

# Remote CDI Services Increase Coverage Rate

7-hospital full-service healthcare network



## Organization

A 7-hospital full-service healthcare network

## Challenge

Grow CDI team's capacity to cover targeted cases and outpatient areas without additional CDI specialists

## Solution

TrustHCS's Remote CDIS Services to review additional cases and meet organizational KPIs

## Results

Reviewed an additional 40 cases per day, exceeded established KPIs for the CDI function, and identified key clinical documentation deficiencies for CHF, chest pain and mortality.

## Too Many Cases, Not Enough Time

Like most healthcare organizations, a large Midwest regional healthcare network already had an established clinical documentation improvement (CDI) program. Started in 2007, the complex program uses a centralized model across seven hospitals and reports to case management leadership. Consistency for CDI policies, procedures, practices and reporting is an ongoing challenge.

In 2015, the team's leader and program manager set out to expand CDIS coverage to the system's disparate campuses and outpatient care locations while also striving to standardize and meet organizational KPIs of 40 active cases per specialist and 8 to 10 new reviews per day, per hospital.

Simultaneously, the organization's executive leadership expressed concern regarding clinical documentation gaps, unspecified coding of chest pain cases and congestive heart failure, and slowly increasing mortality scores since the implementation of ICD-10. The CDI team was asked to conduct a focused review of these targets—without adding additional CDIS staff or management.

## In-House Liaisons Partner with Remote CDI Experts

To accomplish their goals, the system partnered with TrustHCS's Remote CDIS Services experts. CDI liaisons assisted in case reviews remotely via the system's EHR for three of the seven hospitals. Both teams maintained open communication with their CDI counterparts. Over time, the partnership yielded best-practice guidelines for a successful remote CDI program.

“Their professionals do a great job consistently meeting accuracy and exceeding the 95-percent established accuracy standards,” reports Spiers. All told, Forrest General runs approximately 39,000 inpatient discharges a year, 86,000 emergency visits a year, and 720 to 760 observations a month within the main facility.

Beyond the remote coding firm’s routine role in helping the system fill coder shortages, Spiers most recently tapped on TrustHCS for assistance with a special coding project. Leadership wanted to strengthen the confidence level for billing accuracy of reported observation versus inpatient hours for emergency department visits, which represent separate ambulatory payment classification codes.

## Experiences with Outsourced Coding Support

To help Forrest General accomplish recurring coding volume management objectives, TrustHCS experts work with the team to fill coding gaps as needed. This largely occurs when claims volumes spike or coders are out. TrustHCS also supported the system through a slight dip in workflow after ICD-10 adoption in late 2016. “They continue to help us address needs related to physician documentation specificity for ICD-10,” says Spiers.

The observation hours study was the latest endeavor in a string of special projects guided by TrustHCS and the company lends coding resources to both inpatient and outpatient areas as needs arise.

## The Power of Partnership

Spiers points to the open lines of communication maintained by her health system, citing TrustHCS resources as a key factor in the success of the remote coding partnership. The partners typically communicate via email and phone calls, using web conferencing resources to address new workflow processes. Coding Manager Lorie Mills, RHIT, CCS, keeps in touch with coders on a regular basis. “Prompt and open communication with TrustHCS coders, managers and supervisors is a huge benefit,” adds Spiers.

Finally, Spiers reflects on the value that TrustHCS brings to the Forrest General Hospital coding department. “TrustHCS may be a higher cost resource compared to some, but they hire quality coders. We get great quality for our dollar,” she concludes. “Our long history with the company makes it outsourced coding with TrustHCS seamless. There is real strength in our partnership.”

## Challenges driving outsourced coder adoption:

- Weak coding productivity
- Rising claims backlogs
- Lack of ICD-10 expertise
- MACRA preparation
- Special coding projects

To download our FREE coding needs assessment matrix or learn more about TrustHCS’s outsourced coding and audit solutions, visit [www.TrustHCS.com](http://www.TrustHCS.com) or call us at: (877) 686-1123.

## About TrustHCS

TrustHCS is a healthcare advisory and staffing services company for ambulatory, acute and post-acute care organizations. We build bridges between coding, coding compliance and CDI to deliver quantifiable advancements in cost reduction, revenue cycle acceleration and revenue integrity improvement.

<sup>1</sup> Black Book Research, October 2016. Available online at: <https://blackbookmarketresearch.newswire.com/news/outsourced-him-and-computer-assisted-coding-seen-as-panacea-for-15155000>

