

Leveraging Fusion CAC to Empower Collaboration between the CDI and Coding Teams at the University of Tennessee Medical Center (UTMC)



About UTMC

UTMC is a 710-bed hospital nestled in the beautiful mountains of Knoxville, Tennessee. The coding team is made up of 8 inpatient coders and 17 outpatient coders. There are 9 clinical documentation improvement (CDI) nurses who spend all their time focusing on inpatient reviews. They utilize the TruCode encoder, Cerner electronic medical record and have HealthQuest as their billing system.

Challenges

The Medical Record Department Director, Coding Manager, and the CDI Nurse Manager were looking for a way to improve operational efficiencies and outcomes and leverage technology to move their respective teams to the next level of excellence.

The consulting firm, Himformatics, LLC, (www.himformatics.com) was engaged to assist them in their quest to identify a single solution for both computer-assisted coding (CAC) and clinical documentation improvement (CDI) that would not only improve performance and outcomes and make it easy to measure excellence through robust and real-time reporting, but also promote a transparent relationship between the teams and improve overall communications. With their legacy encoder contract due to expire, they were looking for this single platform to include an integrated encoder.

The Decision was Easy

It was apparent to the UTMC management team, after seeing a demonstration of Dolbey Fusion CAC with TruCode, that this was the single solution that would help them improve efficiencies, productivity, and promote collaboration between the Coding and CDI teams.

Project Planning and Implementation

The planning phase for the Dolbey Fusion CAC build and implementation kicked off with members coming together from Dolbey and UTMC including IT, HIM and CDI Management.

Due to the unexpected pandemic and inability to meet in person, all work was conducted remotely via weekly conference calls. This remote approach to implementation proved to be very effective, as the Dolbey project management and implementations team worked with the UTMC team to stay focused and on task and keep the timeline moving so that UTMC's go-live targeted dates were met.

During the initial phase, the calls were centered around scheduling of the project. Review of the project scope and kick-off are considered major milestones during this initial phase.

Once the schedule was set, the designing phase began. It is during this phase that requirements for interfaces and system design are gathered. Dolbey recognizes that every organization has different needs and demands, so customizing a system to meet those demands is one of the many things that differentiates Dolbey.

It is also during this phase that the Dolbey subject matter expert (SME) team spent a lot of time with the management teams. Existing processes for coding and CDI were documented including the physician query process. Dolbey encourages clients to approach this phase with an open mind and think out of the box for new and improved ways to do things leveraging the technology. Dolbey offered recommendations for process changes and best practices, to ensure optimal design for the system. It is also during this phase that servers are set up and interfaces are built and tested.

Once the system was designed, the Dolbey team carried out extensive testing before the UTMC team started user acceptance testing. Before testing began, UTMC and Dolbey agreed on the criteria for measuring the success of the testing.

Concurrent Training and Go-Live

Detailed training guides were written for and distributed to Coders, CDI nurses, and administrative staff. Each group was scheduled separately for a four-hour session which included training on the Dolbey Fusion CAC. Inpatient and outpatient coders were separated into customized sessions based on the specific chart types for which they were responsible. All the CDI staff was trained at the same time.

At the end of each formal "classroom" session, the user (Coder or CDI Nurse) was responsible for working on a few charts so any questions regarding the new process could be addressed. The Dolbey team was on stand-by in separate virtual meeting rooms to meet with individuals if necessary. In the weeks that followed, Dolbey closely supported the UTMC staff to ensure they were optimizing the use of the system.



Six Months Later – Benefits Recognized

Six months following go-live, the UTMC Coding and CDI teams were already recognizing the benefits of the Fusion CAC/CDI single platform solution.

For Coding

The average weekly DNFB for UTMC prior to go-live was approximately \$43 million. Within the first two months and consecutively thereafter for each of the next four months, the DNFB dropped by \$6 million.

The most important benefit recognized immediately was improved coding productivity. The real-time reporting and dashboards gave management insight to quickly identify any workflow gaps and the power of automated workflow with the ease of use to adjust workflow as needed, management was able to rapidly identify and correct workflow gaps. Productivity was consistently higher than prior to go-live and even higher than goals originally set by UTMC.

- > Inpatient increased by 158%
- > Inpatient OB/Delivery increased by 98%
- > Outpatient Surgery and Observation increased by 45%
- > Outpatient Diagnostic increased by 22%

For CDI

The UTMC Physician Advisor and CDI Manager were thrilled to have access to real-time reporting for all CDI activity including physician query activity. Having better insights into the data allowed them to make some changes and measure the impact of those changes in their program, something they never had the ability to do with previous solutions.

Productivity for the CDI nurses increased allowing the review rate and percentage of CDI coverage to also increase by nearly 5%. Physician query average response time went from 72 hours to 19 hours, and the average response rate increased to 95% within six months of go-live, and there is a definite return on investment and positive financial impact with their queries. Having answers to questions like these at your fingertips will give you the confidence to make critical business decisions about your CDI program.

DOLBEY

Fusion CAC was developed to be a tool for increasing coder productivity. Today, it provides even more innovative features including Coder/CDI collaboration tools, custom query opportunity indicators, customizable workflows, and powerful reporting capabilities.

UT MEDICAL CENTER

The proof of our success lies in our customers' satisfaction. They have made us Best in KLAS for CAC every year since 2017.

www.dolbey.com 800-878-7828