Seeking Solutions: Clinical Documentation Improvement

Vidant Medical Center is a 900-bed, Level 1 Trauma Center and the tertiary care hub of Vidant Health, a regional health system including nine hospitals, physician practices, home health, hospice and wellness centers serving 1.4 million people across 29 counties in eastern North Carolina.

Like most healthcare provider organizations, Vidant Medical Center knows that complete and accurate clinical documentation is critical to achieving optimal reimbursement, compliance and quality of care.

Faced with increasing concerns regarding data integrity, code accuracy and quality reporting outcomes, the organization began looking for ways to improve and sustain their clinical documentation improvement (CDI) program. Conversations with other hospitals and consulting firms led the organization to evaluate the services offered by Huff DRG Review.

“We partnered with Huff DRG Review for their outstanding reputation and unique physician directed approach to clinical documentation improvement,” says Donald Butler, RN, BSN, Manager, Clinical Documentation Advisor Program. “The opportunity to work with a team of board certified physicians and CDI experts who could understand our documentation challenges was exceptional—the perfect match for our specific needs.”

Physician Advisors, Pre-Bill Reviews Boost Accuracy, Compliance and More

Vidant initially focused on development of a group of physician advisors led by Huff DRG Review, which included pre-bill review services as part of their training. Six months later, the process was reinforced by daily pre-bill chart reviews allowing for monitoring and refinement of the CDI program—again supported by Huff DRG Review.

Challenge
- Clinical documentation inadequately represents the severity of illness and complexity of care with associated risks
- Imprecise quality reporting and performance profiling
- Unable to analyze data integrity and coding accuracy at a deeper level
- Missed revenue opportunities

Solution
- Establish the pre-bill review as a validation and educational framework
- Conduct clinician-led reviews during pre-bill process
- Implement physician advisor program
- Modify the CDI approach by highlighting discoveries within the pre-bill review

Why Huff DRG Review
- Unique physician directed approach integrating CDI and the pre-bill review within clinical documentation
- Experienced team of board-certified physicians with coding credentials, CDI and coding experts
- Consistent, improved ROI for clients, over 700% in 2013
- Proven enhancement regarding accuracy of quality metric reporting
- Physician advisor program fosters long-term CDI success through peer to peer education

Results
- Clear, consistent ROI – overall realized positive financial impact in excess of 800% with continued program justification
- Improved integrity of clinical documentation
- More accurate quality reporting, performance profiling and mortality ratings
- Successful defense with RAC and other auditors
- Enhanced provider engagement through direct physician advisor interaction

Huff DRG Review Case Study
Vidant Medical Center, Greenville, NC

Physician advisors and pre-bill reviews improve financial accuracy and quality metrics.
This study of the facility's medical records provided insight into creating a customized strategy to achieve four main organizational goals:

- **Accuracy** – complete and accurate documentation that reflects services to the greatest degree of specificity clinically supported
- **Compliance** – adherence to coding guidelines, clinical validation
- **Optimization** – most appropriate MS-DRG and code assignment to optimize revenue and reduce risk
- **Education** – daily feedback with case specific recommendations, periodic onsite or webinar sessions focused on specific educational needs

“The daily chart reviews helped monitor the physician documentation effort and continue the education of the coding staff,” says Vaughn M. Matacale, MD, Physician Advisor, Clinical Documentation. “The ability to gather and evaluate data from pre-bill reviews was a key factor in our success.”

Having completed Huff DRG Review's physician advisor training, Dr. Matacale is fully integrated into the pre-bill process and understands the clinical documentation needed for accurate coding. His role as physician advisor has enhanced efforts to solidify the educational process and reinforce the CDI team.

**Data Analysis Uncovers Missed Revenue Opportunities:**

In addition, measures were taken to avoid missed opportunities for revenue and assure consistent return on investment (ROI) for the CDI program. After a DRG focused list was provided by Huff DRG Review, Vidant conducted data analysis of reviewed cases by DRGs to determine both the frequency and quantified impact of CDI recommendations. The data was then used to develop an individual case-by-case pre-screening process prior to forwarding for review.

This strategy proved effective, resulting in an even higher ROI and stabilized recommendation rate. “Huff DRG Review successfully bridged the gap between our clinical documentation and coding by providing expert clinical and coding case review after final coding and prior to billing. This helped the organization experience overall financial and quality reporting benefits through more accurate code and legitimate DRG assignment,” mentions Dr. Matacale. According to Butler, "The collaborative efforts resulted in a true partnership and included a willingness to customize the process of our partnership. The same spirit infuses all of Huff DRG Review's consulting services."

Further, the ability to demonstrate ongoing, measurable value of CDI efforts through positive data outcomes led to personnel growth of Vidant's existing staff; including an executive physician champion, a coding educator, and increased CDI team membership.

**Sustaining Effective Long-Term Results**

With the implementation of a customized, effective and sustainable CDI program, Vidant Medical Center is well positioned to manage the ongoing challenges of healthcare reform. A key issue that cannot be overlooked is ICD 10-CM/PCS preparedness and documentation gaps. The facility is currently leveraging and applying pre-bill reviews as part of ICD-10 preparation and analysis.

Furthermore, Vidant Medical Center’s success through the partnership with Huff DRG Review has led to the expansion of CDI programs and pre-bill reviews to other Vidant Health acute inpatient hospitals. The pre-bill review is fast becoming the foundation for change. Information about documentation and coding garnered from this review drives improved quality through the efforts of the CDI team reinforced by the physician advisor program.

The end result is a sustainable economically viable solution to a changing healthcare environment.

“A successful clinical documentation program is the vital force that unifies care delivery to all facets of data analysis within healthcare reform. Its success hinges upon a customized approach utilizing the pre-bill review with direct physician involvement, as demonstrated within Vidant Medical Center.”

Gary L. Huff, M.D., CCS, CCDS,
President & CEO
AHIMA Approved ICD-10-CM/PCS Trainer