2020 Session Suggestions

**Track 1: Clinical & Coding**

***Note: Sessions in this category should focus on where clinical criteria and coding regulations meet and should be appropriate for both coding and clinical backgrounds. Basic sessions should be appropriate for those brand new to the profession. Advanced sessions should offer insightful ways to re-examine critical record review opportunities. ACDIS particularly welcomes coding/CDI collaboration stories and coding-focused sessions.***

Proposed breakout sessions:

* *Coding Clinic* and *Official Coding Guidelines* updates
	+ Includes, Excludes notes and what to look for
	+ Principal and secondary diagnoses definitions and case studies
* Physician/clinically driven sessions on pathophysiology and diagnostic criteria
	+ Sepsis
	+ Malnutrition
	+ Respiratory failure
	+ Cancer pathophysiology, metastatic sites
	+ Heart disease (MIs)
	+ Trauma
	+ Altered mental status
	+ Kidney diseases
	+ Unusual, rare, complex clinical conditions
	+ Surgical procedures (CDI/coder with surgeon co-presenters)
* ICD-10-CM/PCS related concerns (2020 code set changes)
	+ How to use the ICD-10-CM/PCS books
* MS-DRG Basics
	+ What impacts a DRG and moves from medical to surgical
	+ How to use the *DRG Expert* manual
* APR-DRGs
	+ Diagnoses that affect SOI/ROM but not reimbursement
	+ A deep dive into the methodology beyond the basics
	+ APR-DRGs related to procedures
* Coding in the outpatient world
	+ Hierarchical Condition Categories (how to leverage on the inpatient side)
	+ E/M
	+ CPT 101
	+ HCPCS
* CDI and concurrent coding

**Track 2: Management & Professional development**

***Note: Sessions in this category should focus on management and leadership skills training and functional activities related to the advancement of CDI program efforts. Basic sessions should be appropriate to those who may be new to the management role or are interested in learning how to advance their careers/programs. Advanced sessions should be geared to those with multiple years’ experience in CDI management.***

Proposed breakout sessions:

* Principles of effective leadership and department management
* Managing CDI staff
	+ CDI training and orientation
	+ Productivity expectations
	+ Rewards for high performers, managing underperformers
	+ Career ladders and avenues of professional growth
	+ Development of specialized CDI roles
	+ Remote CDI
* Engaging physicians
	+ Initial buy-in and education, ongoing training
	+ Tips for working confidently and effectively with providers
	+ Educating residents and medical students in documentation
	+ Physician advisor specific sessions – by physician advisors for physician advisors
	+ Leveraging the electronic health record to engage physicians
* Metrics
	+ Individual CDI versus program/department
	+ Auditing staff performance for education and improvement opportunities
	+ Leveraging data for physician engagement
	+ Data mining for return on investment and administrative discussions (Explanation of CDI metrics to watch and why, for c-suite, physician advisor, and director-level attendees)
	+ Next level of CDI metrics beyond CMI and CC/MCC capture
	+ Metrics in managing denials across payer types
* Managing CDI in a regional/multi-hospital system

**Track 3: Regulatory & Quality Initiatives**

***Note: Sessions in this category should focus on government-related payment or regulatory shifts and trends in quality enforcement and reporting methods. Basic sessions in this category should be geared toward those with experience in CDI but who are new to quality and payment concerns. Advanced sessions should be geared toward those who have been working on regulatory/quality issues for some time but need fresh ideas for program enhancement.***

Proposed breakout sessions:

* IPPS and CMS regulations
	+ Payment calculations and how the IPPS works
	+ MS-DRG shifts on the horizon
* Medicare Advantage/HCCs/RAF and medical record review strategies
* MACRA and physician payment reforms
* CDI and compliance
	+ Promoting professionalism: CDI role, compliance, ethics
	+ Policies and procedure development
		- Escalation policies
		- CDI/coding reconciliation processes
	+ Query etiquette
		- How to handle unanswered queries
		- Review of query practice progression and industry guidance/ ACDIS & AHIMA Query Practice Brief
* Recovery Auditor and up-front denials prevention (What does the RA program look like in 2020? What will it look like in 2021?)
	+ Denials deep dive/how to write an appeal letter
	+ Sepsis denials
* Patient Safety Indicators (PSI), PSI 90 nuances and updates
* Hospital Acquired Conditions, Hospital Acquired Infections, Present on Admission indicators
	+ Potentially preventable complications/admissions
* Partnering with departments
	+ Collaborative efforts between quality, revenue cycle, case management, utilization review
	+ Bigger picture: Understanding how CDI efforts assists with utilization review in 2 midnight rule and medical necessity reviews
	+ Incorporating core measures (i.e., CMS Quality Measures) into CDI review
* Hospital Value Based Purchasing and the role of CDI professionals
	+ Hospital Readmission Reduction Program
* Alternative Payment Methods/bundled payment initiatives and how CDI can help
	+ Total knee replacements
* Mortality/retrospective reviews
* Accountable Care Organizations
* A review of publicly available scorecards and how to use them: Healthgrades, Leapfrog, Hospital Compare, etc.

**Track 4: Idea Laboratory**

***Note: Sessions in this category should look to break the traditional inpatient CDI model and offer innovative approaches to advance the profession.***

***These sessions will be shorter, 25 minutes long with 5 minutes of QA and speakers may be asked to work collaboratively with other session submissions of similar topics.***

***Basic sessions within this category should assume some level of advanced CDI knowledge while being able to address the core definitions of their topic areas. Advanced sessions may delve into special system-wide research which illustrates CDI program’s unique ability to alter outcomes or offer attendees insight into cutting edge technology or program opportunities.***

***We welcome panel discussions that reach across facility and department silos, however, only two speakers will receive complimentary admission to the conference.***

***Vendor/consultants wishing to present on technology concerns should endeavor to ensure their session speaks to universal educational concerns and not the specific elements of a particular product or service.***

* CDI research projects or findings
* CDI and revenue cycle/revenue integrity
* Clinical validity
	+ Advanced chart review techniques, including interpreting subtle clinical indicators, lab values, etc.
	+ Dealing with unsupported diagnoses in the medical record
* Technology
	+ Improving EHR CDI/physician documentation functionality
	+ The problem with the problem list
	+ Note bloat and copy/paste
	+ Working with vendors/internal technology staff
	+ Pros/cons of computer assisted coding and natural language processing, etc.
	+ Remote CDI: leveraging technology, managing staff, engaging physicians

**Track 5: Beyond Hospital Walls**

***Note: Sessions in this track should offer innovative and unique case studies regarding tools and best practices for expanding CDI efforts beyond traditional short-stay acute care facilities and into alternative settings and non-traditional hospital units/focus areas. Basic sessions will provide a blue print for expanding into a give setting while advanced sessions should delve more deeply into the nuances and metrics of managing an effective program within that setting.***

* Physician practice settings
* Ambulatory surgical centers
* Children’s hospitals/pediatric units
* CDI in skilled nursing facilities and changes in reimbursement
* Long Term Acute Care (LTAC)
* Inpatient rehabilitation
* Inpatient psychiatry
* Critical access/rural community hospitals
* CDI in maternity, pregnancy, post-partum, NICU, OB/GYN
* CDI in the emergency department
* CDI for specialty services (radiology, ortho, cardio)

**Track 6: TBD**