ACDIS Regulatory Committee (2023-2024): Statement of Work

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Purpose and Terms of Service

Objective

The Regulatory Committee of the Association of Clinical Documentation Integrity Specialists (ACDIS) provides collective leadership, expertise, and guidance for the ACDIS membership and CDI profession in the sphere of government regulation and public policy. Through proactive participation in regulatory processes and consistent and aggressive advocacy, Regulatory Committee members advance the CDI profession toward better coding and clinical accuracy.

Essential Responsibilities

Activities of the ACDIS Regulatory Committee may include, but are not limited to:
- Develop and promote new and revised ICD-10-CM/PCS codes within the processes of the ICD Coordination & Maintenance Committee.
- Develop and promote changes to the ICD-10-CM/PCS code severity levels, DRG reassignments, and other matters within the Centers for Medicare and Medicaid Services’ (CMS) Inpatient Prospective Payment System (IPPS) rule making process.
- Provide guidance and representation for ACDIS and its members via public commentary on proposed codes, rules, and regulations.
- Build relationships between ACDIS, regulatory bodies, and other pertinent stakeholders.
- Draft background statements and position papers regarding regulatory initiatives that impact CDI strategies and operations.
- Maintain an active presence on the Regulatory Committee Insight page of the ACDIS website.
- Participate in subcommittee projects and special projects as needed.

Code of Professional Conduct

Regulatory committee members are expected to exercise professionalism, diplomacy, and discretion when conducting all committee work. Professionally, committee members should...
hold themselves to the guiding principles of the ACDIS Code of Ethics. Though your private life is private, do note that your public social media posts and public presences do reflect on ACDIS and its committees. If they are found to not represent the mission of the association/this committee, you may be asked to step down from service.

When topics of discussion arise on which the committee members disagree, members are expected to treat one another with respect and dignity. Committee members should leave their personal biases at the door and bring an open mind to discussions.

If a committee member is assigned a task which they are either unable to complete or do not feel comfortable completing, they should contact the committee coordinator or committee chair immediately to ensure the work is covered.

**Committee Composition**

The event committee will consist of roughly 18 members, including:

- Volunteers from the previous year’s committee to ensure continuity of practice and oversight
- A group of individuals with diverse backgrounds who broadly reflect the composition of the ACDIS membership and the CDI profession at large and who have been ACDIS members for one year prior to and during their term of service
  - New membership will be considered with the prerogative to maintain a balance between clinical, coding, and quality backgrounds, in order to encompass the wide range of CDI activities in all clinical settings and populations
- One ACDIS national staff member as committee coordinator to facilitate meetings (i.e., set up the conference calls), record and distribute meeting recordings, set meeting agendas, and follow up on the committee’s progress on various tasks as assigned between meetings
- One ACDIS national staff member to work with the volunteer members
- One or more members of the Regulatory Committee as a committee chair(s) to help lead meetings and decide on sub-committee assignments

All ACDIS members in good standing may apply to serve on the committee. For additional information, please contact Jess Fluegel at jfluegel@acdis.org.

**Term Duration and Prerogatives**

A call for volunteers to join the Regulatory Committee will be issued in June of each year, to be appointed by the end of July by the committee chair(s) in congress with the current committee membership. All regulatory committee members will commit to serve for two years, after which they can volunteer for an additional year (for up to two additional years). Reappointment decisions will be rendered based on editorial needs, the given committee member’s past contributions, and their continued desire to serve.

Members must commit to attend 70% (or 7 out of 10) of the monthly meetings scheduled during the committee year and actively contribute to the work of the group. Additional meetings of the
committee as a whole or in smaller work groups may occur as needed. These subgroup meetings will not be counted within the monthly meeting total, but members are encouraged to participate as much as possible.

Nominations for the upcoming year’s committee chair will be taken in June, with the current committee members to vote by consensus in July. Depending on availability, nominees for chair should be an active member of the committee for at least a year prior to nomination. Chairmanship will pass to the newly-elected chair on August 1 of the committee year. Voting methodology (verbal, electronic, show of hands) will be at the discretion of the Chair. In the event of a dispute over the count, votes will be tabulated via e-mail. In the event of a tie, the Immediate Past Chair will act as tie-breaker.

Subcommittee chair appointments are made by the chair of the Regulatory Committee in August; members willing to serve in these roles are encouraged to volunteer.

Those needing to step down from volunteer duties due to a change in position, family obligations, or other matter may do so at any time but should provide at least 30-day advance notice to the coordinator to maintain continuity of the group and to allow a replacement volunteer to be identified.

Any volunteer who does not fulfill the expectations of the committee and does not communicate with ACDIS administration in a timely manner may be asked to step aside to allow a new volunteer to be chosen to maintain the continuity of the work.

In return for their important work, active committee members will receive the following benefits for the duration of their service:

- Public recognition on the ACDIS site’s [Boards and Committees](#) page, as well as attribution in published articles and materials
- Discounted and/or complimentary access to products such as ACDIS books or webinars at the discretion of the coordinator and ACDIS administration
  - Requests for such discounts should be made to the committee coordinator via email

**Scope of Work and Process**

The Regulatory committee will meet on an ongoing basis online to discuss and follow up on general tasks and subcommittee efforts in regulatory processes, with the exception of an in-person session at the ACDIS national conference. While other tasks may be assigned as needed, the following tasks encapsulate the committee membership work as well as the subcommittee work expected in a given committee year. All committee members are expected to attend general committee meetings as scheduled and participate as needed separate from subcommittee meeting attendance.

**General Committee Membership**

Committee members will review previous year’s efforts to identify growth opportunities for regulatory advocacy and guidance.

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During regular meetings, committee members will bring forward discussion of needed regulatory efforts to the team. The group will then assign responsibility to individual committee members or to relevant subcommittees when further research or action is needed.

Representation from coding, CDI, and physician backgrounds ideally should be in each subcommittee.

**IPPS Subcommittee Membership**

ACDIS administration will provide subcommittee members with documents of previous year’s efforts as needed.

IPPS subcommittee members will review the proposed rule and make any recommendations on the proposal prior to the final rule. Furthermore, the subcommittee will draft letters to AHRQ, NQF, and/or the CMS quality group as needed regarding their use of coded data in PSIs, risk adjustment, and other hospital value-based programs in coordination with either the full Regulatory Committee or as a joint project with the quality committee.

**Coding Subcommittee Efforts**

ACDIS administration will provide subcommittee members with documents of previous year’s efforts as needed.

Coding subcommittee members will identify opportunities to add, revise or omit codes to better support CDI efforts. The need for new or revised codes may be raised by ACDIS members at large through communication with ACDIS or committee members or may be identified through participation in ICD-10-CM/PCS Coordination and Maintenance meetings. This committee may also identify opportunities to seek clarification from the AHA Coding Clinic on how codes should be applied.

**Quality Subcommittee Efforts**

ACDIS administration will provide subcommittee members with documents of previous year’s efforts as needed.

Quality subcommittee members will maintain the current quality map through the monitoring of Federal Register, Quality Net, and AHRQ Patient Safety Indicators. They will also make at least yearly considerations for expansion of the quality map.

Furthermore, the subcommittee will draft letters to AHRQ, NQF, and/or the CMS quality group as needed regarding their use of coded data in PSIs, risk adjustment, and other hospital value-based programs in coordination with either the full Regulatory Committee or as a joint project with the IPPS committee.

Please direct all feedback to ACDIS Editor Jess Fluegel at jfluegel@acdis.org.