI tools (examples)
 - Review rate
 - Query rate
 - Response rate
 - Physician acceptance or agreement rate
 - Coder agreement rate



What to Validate

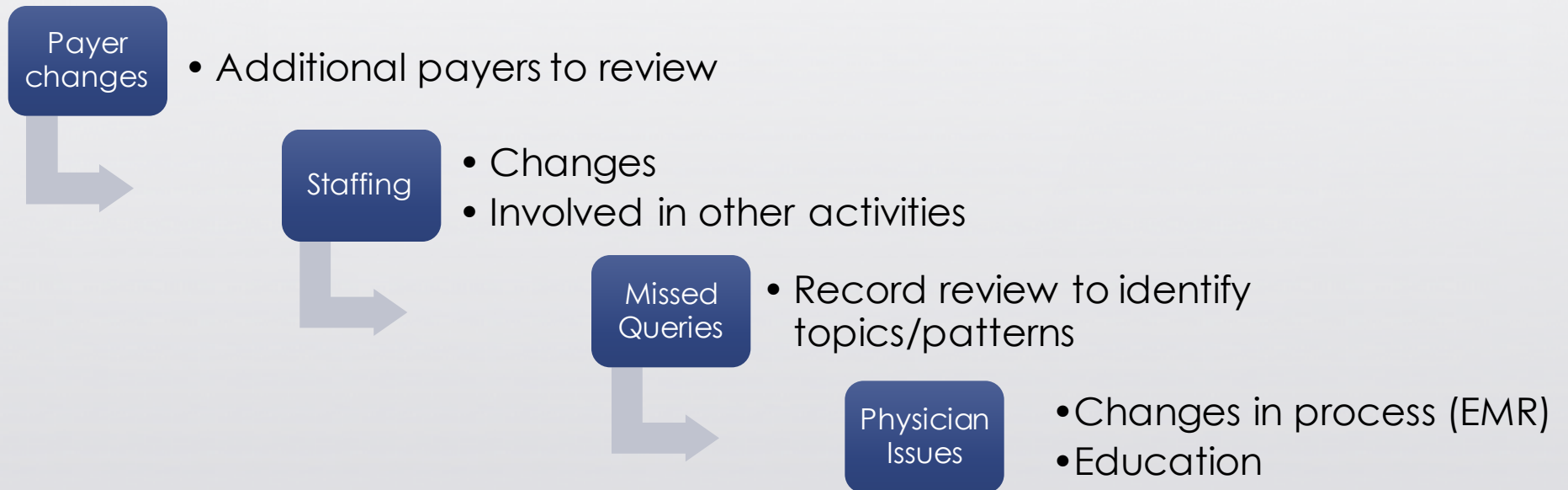
	Review Rate	Query Rate	MD Response Rate	MD Acceptance Rate	Financial Benefit	CMI
Month 1	80%	17%	78%	88%	\$227,400	1.453
Month 2	65%	15%	69%	84%	\$359,000	1.448

- Example:
 - 250 bed hospital
 - 2.5 FTE
 - RN's with 10 years clinical experience average
 - 1.5 years average CDI experience
 - Reviewing MCR only



Walking through the Process

	Review Rate	Query Rate	MD Response Rate	MD Acceptance Rate	Financial Benefit	CMI
Month 1	80%	17%	78%	88%	\$227,400	1.453
Month 2	65%	15%	69%	84%	\$359,000	1.448





Overview

	Review Rate	Query Rate	MD Response Rate	MD Acceptance Rate	Financial Benefit	CMI
Month 1	80%	17%	78%	88%	\$227,400	1.453
Month 2	65%	15%	69%	84%	\$359,000	1.448

- Declining review rate
- Below industry standard query rate
- Low MD response rate
- Average acceptance rate
- No change in CMI
- How did month 2 financials improve?



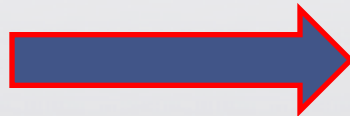
Dig into the Details – Review Rate

- Why did review rate drop so significantly?
- Is there good rationale for this?
- ACTION PLAN POSSIBILITIES:
 - Data entry issues:
 - Review denominator of metric (number of payers changed and not in worklist?)
 - Process issues:
 - Process changes to record review, EMR or worklist configuration
 - Weekend coverage
 - People issues:
 - Staffing changes (FMLA, open position, education/conference)
 - Education
 - Employee PIP

	Review Rate
Month 1	80%
Month 2	65%

Dig into the Details – Query rate

- Why would query rate go down when review rate decreases?
- ACTION PLAN POSSIBILITIES:
 - Process issues:
 - Looking at wrong types of cases
 - Review worklist
 - Verbal queries being entered into database
 - People issues:
 - Education or PIP
 - Physician issues
 - Don't want to query certain physicians



	Review Rate	Query Rate
Month 1	80%	17%
Month 2	65%	15%

Only way to identify the issue is to audit reviewed records for missed opportunity



Dig into the Details – MD rates

- MD response stable but below industry standard
- Acceptance rate good (physicians agree with queries)

	Review Rate	Query Rate	MD Response Rate	MD Acceptance Rate
Month 1	80%	17%	78%	88%
Month 2	65%	15%	69%	84%

ACTION PLAN POSSIBILITIES:

- Data entry issues
 - Review definition of “response”
 - Do CDS’s reconcile cases and update query responses once final coding occurs
- Process issues:
 - Review physician response issues
 - Ease, accessibility, motivation, accountability
- People issues:
 - Are physicians engaged?
 - CDS education regarding reconciliation

Dig into the Details – Financial benefit

- Gut check
- Does it feel right?

	Review Rate	Query Rate	MD Response Rate	MD Acceptance Rate	Financial Benefit
Month 1	80%	17%	78%	88%	\$227,400
Month 2	65%	15%	79%	84%	\$359,000

- Query rate below industry standard
- Response rate below industry standard
- Acceptance rate ok
- How was this financial benefit reported?

ACTION PLAN POSSIBILITIES

- Data entry issues:
 - Initial DRG to final DRG calculations
 - Do CDS staff reconcile cases and update responses?
 - Capturing responses to verbal queries?

- People issues:
 - Adherence to CDI process
 - Education or PIP
- Process issues:
 - Misinterpretation of definitions
 - Too many definitions

Garbage in



Garbage out





Key Validation Process Concerns

- Identify metrics for review
 - Solve one problem at a time
 - Focus attention to that issue
 - Cover all issues related to that problem
- Identify records for review
 - Number of records
 - Which CDS's to review
 - Type of records for review
 - Random, targeted, certain payer, certain physician
 - Issue to review (specific to the problem identified)



Validation Process

- Define the issue/problem
- Determine the frequency of review
- Quantify the review
- Complete the review
- Analyze the data from the review
- Develop action plans
- Implement action plans
- Revalidate after implementation of the action plans

EXAMPLE

Issue: Query rate reduced

- Review 10 records per CDS from time frame (most recent month)
- Records that were reviewed but no query

Results:

- 25% query rate identified across all CDS's
- 75% of queries were for PNA specificity

Action Plan:

- Develop education for CDS staff
- Monitor query rate for this topic
- Re-audit in 3 months as needed



Staffing Issues

- Number of staff
- Knowledge and experience of staff
- Filter metrics by CDS
- Identify variances

CDS	Review Rate	Query Rate	Response Rate	Agreement Rate
1	87%	5%	55%	88%
2	50%	22%	98%	80%
3	58%	18%	53%	84%



Targeting Review Issues

- Objectivity
 - External or “fresh-eyed” feedback – best approach
 - If cannot utilize external resources, consistent role
 - No “excuses” in review process
 - Repeated as identified for the issue
 - Used to show gaps between the program and industry practice or standards
 - Reviewer should not get “side-tracked” to issues outside of the scope of the review



What to Look for in a Record Review

- Missed query opportunities
- Quality of queries
 - Appropriateness – do they contain the appropriate clinical indicators
 - Follow query policies
- Accuracy of the data in the CDI tool
 - All queries entered
 - Responses identified correctly
 - Impact correctly identified, including DRG changes

Objective Review

- Transparency in process
- Develop criteria prior to review
- Communicate expectations
- Share results

CDS Quality Review

CDS Name: _____ Date Reviewed: _____

Account Number: _____ Coder:

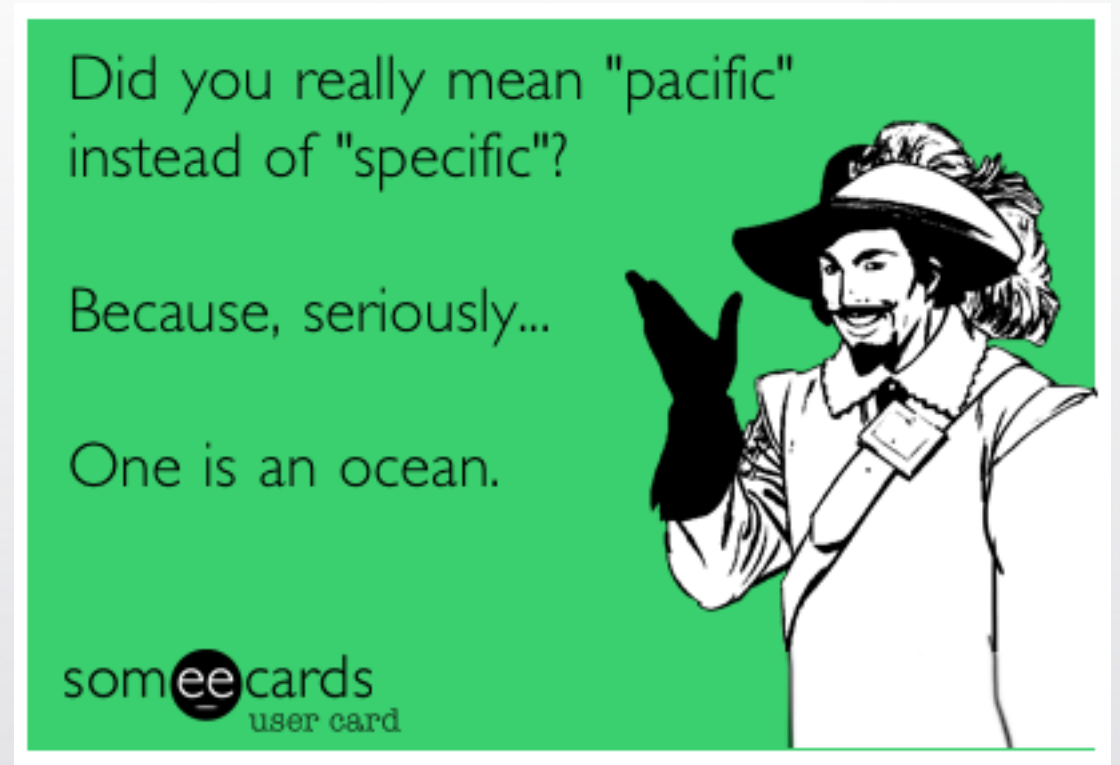
For any responses marked with No please explain in the Comments section.

TOPIC		
CDS Initial Review Process		
Record reviewed within one business day of admission	Yes	No
Initial and Potential DRG assignment supported with treatment, monitoring, and/or evaluation etc.	Yes	No
Initial and Potential Secondary Diagnoses (CC/MCC) supported with treatment	Yes	No
Patient demographics entered accurately into the CDI Tool?	Yes	No
Identified query opportunity initiated?	Yes	No
All potential queries were identified	Yes	No
Initial DRG and Potential DRG accurately reflect query impact	Yes	No
Query Process		
Was the query necessary, based on the need for Present On Admission status, clinical indicators for a higher degree of specificity, conflicting, incomplete, or ambiguous (diagnoses that may have multiple impressions) documentation?	Yes	No
Does the query include accurate patient risk factors?	Yes	No
Does the query include accurate signs and symptoms?	Yes	No
Does the query include accurate patient treatment?	Yes	No
Was the query addressed to the appropriate provider (based on the query policy)?	Yes	No
Follow up Process		
Query response identified?	Yes	No
Follow up documentation reflects physician response or required next steps to ensure physician response	Yes	No
Additional physician documentation is noted in CDI Tool	Yes	No
Follow up documentation in CDI Tool reflects the current DRG	Yes	No
Escalation of query occurred appropriately	Yes	No
Reconciliation		
Answering physician is identified in CDI Tool	Yes	No
Type of query is accurate in CDI Tool	Yes	No
Missed coding opportunity is identify by the CDS and communicated via policy and documented in the follow up notes	Yes	No
TOTAL SCORE (out of possible 20)		
Acceptable score is 18 of 20		

Comments:

Validating queries

- Policy regarding queries
 - No way to hold staff accountable without a policy
- Template use
 - Eliminate the unnecessary language/diagnoses
- Clinical indicators to support the query
 - Risk factors, signs/symptoms/treatment
- Non-leading



Clinical Validation Queries

- Documented but no clinical indicators to support
- Tough query

“Did you really mean to document that?”



"I love when the
Doctors yell at me." -
Said no nurse ever.



someecards
user card

Clinical Validation Queries

- Documentation Integrity
- Conversation versus query
- Data entry in CDI software
- End result:
 - Integrity of documentation
 - Improved quality of patient care





Analyzing results

	People	Process	Technology
Results	<ul style="list-style-type: none">• Staffing need• Knowledge base• Lack of adherence to established (good) process	<ul style="list-style-type: none">• Errors in data fields• Workflow effectiveness	<ul style="list-style-type: none">• Ensure updates occurred• Evaluate effectiveness
Action Plan	<ul style="list-style-type: none">• Hire• Educate• Performance improvement plan	<ul style="list-style-type: none">• Redefine/educate regarding data fields• Update/refine workflow• Create efficiencies	<ul style="list-style-type: none">• Leverage available technology• Identify goal of use and re-establish process/workflow

Next steps

- Communicate results
- Additional validation
 - Timing
 - Necessary or not?
 - Consistency and objectivity
- Communicate results – AGAIN!



Evaluating the process

- Issues identified
- Appropriate actions plans put in place
- Validation of effectiveness of action plan
 - Review the data
 - Allow enough time to pass
 - Compare with previous
- Planning for issue re-review
- Plan the next issue for review





Example

- Staffing was adequate but job satisfaction low
 - Lack of support
- CDI tool/technology not the issue
- Utilized query templates appropriately

People	Action Plan
<p>Knowledge base poor</p> <ul style="list-style-type: none">- Areas identified<ul style="list-style-type: none">Coding guidelinesClinical topicsDefinitions of data entry fields	<ul style="list-style-type: none">• Staff attended one week education bootcamp<ul style="list-style-type: none">Included:<ul style="list-style-type: none">Coding guideline and clinic infoClinical topics• Additional CDI tool training<ul style="list-style-type: none">Included:<ul style="list-style-type: none">Definitions of data fields

Re-validate

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	Review Rate	Query Rate	MD Response Rate	MD Acceptance Rate	Financial Benefit	CMI
Month 3	70%	18%	75%	89%	\$189,750	1.461
Month 4	85%	25%	89%	88%	\$268,450	1.502



Questions?

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