Galen Healthcare Solutions
Clinical Documentation Improvement (CDI) Playbook

Galen’s Clinical Documentation Improvement (CDI) program focuses on improving the quality of clinical documentation, facilitating an accurate representation of healthcare services through complete and correct ICD-10 reporting and improved Hierarchical Condition Category (HCC) scores.

Galen’s CDI services are designed to help ensure that provider clinical documentation complies with the need for increased specificity and granularity in order to receive optimal reimbursement, meet all reporting requirements and most accurately reflect the level of care provided.

Using a four-phased approach to establish and maintain a successful CDI program, Galen’s CDI specialists focus on identifying documentation practice and workflow inefficiencies and then develop a plan to rectify these, to avoid delays in coding and billing of claims.

FEDERAL FALSE CLAIMS ACT (FCA)

The FCA imposes civil liability on any person who knowingly submits, or causes the submission of, a false or fraudulent claim to the Federal government. The “knowing” standard includes acting in deliberate ignorance or reckless disregard of the truth related to the claim.

Example:
A physician submits claims to Medicare for a higher level of medical services than actually provided or that the medical record documents.

Penalties:
- Civil penalties for violating the FCA can include fines of $5,500–$11,000 per false claim
- Up to three times the amount of damages sustained by the government as a result of the false claims
- There is also a criminal FCA statute by which individuals or entities that submit false claims can face criminal penalties

ASSESSMENT PHASE

The Assessment Phase is the initial phase of the CDI Program development and is a key critical factor to assess the accuracy, specificity, and completeness of provider clinical documentation as well as to ensure that the documentation explicitly identifies all clinical findings and conditions present at the time of service.

- Assessment of documentation workflow practices
- Perform initial medical record audit of provider notes
  - Validate against submitted ICD-10 code(s) on claims
  - Identify documentation deficiencies
  - Identify existing HCC chronic conditions not captured within 12 months
- Identify opportunities and ensure accuracy and completeness of clinical documentation used for measuring and reporting physician outcomes
- Identify risks and missed opportunities due to undercoding
- Formal written strategy plan to address documentation deficiencies
- Formal meeting to review audit findings and strategy plan for client team
DESIGN PHASE

The Design Phase centers around defining a plan after the completion of the Assessment phase. In this phase, the CDI project team will determine the elements needed for a successful CDI program.

- Develop governance structure, identify team members, define role requirements, and quantify measures for success.
- Creation of written policies and procedures
- Develop and implement work plan
- Create an ongoing audit process and corrective action plans
- Develop documentation query process
- Configure EHR structured fields, alerts and reminders that can contribute to ease and accuracy of documentation
- Create provider education plan
- Design CDI curriculum

EDUCATION & IMPLEMENTATION PHASE

The Education & Implementation Phase is focused on educating your providers based on audit findings and defined organizational metrics defined during the Design Phase.

- Implement work plan
- Educate providers on their audit findings related to documentation, coding and billing requirements
- Combination of formal classroom education and hands-on training
- Customized specialty education for large and small groups
- Educate providers on clinical documentation needs, changes to clinical documentation guidelines, coding and reimbursement issues

MONITORING PHASE

The Monitoring Phase is the ongoing auditing and maintenance of your CDI program. This phase requires some level of project oversight at least monthly by the appropriate assigned staff. The key goal is to monitor and manage the program to ensure it meets the objectives your organization has established during the Design Phase.

- Process assessment
- Audit monthly patient encounters
- Conduct follow-up review of clinical documentation to ensure proper clinical information is recorded in the patient’s record
- Identify any CDI workflow optimizations of care plan or non-face-to-face documentation templates
- Provide monthly/quarterly leadership reports based on benchmark criteria determined in the Approach Phase
- Provide follow-up training to reinforce CDI objectives