Healthcare

3 Strategies for Doing More with Less in CDI

As a fallout of the COVID pandemic, we see CDI staff being pulled to provide care to patients or furloughed as a cost-containment measure. Even as vaccines reduce those affected by COVID, CDI teams face resource pressures and are being asked to do more with less to create value for the organization. To achieve quality and financial objectives with fewer resources, CDI teams must utilize the enabling technologies. Here are three strategies to use in CDI that take advantage of the benefits brought from AI-enabled technology and encounter prioritization.

Karen Simonenko
Posted February 1, 2021
Many CDI teams saw their personnel pulled to the bedside or furloughed in the pandemic’s early months. With the pandemic worsening throughout the US, healthcare organizations find themselves needing to cut costs and find revenue. CDI staffing levels will continue to be lower than before the pandemic, and teams will be asked to do more with less. AI-powered enabling technology can significantly impact the organization’s quality initiatives and bottom line.

To achieve quality and financial objectives, even with fewer resources, here are three strategies to employ in CDI:

- **Active management of patient length of stay**

You may or may not be feeling the pinch at your location; this interactive [NY Times webpage](https://www.nytimes.com) will tell you everything you need to know about capacity issues around the country. Actively managing your patient length of stay enables you to forecast bed availability for all patients, not just those with COVID. If your [CDI workflow tool](https://example.com) contains the working DRG, CDI can assist case management colleagues with timely discharge based on DRG-approved LOS. Utilizing the working DRG, case managers can provide lists of who should go home and confer with the providers to make sure the documentation and DRG reflect the most accurate patient story.
The final key is this information needs to be in the EHR to make it easy for other care team members to use it.

- **Implement multiple reviews through discharge**

While patients are staying longer due to COVID treatments, implementing multiple reviews through discharge across all cases is a best practice to ensure you are identifying every reimbursable opportunity with accurate documentation. But with fewer resources in CDI, how can you possibly add more reviews to the workload? AI-powered encounter prioritization is the tool to use. AI-powered encounter prioritization brings your CDI team members only the cases that allow the opportunity to move the financial or quality needle or cases with new information requiring a re-review. This means you won’t be focusing resources on cases that have no impact on the reimbursement or patient story, freeing them up for new cases and re-reviews that will.

- **Expansion into reviewing all Payors**

Decreased patient volume creates the opportunity to review all payors and create consistency in the CDI process regardless of payer type. Commercial payers may reimburse at a higher rate than Medicare, but you need a way to identify which cases are going to drive the most improvement. Using AI-powered encounter prioritization means that the technology goes beyond rules-based criteria and uses machine learning to identify cases with the greatest opportunity regardless of the payor.

Doing more with less in CDI means utilizing enabling technology to help you identify and manage the cases that have the most financial impact and protect you from denials. In the coming weeks, we’ll continue to discuss the functionality needed to make the most of the situation we find ourselves. As we weather the pandemic together, Nuance will continue to deliver technologies that make the most of the time you have with patients and take advantage of the digital innovation in healthcare.

The Future is Now is a blog series by Karen Simonenko, Vice President and General Manager of Nuance’s Clinical Quality and Revenue Integrity business. In this series, Karen shares her problem-solving viewpoints to help address some of healthcare’s biggest challenges – underscoring that at the heart of every healthcare organization are the patients whose lives depend on quality care – today, tomorrow, and always.
### More Information

**Optimize your CDI program**

Maximize resources using AI and in-workflow intelligence from the first word to the last code.

Learn more

### About Karen Simonenko

Karen Simonenko is the Vice President and General Manager of Nuance Healthcare’s Clinical Quality and Revenue Integrity solutions business. Karen joined Nuance in 2019 with more than 30 years of experience in the Healthcare industry. Prior to Nuance, she was an executive consultant guiding executives in addressing and resolving critical project and client issues. She attained the knowledge and ability to coach others due to her extensive experience in management of product strategy, business operations, and client services while working at companies such as Meridian Medical Management as Executive Vice President, GE Healthcare as Vice President and IDX Systems Corporation. Karen attended the University of Vermont’s MBA program and holds her B.S. in Computer Information Systems from DeVry Institute of Technology.

View all posts by Karen Simonenko