

HFMA's Executive Survey: Clinical Documentation Meets Financial Performance

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Key Findings

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Priorities

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Opportunities

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Implementation of Clinical
Documentation Initiatives

Key Findings

1

Priorities

- Transitioning to the ICD-10 code set is the top clinical documentation priority for organizations.
- Among executives, optimizing reimbursement follows closely behind.

Key Findings

2 Opportunities

- Improving the accuracy of clinical documentation is the greatest opportunity for financial improvement.
- Decreasing denials ranks second.

Key Findings

3

Barriers

- Executives and directors identify disruption of physician workflow as the most challenging barrier to improved clinical documentation.
- Clinician/physician difficulty working with EHR and other technologies/systems ranks second.
- Overall, opportunities rated higher than barriers.

Key Findings

4

Outsourcing

- Organizations are most likely to outsource transcription and ICD-10 training now and in the future.

Key Findings

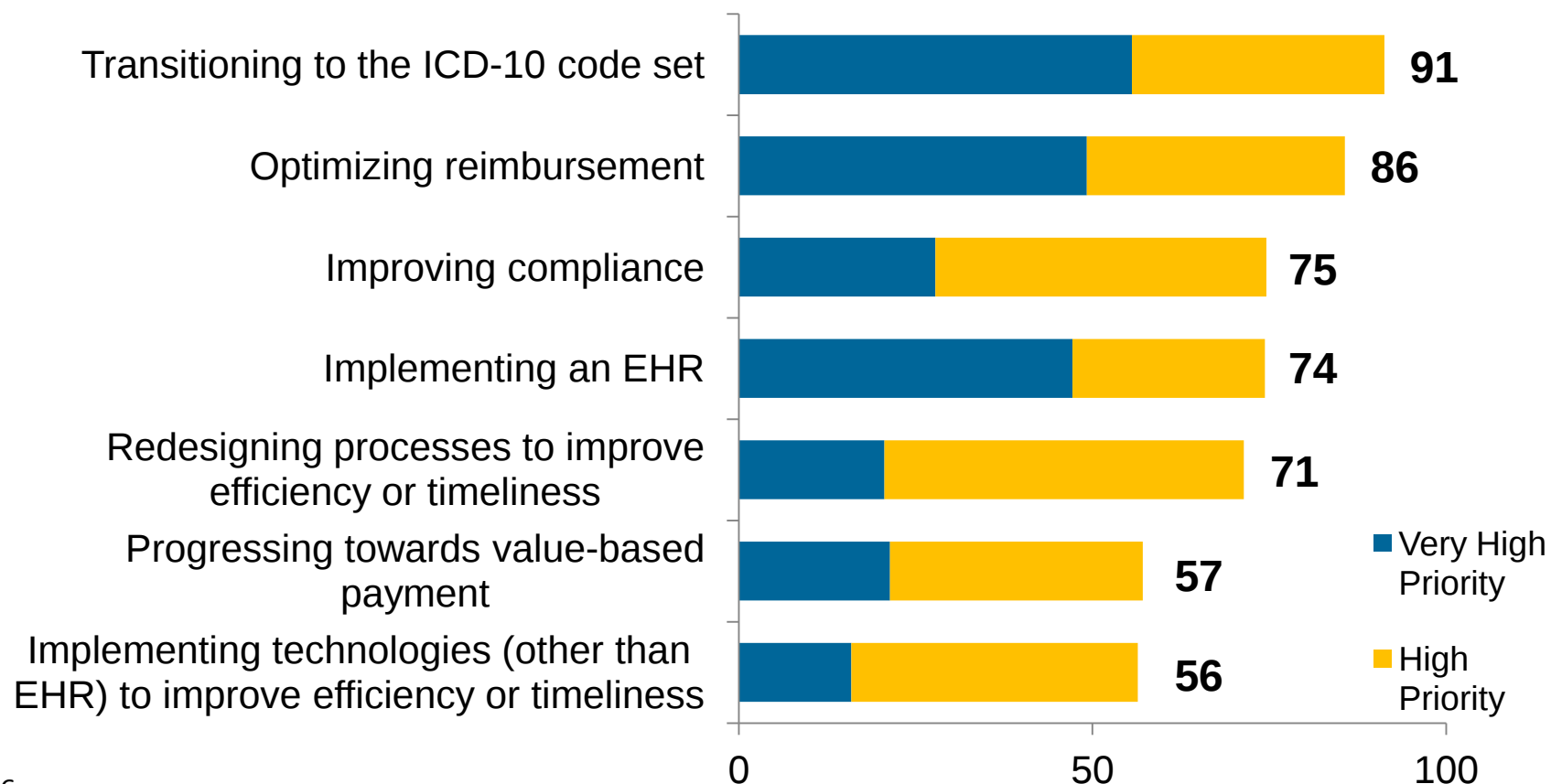
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Implementation of Clinical Documentation Initiatives

- Organizations struggle with resources and physician participation.
- Yet some are making progress through a variety of strategies and have demonstrated early signs of success.

Transitioning to ICD-10 Is the Highest Priority, Followed by Optimizing Reimbursement

Please rate the following goals related to clinical documentation in terms of priority level in your organization.

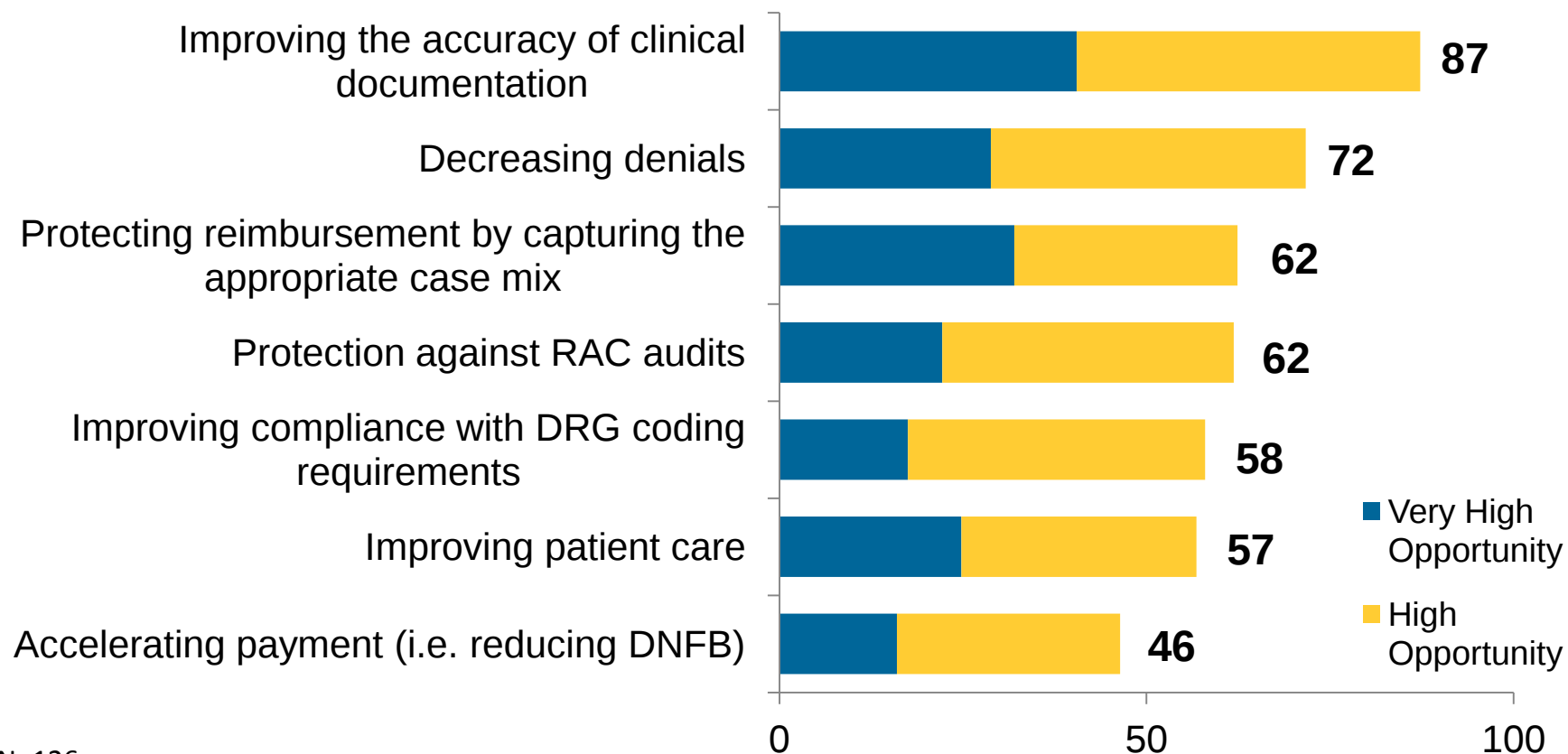


N=126

5 point scale used. Chart shows the top 2 points.

Improving Accuracy is the Greatest Area of Opportunity for Financial Improvement

What level of opportunity do you anticipate for improving financial performance through clinical documentation initiatives in the following areas?

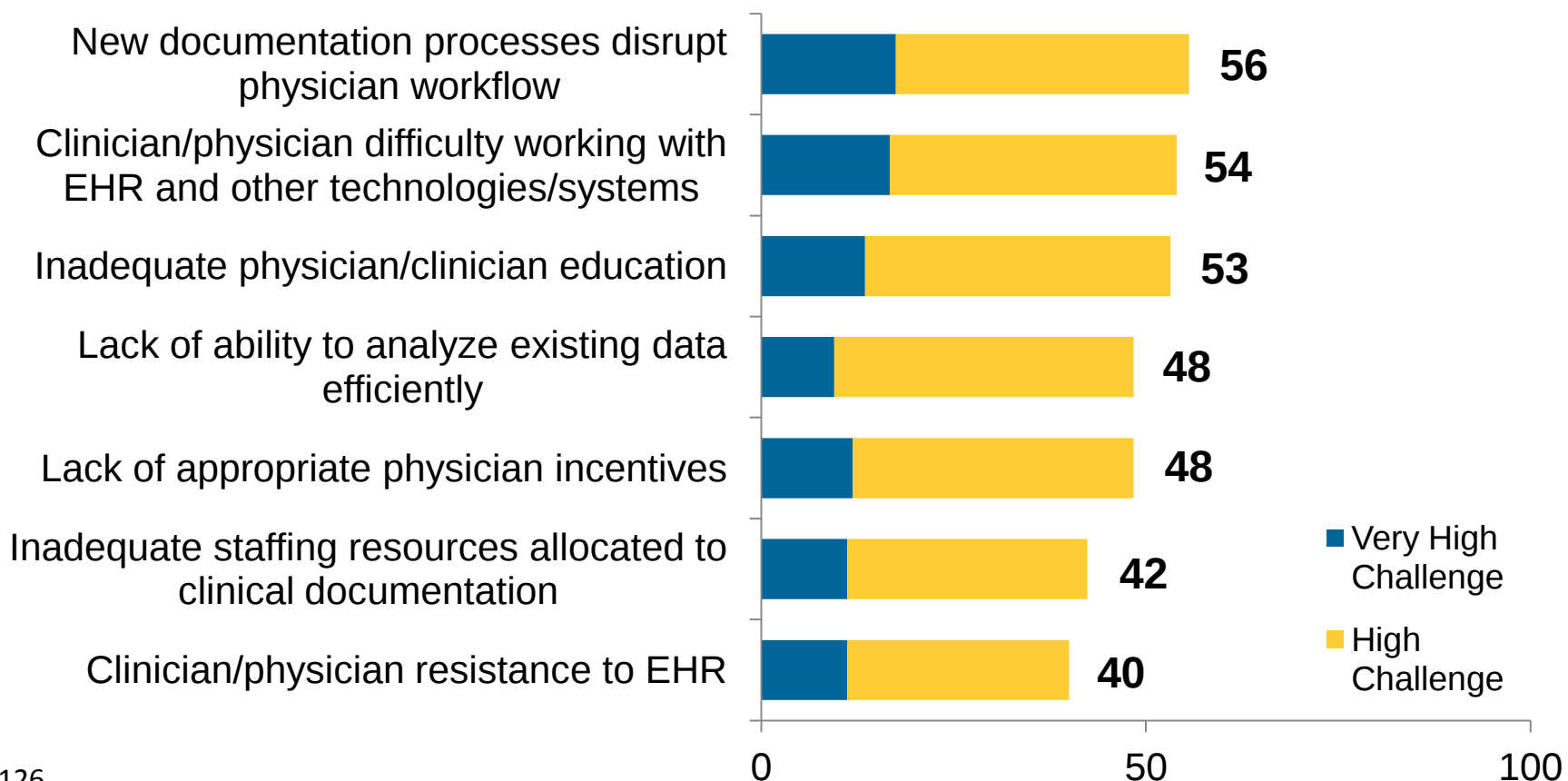


N=126

5 point scale used. Chart shows the top 2 points.

Disruption of Physician Workflow Is the Top Barrier; Overall, Opportunities Rated Higher Than Barriers

Please indicate the level of challenge associated with the following barriers to improved clinical documentation.

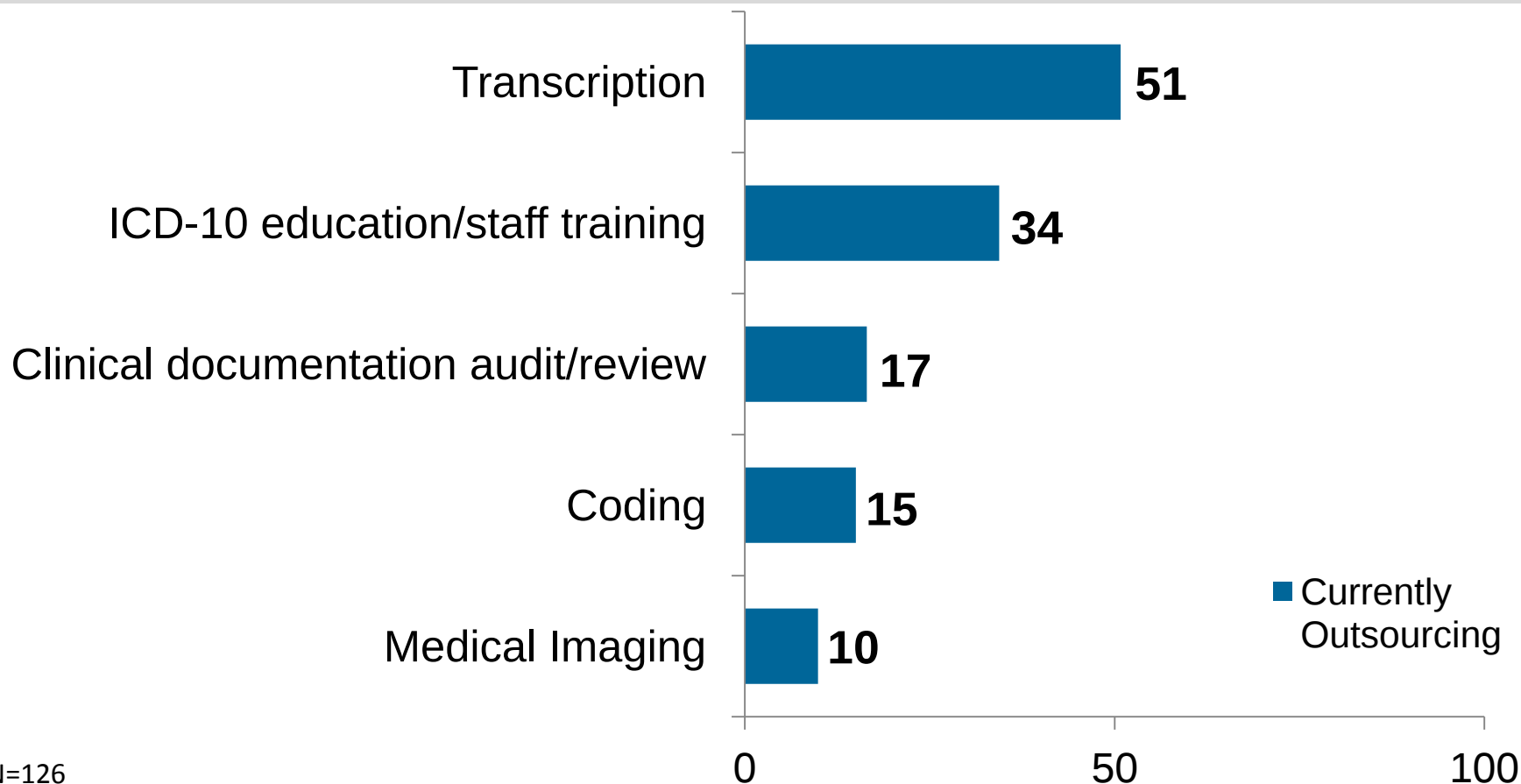


N=126

5 point scale used. Chart shows the top 2 points.

Most Organizations Outsource Transcription Today

What represents your current position regarding outsourcing the following functions?



N=126

Executive Survey on Clinical Documentation: 2013

Organizations Struggle with Resources and Physician Participation

Major resource challenges around clinical documentation

- “Limited number of experienced people to hire.”
- “Difficult to find experienced coders.”
- “The unbelievable amount of training and limited staff time to meet the challenge while completing all other duties.”

Major challenges around physician participation

- “Resistant docs.”
- “Getting our physicians to 'think in ink.'”

Yet Some Are Making Progress Through a Variety of Strategies

Respondents described their strategies to overcome **lack of resources**

- “Our biggest challenge was to allocate the appropriate resources to clinical documentation. We have addressed it by hiring a CDI specialist and providing the necessary tools as well as budgeting for an ROI as it relates to improved documentation.”
- “We are a small hospital, and we haven't had the resources to focus on clinical documentation. We just hired a CDI specialist yesterday, so hopefully we'll have more to share six months from now.”

Yet Some Are Making Progress Through a Variety of Strategies (cont.)

Respondents described their strategies to overcome **physician resistance**

- “Medical staff were not engaged in the process. We worked with hospitalists and case management to focus on documenting the level of services and the detail provided.”
- “We match computer-savvy nurses with less computer-savvy physicians to help them.”
- “We have a hospitalist nurse whose role is to facilitate communication/education with the hospitalist providers. Our CDI specialists, coders, and utilization review/case management nurses work directly with the hospitalist nurse.”
- “We are bringing in a documentation expert who is a physician to talk to our medical staff.”

Some Organizations Report Early Signs of Success

Respondents described their measurable successes to date

“When we first put [our clinical documentation management program] in place, we had a hard time getting physicians to respond to the queries. We made the response rates transparent by physician and linked the response rates and improved revenue. The physicians loved seeing that their efforts were making a difference, and now our response rates are near 100 percent.”

Some Organizations Report Early Signs of Success (cont.)

Respondents described their measurable successes to date

“Across our facilities, we had a number of legacy CDI programs in place, which have since been replaced by a standard CDI program. We also hired CDI specialists.... System-wide, the new CDI program has shown incredible results... From October 1, 2012, to June 30, 2013, the benefit exceeded **\$6 million.**”

“We were able to recruit a great leader in the area and get the program up and running in a short timeframe with the help of a major consulting firm. We trained our own staff, [primarily] good clinical nurses and/or case managers. **\$7 million** annual benefit achieved.”

Respondent Demographics: Level and Title

126 Hospitals and Health System Leaders Participated
in the Survey

Level	%
Executive	75%
Director	25%

Title	%
CFO/VP, Finance	65%
VP, Revenue Cycle	10%
Director, Patient Financial Services/Revenue Cycle	24%
Other	1%

Respondent Demographics: Size of Parent System or Hospital

Organization Range of Bed Size	Survey Respondents
Small Hospital < 200 Beds	41
Mid-Size Hospital 200 – 399 Beds	12
Large Hospital 400+ Beds	14
Small IDN < 1,000 Beds	8
Mid-Size IDN 1,000 – 2,999 Beds	19
Large IDN > 3,000 Beds	24

Note: In this table, survey respondents are categorized by the system with which they are affiliated. If at a free standing hospital (non-affiliated), they are categorized by beds at the facility level.

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