



CDI^{e™} Elevating Outcomes Through Documentation

Evolving the concept of CDI

Evolution is the key to long-term sustainability and success. This is particularly true for CDI. Gone are the days in which CDI programs could afford to focus solely on CC/MCC capture and DRG validation. Did you know that today's claims-based quality data directly impacts the financial health of your organization for years to come?

Data integrity through accurate documentation and coding harmonizes care within pivotal performance programs:

- Hospital Acquired Condition (HAC) Reduction Program
- Hospital Value-Based Purchasing (VBP) Program
- Hospital Readmission Reduction Program
- Comprehensive Care for Joint Replacement (CJR)

Getting to know your data

Analyzing claims-based quality data is a complex task. Understanding the implications of your data will guide enhancements by quality-focused specialists. For example, it's important to know:

- Observed rates for readmission, mortality, complications, and patient safety measures only partially define your performance-based payments.
- PSI 90 affects your score in both the VBP and HAC Reduction Programs.

CDI programs can—and must—broaden in scope to ensure claims data supports accurate value-based outcomes. By focusing on claims-based quality measures, Enjoin takes your program to the next level, ensuring data integrity which is essential to accurate quality profiles and reimbursement.

Introducing CDI^{e™} -- CDI elevated

CDI^{e™} elevates a traditional CDI program because it encompasses the next evolution of CDI processes and best practices. CDI^{e™} focuses on how documentation links to quality and vice versa. Regardless of whether you'd like to transition your already-mature CDI program or you'd simply like to augment a newly created CDI program, Enjoin can help.

CDI^{e™} elevates your CDI program

- Identify value-based outcomes with performance improvement opportunities
- Pinpoint documentation and coding opportunities to help ensure data integrity—essential to accurate quality profiles and reimbursement
- Receive training on quality measure methodologies and CDI vulnerabilities
- Initiate facility-wide collaboration to improve data integrity



Physician Directed Clinical Documentation Integrity

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Why Enjoin?

Enjoin delivers a comprehensive solution for advancing clinical documentation integrity. With thirty years of direct physician leadership, our team ensures evidenced-based care is accurately reflected through precise documentation and coding for value-based reimbursement. Whether inpatient or ambulatory, the precision of healthcare data defines risk-adjusted value-based outcomes through reliable documentation and coding.

Led by expert physicians with coding and documentation credentials, our clients achieve demonstrable improvements in CMI, coding accuracy, quality metrics, risk adjustment, and physician alignment—with an average return on investment of more than 700%.

Physician-led. Quality driven.

Enjoin helps organizations elevate their current CDI programs to achieve clinical documentation integrity for value-based care initiatives and other alternative payment models. By focusing on inpatient and ambulatory documentation and coding precision, we help clients identify, understand, and mitigate the financial vulnerabilities associated with risk-adjusted value-based outcomes.



Elevate your CDI program

Request a Hospital Specific Report analysis. Simply visit www.enjoincdi.com/hsr to:

- Identify opportunities and priorities to assess CDI impact on measure performance
- Promote understanding of CDI impact on measure performance
- Initiate facility-wide collaboration to strengthen data integrity

Enjoin Solutions

CDI^e

- Hospital Specific Report (HSR) analysis
- Quality Measure Record Review & Education (QMR)
- Quality Measure Training (QMT)
- Quality Measure Jump Start (QMJ)

Clinical Documentation Integrity

- Inpatient CDI
- Ambulatory CDI

MS-DRG Assurance Program

Provider Development

- Physician Advisor Program
- Physician Documentation Training
- Care Team Education



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