Effectively managing a CDI department is difficult without software and analytical support. This fact is reflected in the number of businesses, consulting firms, and vendor analytics available for that purpose. A 2015 report from Black Book, prior to the implementation of ICD-10, indicated that 24% of hospitals outsourced clinical documentation audit, review, and programming. By the third quarter of 2015, that number had nearly tripled, with 71% of hospitals planning on engaging a CDI services partner to help them adapt to the new code set (Black Book Market Research LLC, 2014). With the advent of healthcare pay-for-performance efforts, an increased rate of denials, and a wave of new technology and supported products, these numbers are expected to increase.

For the CDI manager, director, and/or senior leadership, the decision to engage a vendor can be daunting. CDI managers may need vendors for a variety of reasons, such as providing:

- Automated query templates
- Programmatic tracking and analytics
- Automated workflow prioritization
- Consulting staff
- Provider education
- Assessments of policies and practices

How does one navigate through the maze of products and services on offer? How do you determine what will help you achieve success, and what will best compliment your organization’s unique culture and compliance expectations?

One size does not fit all. Once a contract is signed, it is difficult to make changes if you discover your organization’s CDI needs are not being met, or the purchased services do not fit the organization’s size or style. Just as you would when buying a new vehicle, you must perform a self-assessment and determine exactly what you need before making a decision. Do you want a shiny red convertible that drives fast and can change lanes quickly? Or are you looking for a mini-van that can carry several passengers at the same time? Start the process by surveying the car lot and understanding your options.
Find the right vendor for your organization: Best practices for getting started

**Types of services**

To achieve the CDI program’s stated goal and spend resources wisely, it’s necessary to identify the products or services specific to that goal. Are you looking for educational support? Do you wish to purchase consulting services? Do you wish to purchase a CDI management system? If you are looking for a system, what do you want it to offer? Do you want something stand-alone for the CDI department or integrated with the coding department? Identify your end goal—why do you wish to make this change?

Depending on the program’s goals and needs, CDI products and services can be purchased stand-alone or in conjunction with other products. For example, some vendors provide education on CDI principles together with new CDI software for analytic interpretations, communication, and tracking in a package that also includes natural language processing (NLP) and computer-assisted coding (CAC).

**Education**

A number of vendors offer formal CDI training opportunities. Many provide this training in conjunction with CDI program software and consultation services. There are also entities who only provide education without any ongoing consultation or relationship with an organization. These offerings include live programs (on-site for staff, or open to the public), eLearning options, and self-study.

Vendors often perform a facility assessment to prioritize and customize education, or they can provide generic education for lower cost. The education can address several departments, including HIM/coding, CDI, providers/physicians, and other staff. Educational agendas usually include a review of code assignment, reimbursement methodologies, opportunities for CDI impact, and compliance considerations.

**Consulting services**

Many companies offer CDI consulting services. Typically, a CDI consultation will include a facility assessment or audit of your records to identify missed opportunities or weaknesses within your program. This initial audit is presented to the organization with a learning plan, as well as suggested policies, staff training, and process improvements. Consultation services can provide monthly analytics, allowing identification of further needs and the ability to measure improvement (usually for an annual fee). Training and software packages can be incorporated to allow for changes in program design and analytical interpretation.
Advice to consider

When reviewing a consultant’s initial facility assessment, do not take the quoted statistics at face value. Examine the report, thoughtfully considering your patient population, the time period reviewed (many organizations demonstrate seasonal variation in patient population), and any trends that might influence the data. Ask what types of facilities your organization is being compared with to ensure an apples-to-apples comparison. Question analyses to ensure they accurately represent your facility, and ensure you understand the context of the data presented.

For example, if a consulting firm identifies missed opportunities for MCC capture or SOI in your orthopedic population, examine the population and ask for specific documentation examples of these opportunities. Traditionally, patients requiring joint replacements and spinal fusions do not present with multiple comorbidities, as these procedures are usually elective and not recommended for high-risk patients. Or, if an analysis highlights low incidence of stroke versus TIA, compare that data to what you know about your patient population. Do most of your patients with CVAs require transport from the ED to a stroke center?

CDI program software

CDI software packages typically aim to meet two goals:

1. Efficiency in CDI specialist productivity, accomplished by:
   a. Automated workflows
   b. Built-in query templates
   c. Physician query management
   d. Integration with existing documentation platforms
   e. Reporting metrics or analytical support

2. Revenue enhancement due to more productive automated processes, management of work lists, and analytics. This software is often directed at both outpatient and inpatient populations and frequently provides integrated resources such as an encoder/grouper and coding references.

CDI programs may incorporate tools for CAC, NLP, and work list prioritization. Many electronic health record (EHR) vendors now also include CDI modules within their packages.
CAC

CAC is defined as the use of computer software to generate medical diagnosis and procedure codes from documentation. A professional coder then reviews, verifies, and validates the codes to be submitted and reported. CDI professionals often use CAC platforms to identify potential query opportunities and a working diagnosis.

Several companies offer CAC alone or in combination with other program software, including electronic query platforms, CDI process tracking tools, and analytics.

NLP

NLP was introduced in the conceptual stage many decades ago. It is a form of artificial intelligence (AI) that assists in converting human language into ICD code assignment. A number of CAC products incorporate NLP concepts. These systems can vary in their accuracy depending on the type of NLP applied and the ability of the user to further “train” the system.

As with CAC, NLP products are offered alone or in combination with other program software.

Artificial intelligence (AI)

AI combines machine learning and NLP to spur computer comprehension of text. It boosts CDI productivity by allowing for additional speed and precision in CDI record review. Information pulled from the EHR by the AI engine, including diagnostics and clinical data, can help a CDI specialist determine which cases likely will provide documentation improvement opportunities and feed those cases to a CDI work list.

Physician-directed programs

These products provide analytics directed toward physicians, allowing them to be scored based on their documentation. Physician-directed programs supply a way to gauge and report physician performance, allowing users to identify educational needs, opportunities for improvement, and benchmarking measures such as case mix, observed-to-expected rates, and quality scores.

Recruiting and staffing services

Recruiting and staffing agencies help supplement CDI staff, either through permanent hires or contract employees. Organizations can draw on these services
Find the right vendor for your organization: Best practices for getting started

Advice to consider

When contracting with a staffing agency, be aware of the credentials/experience levels of the staff assigned to your organization. These staff should possess the same education, experience, and credentials you require for your own employees. Know the details of the staffing arrangements. Will you be working with the same staff consistently, or will the company rotate individuals in and out as supply demands? Does the agency’s staff receive continuing educational support? How are they audited for accuracy, missed opportunities, and productivity? Are you able to communicate directly with individuals as needed? Can you request that a specific individual not work for your account?

In times of need (e.g., high census, employee leave) or use them as a long-term staffing solution. Remote and/or on-site staff may be engaged depending on the contract’s parameters.

Be an educated shopper: Defining a process

Once the goal and required services are identified, identify additional teams/departments who would benefit from this purchase. Do not commit to a purchase within a silo.

If the CDI program needs an educational platform (such as online learning) and on-site education, identify everyone who would benefit from participation. This might include the quality department, coding, case managers and utilization review, providers, or revenue cycle. Demonstrate the greatest impact possible for the purchase and identify how the education can benefit more than just CDI. Involve those who will use the product on a daily basis in the discussion and decision-making.

For example, if the goal is an automated CDI software system to help coordinate CDI reviews, query practice, tracking, and analytics, then brainstorm how other users of this system may benefit. In this case, coding staff can view CDI notations, working DRGs, and concurrent queries; case managers can view working DRGs and identified geometric length of stay; and quality staff can be notified of cases that will affect quality measures.

Other departments to consider include:

- Information technology: They ensure integration with present systems
- Compliance: They ensure vendor operations complement your organization’s culture and compliance policies
Find the right vendor for your organization: Best practices for getting started

- Providers: Ultimately, CDI is the link between physician documentation and coding, so make sure any systems put in place recognize the physicians’ workflow, and include a physician advisor or physician champion in the process.

Include a stakeholder who is part of the final decision-making process, too: a member of senior management, the chief medical officer, etc. A team member with an overall understanding of organizational goals and budget provides a strong voice in support of the group recommendations.

The SBAR method

SBAR (Situation, Background, Assessment, Recommendation) is a good process to use when deciding whether to adopt a vendor’s services. Developed in the nuclear submarines of the U.S. Navy, SBAR is now a common clinical communication method in healthcare. Once recommendations are in place, it can be used as a ready-made tool for prompt communication to the facility’s decision-makers. Following is an example of SBAR in action.

Situation

The first step as a team is to understand the situation. Define your present systems and the need you must fulfill. For example:

The group is tasked with identifying a new integrative system to support CDI function and communication within the organization. The system would provide automated query, program analytical support, and interdepartmental communication related to CDI function.

Background

Once the team understands its purpose, the next step is to take account of the background. What are the important issues or context related to this decision? Why is there a need to solve this issue? What contributing factors should be considered? For example:

The CDI department is now in its third year. Record reviews and queries are performed by hand. CDI notes and queries are not easily accessible to all team members. Providers are not able to view queries within the EHR and thus often overlook them.

There is no uniformity in how CDI staff members prioritize their workdays, develop their work lists, identify query needs, or write queries.

Every CDI specialist communicates with other departments differently, with no standardization. There is no formal DRG reconciliation process to handle identified mismatches.
CDI metrics, such as query rates, response rates, and types of queries being applied, cannot easily be assessed. The data must be compiled by hand, a time-consuming process. Thus, it is very difficult to employ analytics to monitor CDI function, provider engagement, and learning needs.

Assessment

The process of assessment includes identifying the nature of the problem and how it can be remedied. According to David Fields, author of The Executive’s Guide to Consultants, before hiring a consultant, you should first identify your desired outcomes and how those results will benefit the organization—a step executives often skip. Fields advises writing your objectives down, then spelling out, both quantitatively and qualitatively, how you will know when each one is met (Schachter, 2017).

When using this process to help choose a vendor or product, use the assessment step to identify what exactly is needed. What is the organization’s wish list? This wish list should also identify the “must-haves” as opposed to items that are desirable (but not critical). Your assessment might also identify a specific budget range. For example:

The group has determined the following needs that MUST be met when contracting for vendor products and services:

1. A CDI system that is integrated within the existing IT platforms related to workflow of other departments
   - Will provide automated messaging and access to departments such as quality, case management, and coding
   - Will provide automated query assignment to providers, with EHR integration
2. A CDI system that will assist in productivity and effective CDI function
   - Will provide for consistency in CDI function encompassing:
     - CDI templates
     - Work list prioritization tools
     - Metrics and analysis

The group has identified the following items that are desirable:

1. CAC capabilities
2. Formalized education related to CDI function and process as well as use of the new platform
Find the right vendor for your organization: Best practices for getting started

3. Post-implementation support to further customize the product
4. Post-implementation facility assessment/audit
5. Continued support and guidance related to interpretation of analytics and program growth and development

This step requires the largest time commitment. Schedule vendor demonstrations to view how their product is used. Each member of the team should evaluate the products, identifying pros and cons from the member’s point of view. For example:

- The team member representing the IT department would focus on how a new piece of software could be integrated into present systems, anticipated roadblocks, and the level of vendor support during implementation.
- The team member from the coding department should evaluate how the addition of a new system would affect the coding team’s workflow.
- The physician advisor should evaluate query templates, how providers would be notified of pending queries, and the process of query response and workflow.
- The CDI staff should evaluate workflows and communication issues, as well as availability of resources and application of best practices.
- Managers and compliance teams should evaluate new processes, communications, and query templates to ensure regulatory compliance and support of the organization’s overall mission.

Recommendation

Recommending an action to take is the most difficult step in the SBAR process. This decision may include recommending a single company or vendor that meets all the organization’s identified needs, or a combination of vendors to handle various aspects of those needs. Communicate these recommendations to the decision-makers to obtain approval of the plan.

Evaluate each potential vendor by establishing a list of pros and cons related to the services and products it offers as compared to the list of needs identified in the assessment step. The recommendation should review these evaluations and come to a conclusion about which vendor (or vendors) would be the best option.
Find the right vendor for your organization: Best practices for getting started

Advice to consider

As Dr. Trey La Charité notes in a CDI Journal article: “The CDI specialist needs to closely scrutinize the promises put forth by hospital product vendors. Blind belief in the proclaimed benefits of any new product may lead to disappointment and significant future liabilities. My suggestion is to conduct a critical and thorough review prior to its purchase and implementation to eliminate unrealistic expectations” (La Charité, 2014).

The SBAR formula offers a specific method of organizing your thought process and evaluations. Decision-makers can use the information gained through the method to weigh costs and benefits and take into account the perspectives of users throughout the organization.

Evaluating a vendor

After conducting your SBAR process and obtaining a budget number with which to work, the next step is to interview the vendors you've identified as suitable for your list of needs. The term “interview” is used intentionally. Be thoughtful and proactive: Once the facility signs on with a company, especially if it is providing ongoing support, that company becomes part of the team. Ensure, just as you would with a new hire, that the company fits with the culture of your organization, maintains the same values, and supports your existing program.

With any interview, one always asks for references, and a vendor interview should be no different. Ask potential vendors to provide a list of clients you can contact. If possible, send a few individuals to conduct a site visit at an organization that uses the product or service under consideration. Arrive with questions in hand or a checklist to assess the product, the vendor, and the return on investment. Ask:

- What is working?
- What is not working?
- What support did you receive?
- How did the system integrate with your existing systems?
Advice to consider

Donald Butler writes on ACDIS’ CDI Blog: “Of course, understanding whether your program is compatible with the philosophy/goals of the consultant also depends on whether you and your program staff have a solid understanding of trends in the CDI profession. Your CDI team and manager must possess a working knowledge of commonly accepted best practices and overall trends of CDI practice from a national perspective. Frequently, facility leaders hire a firm to provide their facility with that level of insight. Of course, consultants travel the country working with diverse program types and sizes and can provide such overarching global perspective. However, comparing their perspective against your own awareness can foster interesting dialogues regarding program goals and parameters. From that position of self- and industry-knowledge, you (as the hiring agent) can consciously develop your own thoughts and positions and compare them against the particular consulting firm’s vision” (Butler, 2012).

- How did the vendor adjust to your facility’s needs?
- Did the vendor exhibit an understanding of your goals and desired milestones, or did it simply sign off on the conditions of the contract?

There are many resources that can assist in the process of vendor evaluation. Look within your network of peers. ACDIS provides a number of resources to help connect you with others, including the ACDIS Forum, local chapter meetings, and national conferences. There is nothing more valuable than speaking to end users and receiving an assessment of their experience and the vendor’s performance.

A myriad of firms can research and evaluate vendors related to healthcare products and analytics, too. They complete industry market research, issue customer surveys, and provide vendor side-by-side comparisons and report cards to assist in your decision-making. These services may have fees attached.

Reviewing the contract/transitioning to new processes

Each organization has an identified process for reviewing contracts and contract requirements. As the principal user of the services the vendor will provide, make sure to obtain a complete understanding of the responsibilities of your organization and those of the vendor. Ensure that all due dates of deliverables on both your and the vendor’s behalf are clearly outlined, and understand how the contract handles issues of concern. For example:

- If the services are related to consulting, must your organization follow all the steps outlined by the consulting firm to meet a guaranteed return on investment?
Find the right vendor for your organization: Best practices for getting started

- If the services are related to staffing, can your organization identify who will be able to work your accounts and the required qualifications or credentials for those staff members? Will there be consistency among the individuals who fill the positions?

- If the services are related to software, will there be 24/7 assistance available for issues related to system integration? Who will cover any increased costs related to the integration? Will there be on-site support at launch? Who will be responsible for educating staff on the new processes or products?

Clarifying any anticipated issues prior to signing the contract leads to a more efficient launch of a new product or service. No detail should be assumed.

CDI staff should be part of the process from the beginning. Their buy-in is imperative to the success of any program or process changes. They should be informed of why the new processes or products are being introduced, what to expect in terms of vendor support, and what their responsibilities will be during the implementation.

Conclusion

The CDI industry depends on consultants and vendors to maximize value and improve organizational performance. But don’t try to fit a square peg into a round hole. Before you sign a contract, ask for adaptations of a vendor’s offerings to better meet your CDI program’s specific needs. The vendor should be comfortable having its assertions challenged related to facility assessments and audits. Do not feel obligated to follow all of a vendor’s advice if it does not fit your organization.

Your organization is unique. As you begin the process of contracting for consulting services, staffing support, or software or technology support, ensure that your mission and goals are upheld.

SBAR is just one possible method to conduct this process; there are others as well. However, SBAR has the advantage of ensuring that vendors are evaluated openly and objectively. You don’t want to learn after signing a contract that a vendor cannot meet your needs or does not match your culture of compliance.
Find the right vendor for your organization: Best practices for getting started

The most important step in this process is the assessment, which should be performed with due diligence.

Healthcare documentation and reimbursement is ever-changing, with new products and services appearing every day. At some point, you will likely be called on to direct or help with the process of selecting a vendor or product to assist with your department’s needs. When you do, your decision must take into account precisely what you need and how the vendor or product under consideration can provide it.

Make a conscious effort throughout this process to ensure that the product or vendor you choose aligns with your program’s mission and goals. Doing so will provide meaningful data and vendor satisfaction.

References


Acknowledgments

ACDIS would like to thank CDI Education Director Laurie Prescott for principal authorship of this white paper.

WHAT IS AN ACDIS WHITE PAPER?

An ACDIS white paper discusses CDI best practice, advances new ideas, increases knowledge, or offers administrative simplification. It can be written by an ACDIS Advisory Board member or a smaller subset of the board, or written by external sources subject to board approval. It is less formal than a position paper.