

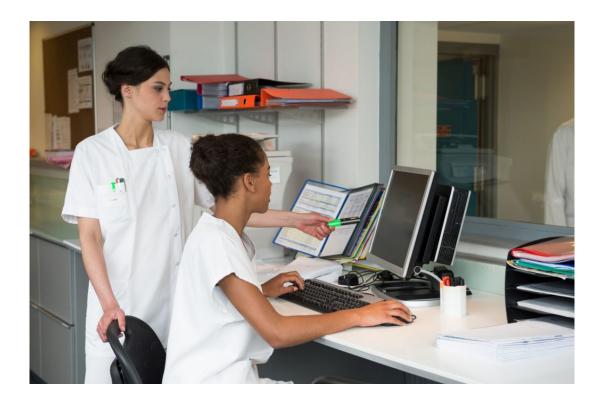


Healthcare AI, Clinical documentation integrity

Six ways your CDI technology should be working with you

Nuance Communications

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In this time of belt-tightening, you need your CDI team focused on the cases with the highest potential to impact the patient story and your organization's bottom line. Ensure that your CDI technology is working for you and not against you by looking for these six criteria.

Al-enabled technology combines CDI's art and science to realize the patient's story entirely. In this time of increased provider burnout, it's not about asking more queries. It's about asking a query that has a higher likelihood of impacting the organization's bottom line. Ensure that your CDI technology is working for you and not against you by looking for these six criteria.

1. It speeds up your administrative duties.

If you don't use the EHR to register patients, you are most likely using a manual process to run a physical census list to determine how many admissions you have to assign. Depending on your organization, maybe you prioritize by nursing unit, then sort again on other criteria, then sort on different criteria to match the cases you have with the resources you have available.

Al-enabled encounter prioritization technology can help at this stage to significantly reduce the burden of assigning caseloads. The Al identifies which opportunities have the greatest possibility to impact the quality or financial picture based on what it is finding in the EHR. Then you can look at whom you have scheduled and assign those resources to the cases that have the potential to move the needle. Without this insight, your limited resources will spend time researching cases that may not have a quality or

financial impact.

2. It allows you to customize prioritization rules.

If you're using encounter prioritization technology, consider how the lack of customization of the ranking mechanism could force you to work in a sub-optimal way for your organization. Suppose you have specific priorities in the organization, such as better documenting present on admission (POA) conditions or identifying cases close to exceeding their Length of Stay (LOS), but the ranking logic is set in how it stacks the cases for review. You may not be able to make those cases a higher priority for your team. This limitation could cause mistrust of the technology and create more work to find the cases that match your organizational priorities.

3. It identifies where the information resides in the EHR.

Good AI identifies the clinical indicators in the patient record. Better AI pinpoints principal diagnoses, CCs, MCCs, and quality indicators and does not require you to move between systems. A system that can highlight the pertinent information in the same user interface as your worklist means that your team won't be hunting and pecking in the EHR looking for a needle in a haystack. A system that can show trends in lab results and medication can be beneficial when a CDS pairs that with their clinical knowledge to sleuth what may be happening with the patient just as they would have at the bedside.

4. It identifies which cases will benefit from re-review.

While re-review of cases is best practice, introducing new information into the EHR will make the re-review more useful. If your prioritization technology doesn't identify which open cases have further information from the last review, your CDS could be wasting time. Just because the calendar says it's time to review the case doesn't mean it'll bear fruit. You don't have to wade through the record to determine if anything has changed. Encounter prioritization that incorporates both new and open cases in the worklist assures you that the Al has found new information in the EHR that can move the quality or financial needle.

5. It helps you actively manage LOS.

As organizations look to contain costs, becoming better at managing the LOS is more critical than ever. Utilizing technology that supports CDI's collaboration with case management is vital. Especially now, as COVID cases put extreme stress on bed availability. The CDI technology you use should rank cases that are coming close or have exceeded the length of stay. Having the flexibility to push this notice through the EHR or export the information means that CDI can help facilitate the conversation between case management and the provider around discharge. If additional inpatient time is required, there will be the opportunity to capture the patient record documentation that would support medical necessity and more appropriate reimbursement.

6. It supports the culture within your CDS Team.

Every organization is different in assigning resources or the expectations they have of team members to shoulder the load. If you use a centralized staffing concept, your technology must show a mixture of facilities in that prioritized list without making the CDS pull a second list from which to work.

Maybe your culture is about shouldering the load across the team. If one CDS is overloaded and another has availability, you expect a less-assigned CDS to pitch in and help clear the backlog. If that's the case, you need a technology that shows the current caseload of team members and enables fellow CDS to be proactive in offering their assistance. Or perhaps you want your CDS focusing on only what they have been assigned. Whatever technology you choose should be able to do either, depending on you're organization's culture.

CDI technology can make it easier for your CDS or harder for your CDS. In this time of belt-tightening, you need to show how your systems and procedures are doing everything they can to keep your CDS efficient, productive, and working even smarter than they usually do. AI-enabled CDI technology is the tool that combines the art and science of CDI and sets your department up to perform at its best.

Tags: Al in healthcare

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