

Clinical Documentation Improvement (CDI) Summit: *Advancing the Documentation Journey*

July 14–15, 2019 | Chicago, IL

Sunday, July 14, 2019

Time	Topics	
7:30–8:30 a.m.	Registration	
8:30–8:45 a.m.	Welcome/Opening Remarks	
8:45–9:45 a.m.	<p>CDI Compliance, Ethics, and the Practice Brief</p> <ul style="list-style-type: none"> • Overview of CDI compliance risks and weaknesses that can drastically impact a CDI program and an organization. • Present the key essential elements of a CDI compliance program and plan. • Discuss the AHIMA CDI Ethical Standards and how to maintain ethical integrity in one’s day-to-day work. • Highlight and share changes to the 2019 updated practice brief, “Guidelines for Achieving a Compliant Query Practice” • Present and analyze some case scenarios relating to CDI compliance <p>Gloryanne Bryant, RHIA, CDIP, CCS, CCDS, Coding Compliance, HIM Coding and CDI, Grass Valley, CA William Haik, MD, FACCP, CDIP, CDI and Coding, DRG Review, Inc., Fort Walton Beach, FL</p>	
9:45–10:45 a.m.	<p>The Importance of Accurate Documentation and Coding—A Physician’s Perspective</p> <ul style="list-style-type: none"> • Describe the changing healthcare landscape • Explain the value of risk adjustment • Explain best practices for achieving accurate documentation and coding to capture the true health status of the patient <p>Dr. Rae Godsey, DO, MBA, CPC, Associate Vice-President/Medical Director, Risk Adjustment and STARS, Humana, Louisville, KY</p>	
10:45–11:15 a.m.	Networking Break	
	TRACK 1— Documentation across the continuum	TRACK 2—Data Driven CDI TRACK 3—Physician/Clinical Focus

Time	Topics		
11:15 a.m.– 12:15 p.m.	<p>HCCs through the Patient Care Continuum</p> <ul style="list-style-type: none"> Define hierarchical condition category (HCC) coding. Discuss the role that CDI specialists can have in reflecting accurate RAF scores in both the outpatient and inpatient setting. Demonstrate HCC code capture and risk adjustment factor calculations during case study review <p>Allison Van Doren, RN, BSN, CCDS, CDIP, Clinical and Quality Services, Intellis, Deland, FL</p> <p>Kim Felix, RHIA, CCS, Clinical and Quality Services, Intellis, Deland, FL</p> <p>Jeanie Heck, BBA, CCS, CPC, CRC2, Coding Education, Intellis, Deland, FL</p>	<p>Integrating Clinical Data to Drive CDI Efforts</p> <ul style="list-style-type: none"> Define revenue integrity Recognize denials Management and strategies to prevent downstream revenue cycle problems Determine the CDI link to quality measures, care coordination, revenue integrity and denials prevention through ongoing data-driven CDI practices Focus on meaningful metrics to better manage outcomes <p>Angela Knight, RHIT, CHCAF, CHTS-IM, nThrive, Punta Gorda, FL</p>	<p>Establishing Consistent Clinical Validation Workflows for High-Value Diagnoses</p> <ul style="list-style-type: none"> Advance clinical validation from basic understanding to workflow implementation Create a consistent process around clinical validation for high profile diagnoses Identify diagnostic threshold criteria Recognize clinical validity red flags Author relevant clinical validation queries Facilitate collaboration between CDI professionals and physicians on clinical validation assessment <p>Beth Wolf, MD, CPC, CCDS, Health Information Management, Roper St. Francis Healthcare, Charleston, SC</p>
12:15–1:30 p.m.	LUNCH		
	TRACK 1—CDI Audits	TRACK 2—Data-Driven CDI	TRACK 3—Physician /Clinical Focus

Time	Topics		
1:30–2:30 p.m.	<p>Journey to the Center of the CDI Audit</p> <ul style="list-style-type: none"> Apply new knowledge for guidance in performing CDI audits and best utilize technology in order to accomplish this goal. Identify best ways to recognize that individual CDI specialists require audit. Demonstrate examples of low and high performing CDI specialists. Provide information for analysis so the learner can apply these topics to their own facility. Organize and summarize the best educational approach post-audit completion. <p>Rachel Mack, RN, MSN, CCDS, CDIP, CCS, CDI, Iodine Software, Littleton, CO</p>	<p>Climbing the Quality Summit with CDI</p> <ul style="list-style-type: none"> Recognize the impact of CDI review on publicly reported date, readmissions and length of stay. Identify how a focus on quality within the CDI review process will ultimately improve patient safety and patient care. <p>Ashley Vahey, BSN, RN, CCDS, Penn State Health, Hershey, PA</p>	<p>Algorithm and Adjudication of the Fourth Universal Definition of Myocardial Infarction as a healthcare system</p> <ul style="list-style-type: none"> Determine best practice in developing clinical definition standards within a facility/healthcare system Collaborate with coding, CDI, and physician advisors to develop educational practices related to the new MI definitions. Institute a pro-active CDI process for AMI adjudication in real time. Utilize a post-discharge process with coding and CDI collaboration for AMI adjudication Monitor quality metrics data for AMI <p>Abhinav Goyal, MD, MHS, FACC, FAHA, Cardiology, Emory Hospital, Atlanta, GA</p> <p>Susan Sweeney, RN, BSN, CCDS, CCS, CDI/Coding, Emory Health Care, Cumming, GA</p> <p>*Kelley Pechin, CCS, Covenant HIM/Emory Healthcare, Atlanta, GA</p> <p>*Hilary Hill, RN, BSN, CCDS, CDI, Emory Health Care, Atlanta, GA</p>
Sunday, July 14, 2019	TRACK 1—CDI Audits	TRACK 2—Data Driven CDI	TRACK 3—Physician/Clinical Focus
2:40–3:40 p.m.	Analyze a Qualitative CDI Audit Tool	Navigating Public Quality Report Cards	The Sepsis, Malnutrition, and Respiratory Failure

Time	Topics		
	<ul style="list-style-type: none"> Assess the components of a qualitative CDI audit tool Determine how to measure the quality of a CDI professional work Recognize the impact of qualitative CDI audits <p>Tammy Combs, RN, MSN, CCS, CCDS, CDIP, AHIMA, Chicago, IL</p>	<ul style="list-style-type: none"> Describe the different public quality report cards Compare and contrast report card data sources and measures Describe how CDI can impact specific quality report card measures Consider how to communicate conflicting quality report card results to leadership and stakeholders <p>Kristen Geissler, PT, MBA, CPHQ, BRG, Essex, MD</p>	<p>Documentation Conundrums: A Best Practice Review</p> <ul style="list-style-type: none"> Discuss current research and findings to clarify the issues Create a collaborative culture among CDI teams, coders and physicians to create clinical guidelines of these top three diagnoses framed within official coding guidelines Learn best practice approaches to improve documentation with the appropriate clinical indicators for sepsis, malnutrition, and respiratory failure <p>Mel Tully, MSN, CCDS, CDIP, CDI, Nuance Communication, Inc., Atlanta, GA</p> <p>Lisa Baris, RHIT, CCS, CCDS, Nuance Healthcare Professional Services, Nuance Communications, Inc., Maineville, OH</p>
3:40–4 p.m.	Networking Break		
	TRACK 1—CDI Audits	TRACK 2—Data Driven CDI	TRACK 3—Physician/Clinical Focus
4–5 p.m.	<p>Managing Clinical Validation Denials</p> <ul style="list-style-type: none"> Provide clarity around the unique challenges posed by clinical validation denials. Discuss the current state of clinical validation denials from both Commercial and Government payers. Recognize innovative and successful strategies 	<p>How Does Your CDI Program Measure Up? Analyzing Your Current State and Taking your Future State to a New Level</p> <ul style="list-style-type: none"> Define and understand the benefits of analyzing your CDI Program through a SWOT (Strengths, Weaknesses, Opportunities and Threats) Analysis and report cards 	<p>Physician Office Queries and How to Get the Details</p> <ul style="list-style-type: none"> Define what appropriate queries consist of Discuss how best to communicate with providers when sending queries Review how to not ask a "leading query" and yet get the information needed for coding purposes. <p>Kim Garner Huey, MJ, CCS-P, CHC, CPC, PCS, CPCO, KGG</p>

Time	Topics		
	<p>for appealing denied claims.</p> <ul style="list-style-type: none"> Introduce best practices for preventing denials through consistent, clear and comprehensive documentation. <p>Denise Wilson, MS, RN, RRT, Clinical Appeals, Denial Research Group d.b.a. AppealMasters, Towson, MD</p>	<ul style="list-style-type: none"> Describe the value of the 20 guiding practices of the finest CDI programs Discuss ways to prioritize opportunities discovered during analysis Complete a SWOT Analysis on CDI department as well as setting up an internal report card <p>Staci Josten, RN, BSN, CCDS, CD/UR Services, UASI, Ankeny, IA</p>	<p>Coding and Reimbursement Consulting, Alabaster, AL</p> <p>Sandra Giangreco, RHIT, CCS, CCS-P, CHC, PCS, CPC, COC, CPC-I, COBGC, CliftonLarsonAllen, Boomfield, CO</p>

Day 1–6.5 CEUS, CNEs (TBD)

Monday, July 15, 2019

Time	Topics	
7:30–8 a.m.	Registration	
8–9 a.m.	<p>The CDI Process When Dealing with a Complex Clinical Scenario</p> <ul style="list-style-type: none"> • Dynamic panel discussion regarding a complex case study • Recognize the CDI process from several different perspective • Identify CDI solutions for a complex clinical world <p>Lisa Campbell, PhD, MHA, MPM, RHIA, CDIP, CCS, CCS-P, CPC, COC, Physician Practice Resources, Inc., Matteson, IL, Michele Spikes-Cain, RN, and *Armando Silva, RHIA, South Shore Hospital, Chicago, IL</p>	
9–10 a.m.	<p>Connecting the Medical Field with Politics and Advocacy</p> <ul style="list-style-type: none"> • Describe the connection between medicine and politics • Demonstrate the importance of advocacy • Analyze the impact one’s voice has on political outcomes <p>Lauren Riplinger, JD, Federal Relations, AHIMA, Washington, DC</p>	
10–10:30 a.m.	Networking Break	
	TRACK 1—Program Improvement	TRACK 2—Query Innovation
10:30–11:30 a.m.	<p>Enterprise Documentation and Coding Strategies to Improve in Population Health—Part 1</p> <ul style="list-style-type: none"> • Remove barriers between professional facility CDI, coding, charge capture and revenue integrity to gain efficiencies • Eliminate duplication of effort and improve all aspects of the process to achieve superior results in advancing population health <p>Cassi Birnbaum, MS, RHIA, CPHQ, FAHIMA, HIM and Revenue Integrity, UC San Diego Health, San Diego, CA</p>	<p>The Impact of Mobile Physician Query Workflow Married with AHIMA-Compliant Templates at Western Maryland Health System</p> <ul style="list-style-type: none"> • Assess how technology can be designed so physicians actually enjoy using it • Discover how smart query technology is changing the role of the Clinical Documentation Specialist (CDS) • Recognize the benefits of simplifying query workflow <p>Tracey Davidson, MSN, Western Maryland Health System, Cumberland, MD</p>
11:30 a.m.–12:30 p.m.	LUNCH	

Time	Topics	
	TRACK 1—Program Improvement	TRACK 2—Beyond Traditional CDI
12:30–1:30 p.m.	Enterprise Documentation and Coding Strategies to Improve in Population Health—Part 2 <ul style="list-style-type: none"> Detail the implementation pathway and dependencies that need to be addressed to enable single-path coding Advance provider understanding of the importance of documentation and coding accuracy to support prospective payment, risk adjustment and other alternative payment system practices Cassi Birnbaum, MS, RHIA, CPHQ, FAHIMA, HIM and Revenue Integrity, UC San Diego Health, San Diego, CA	Clinical Documentation Improvement Strategies for Inpatient Rehabilitation Facility (IRF) Setting <ul style="list-style-type: none"> Recognize the need for implementing a CDI program in an IRF setting Identify how a successful program can result in better patient outcomes and optimal reimbursement. Elaborate on the skill set, education and training required to be a successful rehab CDI Specialist Explore strategies the CDI specialist can utilize when collaborating with the clinical team members to succeed in the role Nirmala Sivakumar, CCS, CDIP, Allentown, PA
1:40–2:40 p.m.	Applying the Concept of Wisdom to the Chart Review <ul style="list-style-type: none"> Promote innovative ways to effective clinical documentation review Identify best practice as a sustaining means to improve accurate documentation Educate and empower new clinical documentation improvement specialists to leverage best practice in the review process. Discuss the concept of wisdom *Evangeline Ozurigo, DNP, RN, CCDS, CDIP, HIM-CDI, Cook Children’s Health Care System, Fort Worth, TX	CDI in Mental Health <ul style="list-style-type: none"> Examine chapter five in the ICD-10-CM book. Dive into documentation requirements of top diagnoses Recognize how the coding guideline “with” can affect the Principal/first listed diagnosis. Heather Greene, MBA, RHIA, CDIP, CPC, CPMA, First Call Consulting Group, Georgetown, KY
2:40–3 p.m.	Networking Break	
	TRACK 1—Program Improvement	TRACK 2—TRACK 2—Beyond Traditional CDI
3–4 p.m.	Leveraging prioritization in CDI <ul style="list-style-type: none"> Verbalize how prioritization has been utilized to identify CDI documentation opportunities 	Driving Quality, Accuracy, and Revenue in the Emergency Department <ul style="list-style-type: none"> Define the ED Revenue Cycle

Time	Topics	
	<ul style="list-style-type: none"> • Identify how technology can be leveraged to better prioritize CDI documentation opportunities • Apply principals shared to CDI daily workflow decisions <p>Fran Jurcak, MSN, RN, CCDS, Iodine Software, Austin, TX</p>	<ul style="list-style-type: none"> • Discover comprehensive and compliant E/M guidelines are in place at your facility, and how to create or expand policies where needed. • Design a collaborative approach for reducing emergency department denials. • Assessing different methods for identifying cases; then use audit results to create pertinent education for physicians and staff <p>Bobbie Starkey, RHIT, CCS-P, Consulting Services, 3M Health Information Systems, Salt Lake City, UT</p>

Day 2—6.5 CEUs, CNEs (TBD)

*Speaker invited, pending confirmation

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