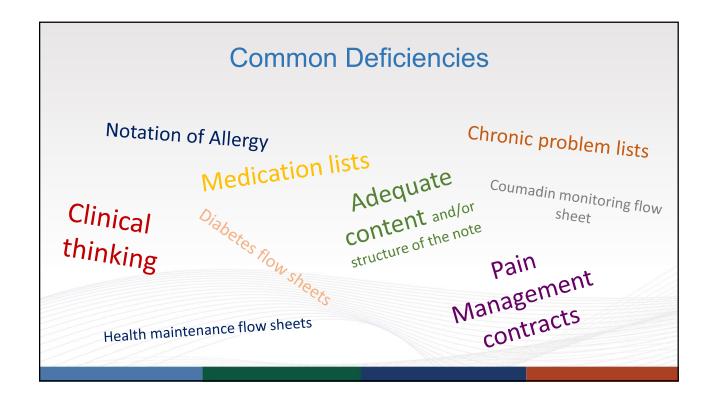


Medical Record Keeping Curriculum SEMINAR >8 hour contact hours • 2 hours of pre/post-work >10 hours CME provided FOLLOW-UP PROGRAM Personalized Implementation Program (PIP) >6 month follow-up program



Common Deficiencies

Clinical judgment & rationale

Clinical Notation of Allergy Adequate Chronic enternt Standard Chronic enternt Ists

Health maintenance flow sheets Continuest the notation of Allergy Health maintenance flow sheets Continuest the notation of Allergy Chronic enternt ists

Medication of Allergy Adequate Chronic enternt ists

Sheet Sheet

Common Obstacles

Time

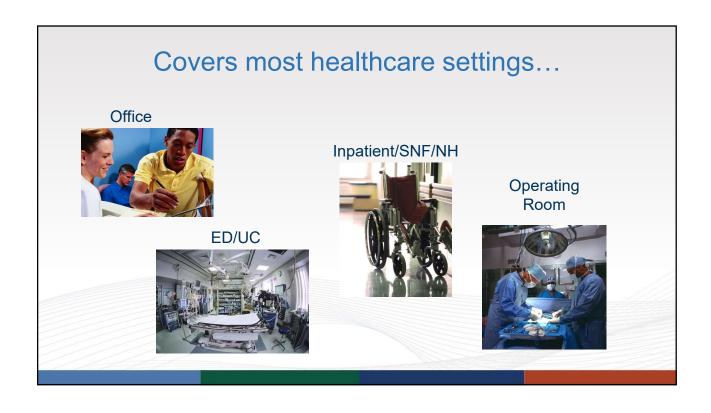
Awareness

Lack of training

Motivation

IT Savvy

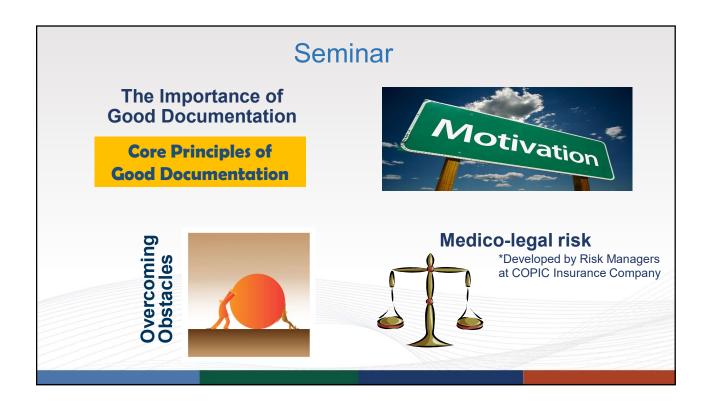
Money





Pre-Seminar Activities

- · Chart self-audit
- Chart review
 - · Participant submits 3 patient charts
 - · Receives targeted written feedback on documentation
 - Verbal available upon request
 - Feedback is discipline-specific (e.g., medical, dental) and specific to type of encounter (e.g., office, inpatient, surgical)



Seminar

- Essential Concepts
 - Individual notes
 - Record and Recordkeeping System
- Medicolegal Risks
- Setting-Specific: Inpatient, Surgical, Office
- · Pitfalls of coding
- Time Management
- EMR content integrated throughout
- Special areas such as prescribing controlled substances

What We Don't Cover...

Enhancing billing and collections

Final Activity and Homework

- Documentation Work Plan: Intent to change
 - Commitment for improvement
 - 3 areas
 - SMART goals
 - Self-developed and individualized

Change is a Process not an Event!

Personalized Implementation Program (PIP)

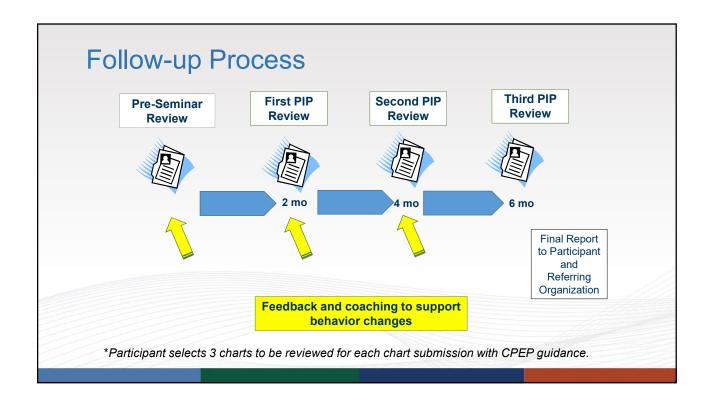




- · Receive ongoing coaching and chart reviews
- · Allows for incremental change and feedback over time
- · Demonstrate application of new knowledge
- · Open to participants who attended the Seminar
 - Optional consider whether to require PIP
 - · Separate enrollment and fee

Provides an objective measure of improvement (Pass/Fail)





At the Completion of PIP



Participant and the referring organization receive

- Written Final Summary Report
- Grade: Pass or Fail

General Expectation for Passing Grade

- Notes that "stand alone"
- Accurately reflect the care provided
- Convey rationale

Impact of Seminar and Follow-up Program (PIP) 2017 study

COMPARISON OF RECORD QUALITY FOR PIP PARTICIPANTS			
Pre-Seminar Records Compared To Final Chart Review (N=58)			
Rating on Pre-Seminar Chart Review		Outcome at PIP Final Chart Review	
Rating	All # (%)	Rating	All # (%)
Adequate (Yes)	20 (35)	Pass PIP	52 (90)
Inadequate (No/Somewhat or With Difficulty)	38 (65)	Fail PIP	6 (10)
TOTAL (% of All)	58 (100)	TOTAL (% AII)	58 (100)

- To evaluate program effectiveness, data were compared for the 58 participants who both submitted records for the Pre-Seminar Review and completed PIP from March 2013 to September 2016.
- On Pre-Seminar Review, only 35% (20/58) received an adequate rating.
- Approximately 90% passed the follow-up program, demonstrating adequate overall documentation.

This represented a notable improvement (160% increase in overall adequacy of records)

Key Points

- EMRs are not the panacea for documentation deficiencies
- Seminar is a CME course
 - · Chart submission is not required; participants select the charts they submit
 - · CPEP does not typically review background information about the participant
- Seminar is *not* designed to assess or provide feedback on quality of care
- Are your concerns about a specific type of documentation?
 - For example, inpatient or procedural-related documentation? CS prescribing? Let us know and we will work with the participant to incorporate your requests
- Change is a process, not an event; consider requiring PIP after the seminar
 - Participants may benefit from ongoing feedback to implement what they have learned