Clinical Documentation Improvement (CDI) Program

- Promotes best practice standards to achieve the highest-quality documentation possible
- Assists CDI specialists in maximizing the quality and safety of patient care
- Improves documentation workflow to shorten query response times and increase productivity
- Provides focused, proactive education for clinicians targeting areas like MS-DRGs, POA, MCC/CC Capture and Risk of Mortality
- Offers optional web-based data analytics and reporting to keep your CDI program on track and allow you to report on your efforts

H.I.Mentor’s Clinical Documentation Improvement (CDI) Program incorporates years of clinical documentation and coding experience with some of the nation’s top hospitals and health networks. Our program involves a targeted education and process improvement approach that is designed to help an organization work effectively with physicians to focus on achieving accurate and complete documentation for their patients. We work with clinical staff, CDI specialists and coders to develop streamlined workflow, audit, query, education, and data monitoring processes that reflect industry best practices. The goal is to provide coders with more robust documentation that supports compliant, accurate coding to promote optimal reimbursement and severity-of-illness categorization.

“H.I.Mentor’s staff provided coding, documentation, and revenue cycle audit services, as well as continuing education for our medical staff in an effort to improve our clinical documentation processes. Not only was this well received by the physicians, coders, and nursing staff; immediate improvements were recognized, resulting in more appropriate and legitimate length of stay, co-morbidity identification and reimbursement.

—Mike Lawrence, Chief Financial Officer
Holy Cross Hospital, Chicago, IL
Environment Specific Solutions
Regardless of which software or CDI system a facility may utilize, HIMentor’s performance improvement and action-oriented program provides a cost effective way for hospitals to achieve their CDI goals. In the initial assessment and review, we look for high-risk areas where documentation is not accurately reflecting the specific care provided during a patient episode. These situations can ultimately lead to under-coded or miscoded records. They also can contribute to compliance issues or negatively impact case mix index, quality reporting, and reimbursement. By focusing on the organizational areas and roles that are not operating at a best practice level, specific corrective actions can be implemented quickly to help facilities recognize immediate results.

A Step-by-Step Approach
In many cases the clinical documentation and coding processes are running smoothly. But often there are specific functional areas that may be operating inefficiently, and patient care is not being documented in a thorough, timely, accurate, or consistent manner. That’s where HIMentor’s Five-Step approach is designed to address your most pressing documentation issues and provide a targeted program to get you back on track quickly.

Step One
Understand your current coding/documentation relationship via an initial CDI coding and documentation audit.

Step Two
Identify the gaps in your current process vs. best practice goals utilizing process mapping and workflow analysis.

Step Three
Pinpoint specific actions and resources needed to move towards best practice goals.

Step Four
Initiate required changes and targeted education where needed.

Step Five
Implement data monitoring and other software solutions and process changes to assure ongoing CDI success.

Ask Yourself:
• Do I really have an understanding of what it takes to have a cost effective and successful clinical documentation program?
• Am I continuing to pay large sums of money on an annual basis for a CDI program using approaches that are not working?
• Are we still lacking the effective coordination or communication between clinicians and coding staff to support a more compliant and accurate documentation process?

Ongoing Education
Having access to reliable data is the first step to managing and understanding a department’s level of performance. Add a comprehensive, accurate analysis of appropriate data, and a manager is armed with the necessary information to make critical decisions for the organization. Using our proprietary business intelligence software coupled with web-based collection and reporting tools, HIMentor’s can provide both qualitative and quantitative evaluations of compliance, operational and financial indicators that impact the performance of your HIM department.

Take Charge
HIMentor’s Clinical Documentation Improvement Program is designed to help you achieve the highest quality documentation specificity possible. HIMentors provides an ongoing process that helps ensure that workflow and chart completion processes are streamlined for greater efficiency. If you are moving to an EMR, you may find that some key patient information is undocumented, under-documented or overlooked—an excellent time to initiate a CDI program.

The Clinical Documentation Improvement Program from HIMentor’s can have an enormous impact on a hospital’s quality of care, productivity, reimbursement and reputation for excellence. Our Five-Step approach and ongoing education programs attack your most pressing issues today and keep you on track and up to date in the future. As competition gets tougher and with ongoing changes to government regulations, you need a program that complements your internal improvement efforts and helps you meet your performance objectives.

About HIMentors
HIMentors is an HIM and Revenue Cycle Management consulting firm founded by nationally recognized health information management leader Darice Grzybowski, MA, RHIA, FAHIMA. Darice and her team of experts employ decades of combined industry experience to provide focused and successful consulting programs and solutions that simultaneously improve compliance, motivate staff, and help reduce risk and costs for facilities. Our hands-on mentoring approach helps HIM and Revenue Cycle departments optimize their operations while improving bottom line performance.

About ChartWise Medical Systems
HIMentors has partnered with ChartWise Medical Systems to bring innovative tools to enhance your clinical documentation improvement program. The ChartWise:CDI software solution brings clinical documentation intelligence to your CDI program. This web-based product uses built-in expertise to streamline the CDI process by translating clinical terms, labs, and medications into the diagnostic terms needed for coding and electronic query selection. Flexible workflow, robust on-demand multi-level reporting, data security, reference materials, and encoder/grouper integration all help keep CDI knowledge at your fingertips!