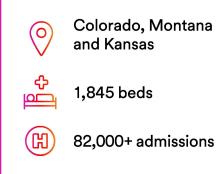


#### **Case study**

# Data-driven, physician-focused approach to CDI improvement

SCL Health, now Intermountain Healthcare

#### Peaks Region of Intermountain Healthcare<sup>\*</sup>



"We knew that we either needed to be able to validate that our plateau was true to form and that there wasn't any more opportunity ... or we were going to need to find a new strategy; another way to revitalize and boost momentum and identify what opportunity still remained for the program."

— Carrie Willmer, RN, CCDS, CDIP, CDI, director for legacy SCL Health

#### Organizational profile

Sisters of Charity of Leavenworth (SCL) Health\* has been providing care since it originated in the 1600s in France as the Daughters of Charity. These religious women were dedicated to serving the sick and poor and SCL Health continues that legacy today.

\*As of April 1, 2022, SCL Health merged with Intermountain Healthcare.

#### **3M technologies**

- 3M<sup>™</sup> 360 Encompass<sup>™</sup> System
- 3M<sup>™</sup> Performance Advisory Services and 3M<sup>™</sup> Performance Data Monitoring

### Challenge: CDI program performance and physician engagement plateau

Legacy SCL Health had strong growth and improvements in key metrics over the first seven years of centralization and growth of its clinical documentation integrity (CDI) program. However, the investments to the CDI program, technology and people resources began to plateau in 2018 through 2020. The team knew something needed to be done to continue to justify the investments and show the value of the CDI program. They needed to overcome the plateau by identifying and validating areas to focus improvement efforts. Implementing **3M<sup>™</sup> Performance Advisory Services** and **3M<sup>™</sup> Performance Data Monitoring** and growing the partnership with 3M was the first step to getting its CDI program back on track.

### Opportunity

SCL Health's CDI leadership realized they were leaving opportunities for improvement on the table. The organization lacked a way to easily collect data on all inpatient visits to surface and validate improvement opportunities where CDI could have the most impact. But just collecting data wouldn't be enough; SCL Health also needed monitoring, reporting and benchmarking to track and quantify CDI opportunities across facilities over time.

To bolster their case, the CDI leadership team had to answer these questions:

- Where is the opportunity?
- How much opportunity is out there?
- What specific cases offer the most opportunity?
- Which physicians can champion this effort?

#### Solution: Drive CDI program performance by leveraging actionable data to identify targeted opportunities

SCL Health needed a partner to provide insights to continue to show the value of the CDI program. By leveraging 3M Performance Advisory Services and 3M Performance Data Monitoring, SCL Health accessed the data monitoring, reporting and benchmarking needed to pinpoint and validate untapped CDI opportunities. SCL Health identified opportunity areas to implement internal change management, tracking and measurement efforts to ensure the improvements had the desired impact.

Using data insights, the team strategized and identified gaps and opportunities for provider and CDI specialist education. SCL Health used reports to compare physicians to peers in the organization and against national benchmarks and refocus efforts on opportunities with the highest potential ROI and engagement.

The team also leveraged focused opportunities in the prioritization functionality in the **3M™ 360 Encompass System.** 

### Plan of action: Data-driven, physician-focused approach to CDI improvement

SCL Health's CDI team started its analysis at the individual facility and care site level, as not all CDI trends occurred at all sites. In addition to this individualized view, they also looked for themes that could impact CDI across the entire organization. As CDI leadership identified trends, they began to validate the data through chart review.

After SCL Health validated the higher level trends, the next step was to dig into the service line and diagnosis related group (DRG) opportunities to surface the largest and easiest areas for improvement.

### Timeline

#### ∑ / • 2013

CDI centralization in the first year after centralization, SCL Health had a query response rate of 85 percent, an agreement rate of 86 percent and an average CDI query impact of \$875,000 per month.

### 2015

Implementation of 3M<sup>™</sup> 360 Encompass<sup>™</sup> Clinical Documentation Integrity (CDI).

## Jul

#### 2015-2017

CDI growth — over the next three years, the organization put a major emphasis on the CDI program which led to increased investments, including new technology and personnel. These investments resulted in a record high CDI query impact of \$21.5 million in 2017, roughly \$1.8 million a month. A significant increase from 2013, showing that the investments were paying off.

For example, using the trends data, orthopedic surgery was approved for an additional full time equivalent (FTE) for a nurse practitioner to support the medical expertise needed for documentation opportunities. The data demonstrated major complication or comorbidity (MCC) and complication or comorbidity (CC) capture variances on spine cases exceeded \$1.5M. In support of this surgeon's need to remain productive in the operating room and to maintain volumes, leadership approved an investment into this potential opportunity to expand resources.

### Audience identification, prioritization and implementation

After SCL Health identified its opportunities, it needed to identify its audience (hospital departments) and evaluate and prioritize who to approach in the organization. Here are few questions and examples SCL Health examined as it evaluated not only the size of the opportunity, but whether or not it was worth the effort if the audience was not ready to change:

- The general surgery group (or XYZ group) might have the largest opportunity, but will they engage if you ask them to make improvements?
- Is there stability in leadership?
- Is the leadership willing to engage?
- Is the right infrastructure in place?
- If we implement changes, does the department have the personnel or time to do it?

The ultimate success of the program for SCL Health boiled down to focusing on the most engaged audience, tailoring communication channels and approaches to that audience and supplying strong data that would resonate with the group.

Finally, SCL Health made sure it framed up why these changes were important, why CDI matters and how it came to determine the opportunity. It also gave real life examples of how the desired change could make an impact, and specifically what it needed from the team (physicians, physician assistants, medical assistants, leadership, etc.). CDI education that previously seemed random was now targeted with a clear action plan and goal in mind.

### Monitor and communicate performance and progress

As SCL Health implemented CDI changes, it knew it must be able to track progress to show the value of the program. The organization began to evaluate the effectiveness of education, track key performance indicators (KPIs), provide continued feedback and maintain visibility with this ongoing initiative.

What does success look like for SCL Health?

- Fewer queries issued
- Increased case mix index (CMI)
- Increased severity of illness (SOI)
- Increased risk of mortality (ROM) or decrease in mortality index

#### Timeline (cont.)

#### 2018-2020

CDI plateau — after the record year in 2017, the program experienced a drop in financial impact, down to \$1.4 million a month. This could be attributed to turnover in CDI leadership and a decrease in physician engagement.



#### 2020

Implementation of new technology and services — 3M Performance Advisory Services and 3M Performance Data Monitoring.



#### - 2021

36% increase in financial impact in one year.



#### - 2022

The SCL Health CDI program has 41 team members, comprised of 28 CDI specialists and 13 advanced CDI roles. Case study: Data-driven, physician-focused approach to CDI improvement

#### Results

At a single facility:

- The facility implemented vascular surgery rounding and realized SOI and ROM increases quickly. The opportunity per case dropped from \$6,800 to \$4,800, a \$2,000 improvement per patient.
- The health system identified a \$1.5 million physician specific opportunity thanks to the drill down capabilities into MCC/CC. As a result, that physician was approved for an FTE for documentation because of the amount of opportunity. This brought attention to the challenge and the time it takes physicians to do the documentation.

Across the system:

- The system realized \$1.5 million in financial improvement from the increased CMI in only four focused DRG groupings.
- Initiation of further evaluation of additional computer-assisted physician documentation (CAPD) tools.
- Five new FTEs approved for CDI program expansion and physician education.
- Invitations for CDI to participate in performance improvement projects, quality programs and data analysis are increasing across sites.

Overall, there was a **36 percent increase in financial impact** from the CDI program at SCL Health without any additional resources. The team identified the top opportunities and education they needed to bolster by effectively leveraging the tools and resources already available, ultimately proving the return on investment.

Going forward, legacy SCL Health plans to provide sustained feedback and continue to report results. This will ensure the organization is covering the right cases, asking the right questions and providing the right tools and education to the physician team to achieve the desired impact.

#### SCL Health's partnership with 3M provided:



Monitoring and reporting to track, benchmark and quantify CDI activity across a facility over time



Care site level reports



Physician level reports



Prioritization functionality



Direction on where to focus internal physician education efforts



Outcomes and progress measurement



#### Contact 3M today.

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