



# How hospitals of all sizes solve their CDI business challenges

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*2021 ACDIS Virtual Summit: State of the CDI Profession*



# Today's Speaker



Angie Curry, RN, BSN, CCDS

Senior Consultant, Client Services Manager

- RN with 22 years of nursing experience including Post Cardiovascular Nursing, Nursing Education, CDI Regional Director
- Resource for data analysis, program metrics, and program support supporting successful outcomes for CDI teams and Hospital leaders.
- Member of ACDIS; served on the ACDIS advisory board from 2016-2020.
- Active in the Missouri ACDIS chapter participating in conference planning and presenting on various CDI topics.

Challenge: Doing more with less

## Not-for-profit health system operating in rural northeast Kentucky

An established CDI program with strong Medicare focus. We evaluated 12 months of 2020 all payor data. The organization has 159 beds, 32 specialties, and 1 full-time CDS.

**Nuance CDE One encounter prioritization, workflow, and CDI services.**

### Results

- **2.17%** improvement in CMI
- **\$567K** in most recent 12 months
- **99.3%** provider response rate
- **87.3%** provider agreement rate
- Gained **217** covered days

### Benefits

- Reduce administrative burden of daily assignments.
- Increase financial reimbursement through the focus on primary diagnosis clarifications.
- Expand CDI coverage to all payers, with 98% all payer inpatient review rate.

# Challenge: Trusting the AI

## Multi-state IDN healthcare system operating across Midwest region

A high performing program, seeing greater than 90% of Medicare cases. We evaluated 12 months of 2020 Medicare data incorporating 12 facilities, including community hospitals to an academic medical center.

**CDE One with encounter prioritization, workflow, CDI services, and Advanced Practice CDI™.**

### Results

- AI increased Medicare reviews by **1.8%**
- Overall clarification rate increased **6.5%**
- Impact clarification (financial) rate increased **1.6%**
- Physician agreement rate increased by **8.4%**
- Quality impact in cases reviewed SOI increased **7.8%** and ROM increased **6.7%**

### Benefits

- Increase in CDS clarification rate through encounter prioritization and AI-suggested codes identifying documentation opportunities.
- Increased visibility into program improvement opportunities using data provided for in the advanced analytics.
- Enterprise-wide visibility into program performance in near real-time using a single platform.
- Data driven visibility into educational needs of CDS and Physicians, and productivity gaps.

Challenge: Automating CDI workflow

## For-profit regional healthcare system operating in western Kentucky and southern Indiana

A high performing program, seeing greater than 90% of Medicare cases. We evaluated 12 months of 2020 Medicare data. The organization has 475 beds, 30 specialties, and 7 full-time CDS.

**Nuance CDE One encounter prioritization, workflow, and CDI services, and performance analytics.**

### Results

- **2.92%** CMI improvement
- At least **\$1.5M** all payer reimbursement impact over 12 months\*
- **99.6%** provider response rate
- Average provider response time: **31 hours**
- Gained **864** covered days

### Benefits

- Align reconciliation with coding partners by utilizing the encoder.
- Streamlines CDS workflow through Epic integration.
- Improve patient care by identifying readmissions and other quality indicators during the documentation process.
- Expand CDI coverage to all payers, with 74% all payer inpatient review rate.
- Increase financial reimbursement through the focus on primary diagnosis clarifications.
- Reduce administrative burden of daily assignments.

Challenge: Finding revenue

## Specialty Hospital operating in northern California

An extremely high performing program, historically reviewing 100% of Medicare cases. We evaluated 12 months of 2020 All Payor data. The organization has 47 beds, 3 specialties, and 3 part-time CDS.

**Nuance CDE One encounter prioritization, workflow, and CDI services.**

### Results

- **3.2%** Increase in CMI
- **\$1.1M** in total impact in most recent 12 months
- **98.3%** provider response rate
- **86.8%** provider agreement rate
- Gained **353** covered days

### Benefits

- Expanded CDS coverage to all payers, covering 96% of cases!
- Improved impact on quality and revenue generation with increased severity & MCC clarifications
- AI reviews and ranks inpatient admissions for ease of daily assignment
- Clinical evidence supports clarification process
- Streamlined workflow supports clarification response and agreement rates, as well as provider metrics for monthly tracking

# Challenge: Expansion

## Not-for-profit health system operating in the Southeast

An established CDI program focusing on all payors. We evaluated 12 months of 2020 data, spanning 15 facilities, including pediatrics and a regional medical center. The organization has 3200 beds, 80 specialties, and 50 CDS.

Nuance CDE One encounter prioritization, workflow, and CDI services.

### Results

- **2.69%** improvement in CMI
- **\$34.5M** in most recent 12 months
- **96.7%** provider response rate
- **82.5%** provider agreement rate

### Benefits

- Increase financial reimbursement by adding cases from Pediatrics and Obstetrics.
- Ensure an accurate medical record for pediatric and obstetric patients.
- Expand CDI coverage with 70% all payer inpatient review rate.

# Interested in insight about your specific situation? Let's talk.

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