Staying Engaged: ACDIS Presents Virtual Education & Community Recap

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Dear CDI professional,

The last few months have been an experience no one could have anticipated. The COVID-19 pandemic has resulted in catastrophic loss of life. It has wreaked havoc on hospital finances, and sent CDI professionals home to work, often with accompanying reductions in salary or staff. In short, it has been an incredibly difficult time for everyone, and tragic for some.

What COVID-19 has also taught us, however, is the value of human engagement. Virtual meetings on webinar platforms have become the new norm, and paradoxically resulted in more connection, as people have reconnected with friends, family, and colleagues in greater numbers than before. We’ve rediscovered that what is most meaningful in life is not what you own, but your connections and experiences.

That’s why we were beyond honored to host more than 500 CDI-related professionals for Staying Engaged: ACDIS Presents Virtual Education and Community. We saw CDI engagement in action as speakers shared ideas, attendees shared their experiences and enthusiasm with one another, and ACDIS staff brought forward new data related to physician engagement, remote CDI benefits, and generally spurred on the conversation and the fun.

All while socially distanced, Staying Engaged offered a broad range of sessions with engagement as the underlying theme—and the attendees were more engaged throughout the event than we’d ever hoped, posting photos of their pets and kids, their favorite cocktails, sharing thoughts on how COVID changed their lives, and offering thoughts on best practices for connecting with physicians and sharpening their CDI skill sets. And so much more.

Although ACDIS has 12 in person national conferences under its belt, Staying Engaged was a learning experience for our staff. Thanks for sticking with us. Even though the agenda was “suggested,” meaning attendees could listen to many pre-recorded sessions at their convenience, most closely followed the agenda beginning with our live sessions, in-app networking, and sharing their thoughts with one another in our social media feed and forums.

Regardless of profession, all growth—personal or professional—comes with a commitment to engage. Engaging with a colleague, a physician, a concept, or a lecture provides us with a gateway. When we grow, we not only expand our influence, but we expand our circle of possibility. What might at first seem impossible can become possible through the acquisition of new skills, new connections, and new networks.

We appreciate everyone who took that point to heart and participated in our Staying Engaged event. We know that participants left with insights, actionable strategies, and valuable contacts to re-energize their CDI careers in the days ahead.

We hope you enjoy this event recap and we look forward to bringing the CDI community additional educational opportunities throughout 2020 and beyond!

Stay well!

Brian Murphy
Director, ACDIS
The Evolution of a Virtual Event Highlights CDI Innovation and Community Strength

When it became clear that ACDIS needed to cancel its main in-person conference in order to keep our clinical documentation integrity (CDI) community safe from the dangers posed by the COVID-19 pandemic, it also became clear that we needed to innovate and find new ways to bring education and networking to our members.

What you may not know is that ACDIS had never attempted a virtual educational event. Sure, we’ve done webinars, podcasts, even three-hour ACDIS “live” events, but for this, we wanted to bring our community together in a way where people could say “hello” to one another, talk to one another, and learn from each other as well as from our excellent slate of presenters.

But how to do it?

As the world went remote, there seemed a thousand companies emerging to provide the world the means to stay connected. Zoom parties were the suddenly the norm, as were Skype chats, Google Meet-ups, and more. Ultimately, we chose a hybrid method—leveraging our traditional conference app that many members had become familiar with over the years, as well as some “live” opening sessions, and a virtual gala where we got to “see” some folks. The 2020 ACDIS conference committee assisted with the selection of the speakers and guiding presenters to offer timely information related to the COVID-19 outbreak. (Visit the ACDIS site for the complete agenda.)

We weren’t sure it would work.

Would anyone actually be able to follow the suggested agenda? After all, some CDI programs were downsized due to COVID leaving the remaining staff busy filling their duties. Would they post their take-home tips from each session like they would if multiple sessions were taking place concurrently? After all, if attendees listen at their own pace (and not according to the suggested agenda) how would those sympati-co conversations be able to take place? Would the scheduled networking breaks work at all, for the same reason? Would attendees “play” our scavenger hunt or trivia games like they would if we were onsite?

In response to the networking prompt asking attendees to share a piece of advice they cherish, ACDIS Associate Editorial Director Melissa Varnavas shared a photo of a model train and the story about how missing one train doesn’t need to derail your plans. There’s another train coming if you patiently wait for it.

This was my first all virtual conference and you all knocked it out of the park. I loved the on-demand presentations and networking activity feeds. The speakers and presentations were excellent, and their content thorough. Thank you for making this possible and providing high quality education and a much-needed break from our ‘Groundhog Day’ lives during COVID.”

—Emily Emmons
By 10 a.m. on the first day of *Staying Engaged: ACDIS Presents Virtual Education & Community*, we knew we’d needn’t have worried. With nearly 600 total participants, 483 people downloaded the event app, and 357 of them were actively engaged (meaning they clicked on multiple sections, posted in the activity feed, etc.). While 40 attendees played the scavenger hunt leveraging the request hashtags so many more played by posting photos of their home offices, their pet office mates, their favorite coffee cups, and more.

There were a total of 2,553 posts in the activity feed by the conclusion of the event. In the post event evaluations, 98% said the information offered was very important or important to their daily CDI activities and 95% said the program was excellent or very good. Attendees found the experience, well, engaging.

It wasn’t all the behind the scenes work that made our first ever virtual event a success. The attendees’ energy and willingness to engage, even in these extraordinary times, sharing CDI stories, tips, advice, and straight up joy about the role they play in this profession was, well, infectious.

To be sure, not all those stories shared were easy ones to tell. Our community has been hit hard by COVID-19. Some told of deaths in their family. Some told of their layoff. Others discussed the painful reality of being the one to have make decisions related to job reductions. And still, attendees shared. Still, attendees took the time to invest in their careers, in CDI, in ACDIS.

When times get tough—and, as ACDIS Director Brian Murphy said in his *July 9 CDI Strategies* article “boy, they have been a bear these last few months—CDI professionals have a wonderful way of rising to the occasion.” In his article, Murphy recapped his opening session “The Value of CDI in Trying Times,” recounting the results of ACDIS’ impact of COVID-19 on CDI departments survey. The survey showed that CDI professionals’ willingness to engage in tasks far removed from record review, right up to and including returning to the front lines and doubling down on demonstrating their value to deliver a return on investment (ROI) to their organizations.

In his article, Murphy recounted how Orlando Health suffered a loss of elective surgeries and a corresponding downturn in census, but Sheri Blanchard, RN, MSN, FNP-BC, CCDS, CCS, corporate director of clinical documentation excellence, branched out her staff’s reach by implementing all-payer review, reviewing charts on evenings and weekends, and taking split shifts. These activities were so successful Blanchard is planning to continue them post-COVID-19.

There were shared stories similar to these throughout the Staying Engaged event both in formal educational sessions and through the networking activities in the event app.

As Murphy said in his article, “the CDI profession has always been flexible. For all its disruptions and tragedies, COVID-19 has been yet another chance for CDI professionals to show their grit and innovation.”

While the *Staying Engage* event can’t hold a candle to being together in person, CDI professionals’ innovation and willingness to embrace—even if only virtually—their collective contribution to CDI remained center stage.
Staying Engaged Attendee Recaps Event Take-home Tips

By Rani Vivian Stoddard, MBA, RN, CPHQ, RHIA, CCDS, CCS, CDIP

I had the great privilege of “attending” the Staying Engaged: ACDIS Presents Virtual Education & Community event held in June. It was the first time ACDIS has held a virtual conference and it was a rousing success. From the first speaker to the last, with a mixture of live and pre-recorded sessions, we learned from, and communicated with each other. It was non-stop. There is no way I can recreate the excitement, but hopefully can give you an idea of the learning that took place.

OUR OPENING CEREMONY was an ACDIS Podcast: Talking CDI on the “Value of CDI in Trying Times,” with ACDIS Director Brian Murphy, ACDIS Boot Camp Instructor Laurie Prescott, and ACDIS Advisory Board members Tracy Boldt, Sheri Blanchard, and Susan Fantin. It was good to learn we are not alone in these trying times. While each hospital is responding differently, there are ways in which we are similar in our responses to the COVID-19 pandemic. It was good to hear about how these different systems have supported their CDI teams and reassuring to know there are opportunities for CDI efforts even now. (By the way, I just love the ACDIS Podcast logo!)

The next speakers were James Kennedy, MD, CCS, CDIP, CCDS, and Kathryn DeVault, MSL, RHIA, CCS, CCS-P, FAHIMA. DeVault held her own with Dr. Kennedy and his southern charm and brilliance. She has more than 25 years of HIM experience and was more than apt to discuss the topic of “CDI Pertinent Coding Clinic Updates.”

One slide of particular interest to me, was about sepsis, which highlighted the Official Guidelines of Coding and Reporting which states that “…conditions should be coded as related even in the absence of provider documentation explicitly linking them unless the documentation clearly states the conditions are unrelated or when another guideline exists that specifically requires a documented linkage between two conditions (e.g., sepsis guidelines for ‘acute organ dys-

“Even though the conference was ‘virtual’ I was still able to ‘meet’ new colleagues and make connections that will last a while.” —Robin Gulzow
function that not clearly associated with sepsis")."

Another favorite take away from this session is a wall I run up against often in terms of denials—the definition of the word “consistent.” Kennedy and DeVault cited the 2016 AHIMA “Outpatient CDI Toolkit” definition as “…documentation which does not contradict itself,” and as “not tied to the number of times a diagnosis is documented.”

One of the things I also enjoyed about this event were the sponsored lightning rounds which allowed these excellent organizations to showcase their work. The first one featured information from Artifact, 3M, ChartWise, Enjoin, and Iodine.

Next came another of my favorite speakers, Trey La Charité, MD, FACP, SFHM, CCS, CCDS. La Charité is a regular speaker at the ACDIS Physician Advisor Boot Camp and is a hospitalist and curriculum director of the residency program’s hospitalist rotation at University of Tennessee Medical Center in Knoxville. During his presentation “Stop, Drop and Roll! Managing your CDI Programs Unexpected Fires,” he spoke on the importance of resource protection and preventing mission creep. He also talked about having a plan for when problems arise, as they will, plus the importance of staying current in the CDI world. He had practical advice on dealing
with risk management like “don’t send emails – which are discoverable – use the phone!”

Next ACDIS gave us a networking coffee break where we could discuss any CDI topic with our fellow attendees. It was a blast.

Our last presentation of Day 1 was Laurie Prescott, RN, MSN, CCDS, CCDS-O, CDIP, CRC who gave a dynamite talk on critical thinking skills, in “It’s Critical: Applying Critical Thought to CDI Practice.” Her self-deprecating humor is infectious and she drives home a point with query examples. I liked her definition of critical thinking as “questioning your assumptions, asking questions, seeking clarification, and thinking beyond what’s in front of you.” She gave us some examples to help us learn from our mistakes and told us to ask for evaluations and audit feedback and encouraged us to compare our stats with our peers.

The day ended with a bang at the “virtual gala” during which members of the ACDIS team joined with members of the ACDIS conference planning committee, sharing their videos, favorite drink recipes, and leadership and CDI team-building insights. Did you know that a Gimlet is a gin cocktail first created in 1928 and named after a tool used to drill small holes due to the drink’s “piercing” effect?

ON THE SECOND DAY OF THE EVENT, refreshed from a night’s sleep, and excited about the day, we opened with the “ACDIS Achievement Awards Virtual Ceremony.” The humility of the award winners brought a tear to my eye. To learn more about the winners, visit the ACDIS website. It was nice to see them and nice to see them with their awards even though they couldn’t have an actual in-person ceremony this year, they were so inspiring.

This was followed by the keynote speaker Joan Peterson, vice president, master facilitator and leadership coach on “Getting Your Voice Heard.” One of the points that she reminded us of was that “we can speak at 125-175 words per minute, listen at 125-250 words per minute, and yet, think at 1,000 to 3,000 word per minute!” What statistics! She asked us to think about what we stand for and what

“**This virtual conference was a great idea. Thank you for the topics and speakers. The virtual event allowed our CDI department to attend at our own pace. The registration cost was affordable for the entire CDI department to attend. This would not have occurred otherwise.”**

—Roberta Vance
quote we might choose as representative of our lives. In that light, she asked us to think about how we can leverage our unique voice to tell our stories and engage our audience to embrace change.

Then came a lunch-and-learn sponsor lightning round with Medovent, Nuance, Optum 360, and UASI. And following their session, came my personal favorite talk, “Clinical Guidelines, Your Ace in the Hole,” by Karen Elmore, BSN, RN, CCDS, and Samantha “Sam” Cantin, RN. These two incredibly bright ladies worked throughout their organization to develop a book of approved clinical guidelines for their hospital system. It’s now used for not only training but denials support. The strategy was to identify, get input, formalize the guidelines, communicate them, and educate to them. They are a work in progress, in digital format to avoid messy paper upgrades.

After another networking break focuses on query practices, we had a special edition of the ACDIS Podcast: Talking CDI with ACDIS Director Brian Murphy and Autumn Reiter, director of CDI services for Trust HCS where they discussed how COVID-19 affected CDI operations among other items.

The next talk was exciting as a practicing trauma surgeon and CDI convert Dr. Nicole Fox, MD, MPH, CPE, and Rebecca
Willcutt, BSN, RN, CCDS, CCS, CRC, director of CDI at Cooper University Healthcare in Camden, New Jersey talked about “Living on the Edge: CDI for the Critically Ill and Injured Patient.” It had marvelous practical advice on how to talk to surgeons as well as charge capture through the trauma activation fee. She demonstrated a ton of teachable elements using before-and-after case study examples.

Last up for the day, was the “Regulatory Committee Session: 2021 IPPS Proposed Rule and Advocacy” which strongly encouraged us to comment to CMS on coding issues that are of interest to us. The panel consisted of Candace Blankenship, RN, BSN, CCDS, Haaris Ali, MD, CDIP, Sharme Brodie, RN, CCDS, and Faisal Hussain, MD, CCDS, CDIP, CCS. They discussed what it took to establish a new MCC/CC split for a MS-DRG, which was a tough criteria and reviewed some of the 2021 recalibration of relative weights.

That ended Day 2. Whew! But, wait! We also got a bonus session featuring Timothy Brundage, MD, CCDS who covered documentation essentials of COVID-19 as well as other conditions such as chronic kidney disease, obesity, and heart disease. But he also emphasized the importance of documentation linkage of diagnosis to organ dysfunction to support compliant reporting of sepsis (as well as assist with denials).

ROUNDING THE HOME STRETCH on the final day of the event, we opened with a great Q&A panel consisting of members of the ACDIS advisor board. ACDIS Director Brian Murphy once again took to the “virtual” podium and shared results of a recent provider engagement survey and series of reports. One of the stats that was amazing to me was that 22.78% of the 158 hospitals that responded to the survey did not have or plan to hire a physician advisor. Speaking very personally and being spoiled by ours, that’s like operating a CDI program with one hand tied behind your back. But again, that’s speaking personally.

Then Sharon Cole, MSN, RN, CCDS, and Amanda Suttles, BSNN, RN, CCDS, presented “Let’s Work from Home! Transitioning your CDI Team from On-Site to Remote.” It was a thoughtful and incredibly detailed discussion which I bet a number of us wish we’d heard.

“The timed trivia contest featured 12 questions each day and the winner was entered into an ACDIS raffle for the gift of their choice, either an ACDIS membership or a book.

ACDIS-themed garden blooming in purple and orange. Attendees even shared their backyards with us during the virtual events.

“Great presentations! Gaining consensus on some of the more challenging diagnoses has long been a passion of mine since first starting in CDI in 2008!” —Laura Ehrlich
before COVID hit and we were asked to transition home. They shared a funny set of photos—one with a happy family sitting on the front porch and the other with the kids taped to the floor while the parents behind them working on the computer. Anyone with children definitely felt that pain during the pandemic, I’m sure. Don’t worry though, no children were harmed in the making of the photo.

The final networking break took the educational session a bit further with a discussion on handling a virtual life where people got to share pictures of their remote set up. It was fun to see how creative some folks got with a basic set up. One woman even had three computer monitors. Two people posted pictures of their dogs at their desks!

Erica Remer, MD, FACEP, CCDS, was up next. She always gives a great talk and this one was about “CDI in the ED: Where Outpatient Meets Inpatient.” As a practicing ED physician, she knows where of she speaks. I liked her summary slide for general diagnostic principles that physicians should keep in mind as they document their cases. She said physicians should:

- Always have a diagnosis corresponding to chief complaint or significant abnormal physical finding
• Document a diagnosis for every procedure
• Document secondary diagnoses that contribute to the thought process or actions
• List most serious diagnosis first

She even sang Frère Jacques as a mnemonic to help physicians remember to document anything that was wrong with the patient in the order of the brain, heart, lungs, organs, circulation, or code status. It was a great presentation for sure.

The final session was a discussion on “CDI Educator and Audit Team: A Partnership for Actionable Education” by Elisa Sninchak, M.Ed, BSN, RN, CCDS, CDIP, CCS, Dana Walker, CSN, CCDS, and Alissa Brown, RN, CCDS. Because of the size of their facilities, they have a separate CDI educator who works with 25 CDI specialists and two staff members who audit CDI activities. The session explored how focused auditing efforts could illuminate opportunities for education and improvement. They also stressed the strong partnership with CDI and coding.

All in all, it was a fabulous three days. I, for one, am looking forward to the fall event. Of course, I missed the in-person hugs that we would have shared during our traditional in-person education with ACDIS, but I enjoyed the camaraderie over the Internet, nevertheless.

**Editor’s Note:** Stoddard is a CDI supervisor at Henry Mayo Newhall Hospital in Valencia, California. She has been a CDI supervisor for more than six years. She currently serves as the CA ACDIS Chapter secretary and newsletter CA ACDIS Connection editor, where this article originally appeared. She also serves as a member of the ACDIS Chapter Advisory Board. Contact her at stoddardrv@henrymayo.com.

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**“Thank you ACDIS for exceeding my expectations for this virtual conference. I thoroughly enjoyed it and learned so much!”**

—Lori Earls

CA ACDIS Chapter volunteer Alma Yap was able to watch the educational sessions from her beach chair!

Thanks for joining us this week for our first ever virtual event! We had a blast hanging out with you, learning from you, and seeing your home offices, pets, families, and CDI enthusiasm! The ACDIS community is the best community 💜💜

The ACDIS gang all waved farewell at the close of the three-day event. It was a whirlwind of activity and we’re looking forward to doing it again soon!
ACDIS Virtual Lightning Round Session Overviews

The Changing Face of Telemedicine
With the emergence of the COVID-19 pandemic, providers have had to quickly pivot their telehealth offering to keep up with patient needs. In this lighting round session, 3M discusses how CMS has broaden access to Medicare, the types of telehealth options available, risk adjustments under telehealth, and what the future holds for telehealth. Watch now!
To view the slide deck, click here.

New CDI Products & Tools to Increase Productivity & Outcomes
When it comes to the future of CDI, Steve Mason Jr, CEO of Chartwise Medical Systems, presented how new technologies can provide better documentation, improve productivity, complete reimbursements, and reduce denials. To learn how, watch their lightning round session now!
To view the slide deck, click here.

The Impact of COVID-19 on ACOs – What We Know So Far
The COVID-19 pandemic has impacted many key areas of the healthcare space. Hear from Enjoin Medical Director, Dr. Brett Senor, and Executive Director of Consulting Services & Education, Jennifer Eaton, as they discuss these areas and the impact they will play on the CDI space. Watch now to learn more!
To view the slide deck, click here.

Augmenting the best minds in healthcare
Today, additional documentation integrity and earned revenue opportunities exist due to the multiple challenges across the CDI process. Hear how Iodine Software is applying a new form of machine learning to the entire documentation process — from Admission, through CDI Review & Query, Physician Response, and Final Coding & Billing — to solve documentation integrity issues and further capture earned revenue. Watch here!
To view the slide deck, click here.
Rochester Regional Health SNF CDI Program
Patient driven payment models (PDPM) is becoming more prevalent in the SNF space and Rochester Regional needed help in making the switch within their organization. Learn how they were able to accomplish this by starting their SNF CDI program by watching the Medovent lightning round session here!
To view the slide deck, click here.

AI Documentation Improvement for CDI, Coding, and Quality Metrics
During the recent ACDIS Virtual Conference Lightning Round Sessions, Nuance presenters Robert Budman, MD, CMIO, and Robin Friday, Director of Clinical Content, had the chance to speak to the current landscape of healthcare, challenges to current documentation practices, and how AI can help improve these key areas. Watch now to learn more!
To view the slide deck, click here.

Truman Medical Centers: A Success Story
Truman Medical Center, located in Kansas City, MO, had challenges within it’s clinical documentation processes. Learn how they were able to overcome these challenges and accomplish their goals of increased accuracy/completeness of their documentation, alignment and communication between coders and CDI specialists through an integrated platform, and enable bi-directional CDI queries through EMR integration by watching this Optum360 Lightning Round session now.
To view the slide deck, click here.

Second Level Reviews: Two Heads are Better Than One
Second level chart reviews add tremendous value to the CDI process for healthcare organizations. Watch this lighting round session by UASI to learn the Keys to an Efficient and Effective Second Level Review (SLR) Process, Return on Investment (ROI) case study examples to show value of the Second-Level Review (SLR) process, and much more today. Watch now!
To view the slide deck, click here.