San Antonio, Texas | May 21–24, 2018

JOE FLOWER
Healthcare Futurist
2018 ACDIS
Keynote Speaker

HEALTHCARE 2028:
THE BIG REVEAL
WILL AI EAT MY JOB?

Join us in San Antonio for the nation’s first and only national conference dedicated to the CDI profession!

With a dynamic learning structure, first-class faculty, and an unparalleled platform for networking with peers, the 11th annual ACDIS Conference is unlike any other industry event!

Early Bird rate expires March 20, 2018. REGISTER NOW!

Register now at hcmarketplace.com/acdis-conference and save $100! *Save $200 now if you are an ACDIS member

2018 ACDIS Keynote Speaker

JOE FLOWER
Healthcare Futurist

HEALTHCARE 2028:
THE BIG REVEAL
WILL AI EAT MY JOB?
The 11th annual ACDIS Conference features unparalleled networking, the ACDIS Achievement Awards, and concurrent educational tracks with a diverse range of sessions, covering best practices for staff management, physician engagement, clinically focused chart reviews, and critical regulatory updates to improve every aspect of your CDI department.

Learn from your peers and the nation’s foremost CDI experts with more than 50 sessions in the following tracks:

- Clinical and Coding
- Management and Leadership
- Quality and Regulatory
- Expansion and Innovation
- Outpatient
- Pediatric

“We know that attending conferences means valuable time out of the office and out-of-pocket expenses, but if you can implement just ‘One Thing’ from the ACDIS Conference, it pays for itself. That’s what the 11th annual conference theme is all about—and we can’t wait to share a whole host of ‘One Things’ with our attendees!”

Brian Murphy
Director, ACDIS
What’s HOT in 2018?

Our popular interactive conference app returns, featuring Twitter notifications, conference materials, a session planner, and audience polls. We’ve also added a new SIXTH track dedicated to pediatric CDI.

This year’s lineup of speakers includes Healthcare Futurist Joe Flower as well as inspirational and motivational keynote Allison Massari and CMS speaker David Nilasena!

ACDIS offers exceptional peer-to-peer networking and recognition for the CDI profession. Join us in honoring our most inspirational members at the prestigious ACDIS Achievement Awards. We’ll also be wrapping up this year’s conference in style at the first annual closing night Achievement Awards reception!

WHO SHOULD ATTEND?
- Clinical documentation improvement (CDI) specialists
- CDI managers/directors
- Coding compliance directors/managers
- Coding compliance specialists
- Coders
- Case management directors/managers
- HIM directors
- Revenue cycle directors
- Physician champions/advisors to CDI
- Quality improvement professionals
- DRG coordinators
- Chief medical officers
- Denials and appeals managers
- Compliance officers
- Chief financial officers

Continuing education credits available

The ACDIS Conference offers continuing education credits from a variety of professional healthcare organizations.

Please check out hcmarketplace.com/acdis-conference for up-to-date information.

REGISTER TODAY! Visit: hcmarketplace.com/acdis-conference | Call: 615-724-7200 | Email: customerservice@hcpro.com
THE PHYSICIAN ADVISOR’S ROLE IN CDI BOOT CAMP

MAY 20–21, 2018 (8:00 A.M. to 5:00 P.M. each day)

The Physician Advisor’s Role in CDI Boot Camp returns to the 11th annual ACDIS Conference with a new format and agenda and a heightened focus on denials and outpatient CDI.

Attendees will receive a half-day of instruction on the critical coding, clinical, and regulatory changes to the CDI profession over the past year, delivered by Nashville-based regulatory guru James S. Kennedy, MD, CCS, CDIP, CCDS. Learn about the new 2019 IPPS rule, the impending changes to the MS-DRG CC/MCC structure beginning on October 1, 2018, the MACRA/MIPS cost efficiency models, ICD-10’s impact on mortality, readmission, and complication methodologies, Coding Clinic concepts amendable to CDI, and other principles in this jam-packed four-hour session.

The second half of day 1 is a denials workshop led by Trey La Charité, MD, FACP, SFHM, CCS, CCDS, of the University of Tennessee Medical Center in Knoxville, who will walk through his experiences with the Recovery Auditor program and discuss actual denied cases and appeals letters. A good CDI physician advisor knows not only the code and the law, but also the judge and the jury, and La Charité will outline what works and what doesn’t work in advocating a facility’s relationship with payers and Recovery Auditors.

Attendees then can select their choice of session on day 2: Our popular Physician Advisor 101 by La Charité, which reviews the nuts and bolts of being an effective physician advisor, or a brand-new case study presentation by Nicole Fox, MD, MPH, FACS, CPE, associate chief medical officer at Cooper University Hospital in Camden, New Jersey. Fox will discuss cutting-edge changes to her CDI department, including expansion into the ambulatory setting, remote CDI, and point of entry CDI.

LEARNING OBJECTIVES

At the conclusion of the course, participants will be able to:

- Explain the roles and responsibilities of a physician advisor to CDI
- Describe the most problematic terms in ICD-10-CM/PCS and best practice for resolving coding versus clinical disagreement
- Identify common problem areas and deficiencies in medical records and physician documentation
- Construct optimal techniques for engaging physicians in a CDI program
- Develop best practices for capturing documentation in the hospital’s workflow
- Develop methods for building credibility with medical staff and peers
- Develop methods for maintaining compliance with various industry audit and payment agencies
- Identify how coded data is used for physician and hospital profiling and quality initiatives
- Identify areas of opportunity for CDI in the outpatient setting
- Identify new growth areas for your CDI department, including point of entry CDI and remote CDI

FACULTY

James S. Kennedy, MD, CCS, CDIP, CCDS, is the founder and president of CDIMD, a Nashville-based physician and facility advisory and consulting firm that advocates ICD-10-pertinent clinical documentation and coding integrity essential to healthcare revenue cycle and quality measurement.

Nicole Fox, MD, MPH, FACS, CPE, is associate chief medical officer and medical director of CDI and pediatric trauma at Cooper University Hospital in Camden, New Jersey. Currently, Fox leads a team of 13 RN CDI specialists who have achieved a 100% physician response rate to queries.

Trey La Charité, MD, FACP, SFHM, CCS, CCDS, is the medical director for CDI and coding at the University of Tennessee Medical Center (UTMC) in Knoxville, Tennessee. He is a former ACDIS Advisory Board member and presenter at the ACDIS pre-conference physician advisor boot camp.

“Very informative on many different topics of CDI.”

Keisha Downes, CDI Manager
Tufts Medical Center
Braintree, MA
2017 attendee
AGENDA

Day 1: Sunday, May 20

7:00 A.M.–8:00 A.M.  REGISTRATION AND BREAKFAST
8:00 A.M.–10:00 A.M.  CRITICAL CDI UPDATE: TOP PLATE ISSUES REQUIRING IMMEDIATE ATTENTION
10:00 A.M.–10:15 A.M.  BREAK
10:15 A.M.–11:00 A.M.  IMPACT OF ICD-10-CM/PCS ON MORTALITY/READMISSION/QUALITY CALCULATION
11:00 A.M.–12:00 P.M.  OUTPATIENT CDI FUNDAMENTALS
12:00 P.M.–1:30 P.M.  LUNCH (PROVIDED)
1:30 P.M.–3:00 P.M.  MAN THE BARRICADES! TODAY’S RECOVERY AUDITOR REALITY
3:00 P.M.–3:15 P.M.  BREAK
3:15 P.M.–4:45 P.M.  STOPPING THE HEMORRHAGE: STRATEGIES FOR APPEALING RECOVERY AUDITOR DENIALS
4:45 P.M.–5:00 P.M.  OPEN Q&A
5:00 P.M.  ADJOURN

Day 2: Monday, May 21

Track 1: Physician Advisor 101: Core Skills and Responsibilities

7:00 A.M.–8:00 A.M.  BREAKFAST
8:00 A.M.–9:00 A.M.  ACHIEVING MEDICAL STAFF BUY-IN
9:00 A.M.–10:00 A.M.  READY, SET, INTERVENE! MANAGING PROBLEMS, PITFALLS, AND PERSONALITY DISORDERS
10:00 A.M.–10:15 A.M.  BREAK
10:15 A.M.–11:00 A.M.  TIMING IS EVERYTHING: HOW AND WHEN TO QUERY
11:00 A.M.–12:00 P.M.  STOP, DROP, AND ROLL! MANAGING THE UNEXPECTED FIRES
12:00 P.M.–1:30 P.M.  LUNCH (PROVIDED)
1:30 P.M.–3:00 P.M.  PRACTICAL CONSIDERATIONS: CDI TEAM STRUCTURE AND PA POSITION DEVELOPMENT
3:00 P.M.–3:15 P.M.  BREAK
3:15 P.M.–4:30 P.M.  CDI: NOT JUST FOR INPATIENTS ANYMORE
4:30 P.M.–5:00 P.M.  OPEN Q&A
5:00 P.M.  ADJOURN

Track 2: Cooper University Health Care: CDI Case Study

7:00 A.M.–8:00 A.M.  BREAKFAST
8:00 A.M.–9:15 A.M.  PLAYING TO WIN: CLINICIAN ENGAGEMENT WITH CDI
9:15 A.M.–10:00 A.M.  THINKING OUTSIDE THE BOX: THE HYBRID CDI MODEL
10:00 A.M.–10:15 A.M.  BREAK
11:15 A.M.–12:00 P.M.  THE CMI IS DOWN!!! CALL C-D-I (AND OTHER EMERGENT REQUESTS)
12:00 P.M.–1:30 P.M.  LUNCH (PROVIDED)
1:30 P.M.–2:15 P.M.  IT'S ALL ABOUT THE … METRICS
2:15 P.M.–3:00 P.M.  BEYOND THE WALLS: BUILDING AN AMBULATORY CDI PROGRAM
3:00 P.M.–3:15 P.M.  BREAK
3:15 P.M.–4:30 P.M.  POINT OF ENTRY CDI: ANOTHER FRONTIER
4:30 P.M.–5:00 P.M.  OPEN Q&A
5:00 P.M.  ADJOURN

*Agenda and speakers are subject to change.

Cost: $1,349

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MASTERING CLINICAL CONCEPTS IN CDI BOOt CAMP—SPecIAL 2-DAY EDITION

MAY 20–21, 2018 (8:00 A.M. to 5:00 P.M. each day)

The Mastering Clinical Concepts in CDI Boot Camp focuses on key pathophysiological concepts that will improve the quality of clinical indicators used in provider queries. The hands-on, practical format of this two-day pre-con enhances critical thinking skills and prepares CDI specialists to be leaders in their field and communicate collaboratively with providers.

Are you looking for in-depth clinical documentation training and want to take CDI discussion to the next level? Do you want to go beyond quoting buzzwords and reminding physicians to capture the next CC? If you do, this boot camp is for you. It will increase your understanding in a way that will move your CDI practice from query to collaboration.

AGENDA

DAY 1: SUNDAY, MAY 20

7:00 A.M. – 8:00 A.M.
REGISTRATION AND BREAKFAST

8:00 A.M. – 8:40 A.M.
INTRODUCTION

8:40 A.M. – 9:30 A.M.
INFECTIOUS DISEASE

9:30 A.M. – 10:00 A.M.
DISEASES & DISORDERS OF THE KIDNEY & URINARY SYSTEM

10:00 A.M. – 10:15 A.M.
BREAK

10:15 A.M. – 10:45 A.M.
DISEASES & DISORDERS OF THE KIDNEY & URINARY SYSTEM (CONTINUED)

10:45 A.M. – 12:00 P.M.
DISEASES & DISORDERS OF THE CARDIOVASCULAR SYSTEM

12:00 P.M. – 1:30 P.M.
LUNCH (PROVIDED)

1:30 P.M. – 2:00 P.M.
DISEASES & DISORDERS OF THE CARDIOVASCULAR SYSTEM (CONTINUED)

2:00 P.M. – 3:00 P.M.
DISEASES & DISORDERS OF THE DIGESTIVE SYSTEM & HEPATOBLIARY SYSTEM

3:00 P.M. – 3:15 P.M.
BREAK

3:15 P.M. – 4:15 P.M.
DISEASES & DISORDERS OF THE BLOOD AND NEOPLASMS

4:15 P.M. – 5:00 P.M.
OPEN Q&A, EXERCISE REVIEW

5:00 P.M.
ADJOURN

DAY 2: MONDAY, MAY 21

7:00 A.M. – 8:00 A.M.
BREAKFAST

8:00 A.M. – 9:30 A.M.
DISEASES & DISORDERS OF THE RESPIRATORY SYSTEM

9:30 A.M. – 10:00 A.M.
MENTAL DISEASE & DISORDERS, ALCOHOL & SUBSTANCE USE, ABUSE, DEPENDENCE

10:00 A.M. – 10:15 A.M.
BREAK

10:15 A.M. – 10:45 A.M.
MENTAL DISEASE & DISORDERS, ALCOHOL & SUBSTANCE USE, ABUSE, DEPENDENCE (CONTINUED)

10:45 A.M. – 12:00 P.M.
ENDOCRINE, NUTRITIONAL, & METABOLIC DISORDERS

12:00 P.M. – 1:30 P.M.
LUNCH (PROVIDED)

1:30 P.M. – 2:00 P.M.
ENDOCRINE, NUTRITIONAL, & METABOLIC DISORDERS (CONTINUED)

2:00 P.M. – 3:00 P.M.
DISEASES & DISORDERS OF THE NERVOUS SYSTEM

3:00 P.M. – 3:15 P.M.
BREAK

3:15 P.M. – 3:45 P.M.
DISEASES & DISORDERS OF THE NERVOUS SYSTEM (CONTINUED)

3:45 P.M. – 5:00 P.M.
OPEN Q&A, EXERCISE REVIEW

5:00 P.M.
ADJOURN

*Agenda and speakers are subject to change. The timing may change as the course is presented to allow for discussion.

Cost: $1,149

Purchase with admission to the 11th annual national conference and SAVE 15%!
CCDS EXAM PREP CLASS

May 20–21, 2018 (8:00 A.M. to 5:00 P.M. each day)

The CCDS Exam Prep Class prepares you to take the CCDS exam and advance in your professional career. By equipping you with test-taking skills and CDI knowledge, the class will allow you to tackle the exam with confidence.

In two days, our instructors cover the main focus areas of the CCDS exam as outlined in the examination content outline (see the CCDS Exam Candidate Handbook):

- Healthcare regulations, reimbursement, and documentation requirements related to the inpatient prospective payment system (IPPS)
- Anatomy and physiology, pathophysiology, pharmacology, and medical terminology
- Medical record documentation
- Healthcare facility CDI program analysis
- Communication skills
- Official Guidelines for Coding and Reporting
- Professionalism, ethics, and compliance
- Impact of reportable diagnoses on quality of care

Plus, our instructors cover real-world study strategies for adult learners.

FACULTY

Sharme Brodie, RN, CCDS, is a CDI education specialist with ACDIS and serves as a full-time instructor for the CDI boot camps as well as a subject matter expert for ACDIS. Her nine years of CDI experience includes a background in consulting in which she provided program reviews and training to the medical staff, including physician education to various healthcare facilities.

If you’ve attempted to gain CCDS certification before, this class will break down the material covered in the exam to ensure you feel confident and competent when you next sit for it. The program also covers test-taking skills, which helps students who have mastery of the subject matter but do not excel in the stress of a test-taking situation.

You’ll also receive access to the CCDS Exam Study Guide online practice exam, allowing you to practice in a realistic scenario.

AGENDA

DAY 1: SUNDAY, MAY 20

7:00 A.M.–8:00 A.M.  REGISTRATION AND BREAKFAST
8:00 A.M.–8:15 A.M.  INTRODUCTION TO THE CCDS CREDENTIALING EXAM
8:15 A.M.–10:00 A.M.  INPATIENT PROSPECTIVE PAYMENT SYSTEM
10:00 A.M.–10:15 A.M.  BREAK
10:15 A.M.–12:00 P.M.  MEDICAL RECORD REVIEW & QUERY
12:00 P.M.–1:30 P.M.  LUNCH (PROVIDED)
1:30 P.M.–3:00 P.M.  GUIDELINES FOR CODING & REPORTING
3:00 P.M.–3:15 P.M.  BREAK
3:15 P.M.–4:45 P.M.  DRG EXPERT TUTORIAL
4:45 P.M.–5:00 P.M.  QUESTION AND ANSWER
5:00 P.M.  ADJOURN

DAY 2: MONDAY, MAY 21

7:00 A.M.–8:00 A.M.  BREAKFAST
8:00 A.M.–10:00 A.M.  ANATOMY & PHYSIOLOGY REVIEW
10:00 A.M.–10:15 A.M.  BREAK
10:15 A.M.–12:00 P.M.  ETHICS, PROFESSIONALISM, & COMPLIANCE
12:00 P.M.–1:30 P.M.  LUNCH (PROVIDED)
1:30 P.M.–3:00 P.M.  IMPACT OF REPORTABLE DIAGNOSES ON QUALITY MEASURES
3:00 P.M.–3:15 P.M.  BREAK
3:15 P.M.–4:30 P.M.  CDI PROGRAM ANALYSIS
4:30 P.M.–4:45 P.M.  CONCLUSION/WRAP UP

*Agenda and speaker are subject to change. The timing may change as the course is presented to allow for discussion.

Cost: $799

Purchase with admission to the 11th annual national conference and SAVE 15%!
AGENDA

Monday, May 21, 2018

PRE-REGISTRATION AND WELCOME RECEPTION

2:00 P.M.—6:00 P.M.  Pre-registration/exhibitors and attendees
5:00 P.M.—7:30 P.M.  Welcome reception
Exhibit Hall

Day 1—Tuesday, May 22, 2018

MAIN CONFERENCE

7:00 A.M.—8:00 A.M.  Registration and continental breakfast
Exhibit Hall

8:00 A.M.—8:30 A.M.  Welcome Remarks, ACDIS Update, “One Thing”
Brian Murphy, Director, ACDIS, & Robin Jones, Adventist Health Care,
ACDIS Advisory Board

8:30 A.M.—9:30 A.M.  General Session
Healthcare 2028: The Big Reveal
Joe Flower

Please note that the program materials will be available via download and the conference app only. A download link will be provided prior to the event, but a printed book of the presentations will not be available on-site.
9:45 A.M.—10:45 A.M. Breakout Sessions (choose 1 of 6)

**TRACK 1: CLINICAL & CODING**

**CDI for Surgeons: What You and They Need to Know**
*Trey La Charité, MD, FACP, SFHM, CCS, CCDS*

*INTERMEDIATE*

Surgeons are the most important financial drivers of your institution’s revenue cycle and an integral component of its publicly reported quality data, but they tend to be documentation minimalists at baseline. This presentation will review the basic documentation needs of all surgeons and specifics of most subspecialties.

**TRACK 2: MANAGEMENT & LEADERSHIP**

**Perfecting Provider Education: Practical, Powerful, and to the Point**
*Aimee M. Van Balen, RN, BSN, CCDS, & Laurie A. Morelle, RN, MS, CCDS*

*BASIC*

Struggling with how to educate your MDs? Having difficulty with engagement and query response rates? We can help! Come on in to learn from our mistakes and successes over the last eight years. In this hectic world of healthcare, optimize any educational opportunity that comes your way: Be practical, powerful, and to the point.

**TRACK 3: QUALITY & REGULATORY**

**Exploring Mortality Scores: How Mortality Scores Improve Quality Data**
*Pamela Hess, MA, RHIA, CDIP, CCS, CPC, & Susan Schmitz, JD, RN, BSN, CCS, CDIP, CCDS*

*ADVANCED*

Engage in a discussion on mortality scoring and analysis by understanding expected versus actual mortality calculation. Take home a step-by-step approach to integrating mortality scoring as part of your CDI program and tools to train providers, coders, and CDI staff on documentation requirements to support accurate mortality scores.

**TRACK 4: EXPANSION & INNOVATION**

**CDI in a Critical Access Hospital: A Case Study at Pella Regional Health Center**
*Amy Fletcher, RN, CCDS, & Jacie Kramer, RN, BSN*

*INTERMEDIATE*

CDI programs aren’t only for the acute inpatient arena; they are also being implemented in critical access hospitals (CAH) and Medicare dependent hospitals. Learn how to build a successful program to meet the varying regulatory obligations, and identify key measures to illustrate how CAH CDI can be just as rewarding and beneficial as an acute care program.

**TRACK 5: OUTPATIENT**

**Outpatient CDI: Where to Start and Needed Next Steps**
*Anny P. Yuen, RHIA, CCS, CCDS, CDIP*

*BASIC*

The volume of denials due to lack of medical necessity for outpatient services is increasing. As a result, providers must ensure that they develop processes around improving documentation to justify services in all areas of care provided. This session provides strategies for getting started.
TRACK 6: PEDIATRIC

Little Kids, Big Doc? Big Problem: Meeting the Challenges of Pediatric Physician Engagement
Sandra Love, CCDS, & Melinda G. Matthews, RN, BSN, CCDS, CDIP

ADVANCED

This session offers strategies to optimize your pediatric CDI program, including hidden opportunities to drive severity of illness and risk of mortality while supporting final coding and audit defense, creative methods for engaging and educating reluctant pediatric providers, recruiting and training talented CDI staff, and reviewing big data to calculate return on investment.

10:45 A.M.—11:30 A.M.
Networking break
Exhibit Hall

11:30 A.M.—12:30 P.M.
Breakout Sessions (choose 1 of 6)

TRACK 1: CLINICAL & CODING

Coding Clinic Update
James S. Kennedy, MD, CCS, CDIP, CCDS

INTERMEDIATE

While the ICD-10-CM/PCS Index, Table, and Guidelines serve as the foundation for code assignment, the American Hospital Association’s Coding Clinic for ICD-10-CM/PCS provides interpretative advice deemed by many to be official. This program will review key advice related to provider queries such as emaciation due to malnutrition, encephalopathy inherent or integral to a cerebral infarction, DRG-sensitive sequencing instructions, and other advice impacting severity and risk adjustment.

TRACK 2: MANAGEMENT & LEADERSHIP

From the Ice Age to Modern Day: How to Unfreeze Your CDI Program
Jennifer A. Crumb, RN, BSN, CCDS; Ashlyn Hard, RN, BSN, CCDS, CDIS; & Jennifer Woodworth, RN, BSN

ADVANCED

Now that CDI efforts have been around for quite a few years, organizations are noticing a plateau effect—the case-mix index has found its happy place, physicians are comfortable with the query process, and the CDI team is satisfied with their roles and responsibilities. Participants will explore how to recognize several key stages of a CDI program and identify the best actions to take at each stage for continued growth.

TRACK 3: QUALITY & REGULATORY

Advancing CDI: The Quality Story
Jennifer Eaton, RN, MSN, CCDS, & James Fee, MD, CCS, CCDS

BASIC

The impact of clinical documentation and coding has expanded as CMS and other payers shift from fee-for-service to value-based payments linked to quality and cost outcomes. Speakers will take participants step by step through identifying common CDI opportunities using a data-driven approach, infrastructure, and workflow built to ensure process efficiency and data governance, while also outlining concrete measures of success.

TRACK 4: EXPANSION & INNOVATION

Documentation Essentials for the Post-Acute Care Provider
Timothy Brundage, MD, CCDS

INTERMEDIATE

Documentation in the long-term acute care setting (LTAC) differs compared to documentation optimization for typical short-term care centers. This session provides documentation improvement methodologies you can teach to physicians to support optimization of the MS-DRG and demonstrate how sick patients are when they go to the LTAC level.

“A very informative and interactive conference that covers a broad scope of subject matter within the CDI industry.”

Joy Coletti, System Director, CDI Memorial Hermann Health System Houston, TX 2017 attendee
TRACK 5: OUTPATIENT
Data Management and Outpatient CDI
Cherri Sanders, RHIT, & Heather Marie Smith, CCS-P, CRCS-I
INTERMEDIATE
Our facility serves a large Medicare population, making it vulnerable to Medicare’s LCD/NCDs, and it experienced thousands of dollars in denials annually without fully understanding what was being denied and why. Everything changed when the team received access to pull reports directly from the billing software and created a precise work plan and reporting mechanism for its outpatient CDI program.

12:30 P.M.—1:45 P.M.
Lunch
Exhibit Hall

1:45 P.M.—2:45 P.M.
Breakout Sessions (choose 1 of 6)

TRACK 1: CLINICAL & CODING
What’s in a Review? Key Factors to Include and Exclude
Deanne Wilk, BSN, RN, CCDS, CCS
BASIC
This session provides an overview of the how, what, and why of a CDI review. It will provide exactly what you want to be looking for and what you should include and exclude. During the presentation, attendees will learn why we produce a CDI review, what elements should be included, how to balance review quality and productivity concerns, and how to advance CDI to the next level.

TRACK 2: MANAGEMENT & LEADERSHIP
Physician Advisor Spectrum: Expert Exploration
Donald A. Butler, RN, BSN
INTERMEDIATE
This must-attend session explores physician advisor roles, experiences, and successes. A number of expert physician advisors will come together and share their hard-won wisdom on how to improve physician engagement.

TRACK 3: QUALITY & REGULATORY
Is CDI the Secret to Success? How the Top Ranked Hospitals Outperform Peers in Quality
Anthony F. Oliva, DO, MMM, FACP, & Shane Wolverton
ADVANCED
A recent study found that 93% of hospitals with clinically focused CDI programs outperformed their peers in overall mortality ratings. In this session, participants will learn about the inextricable link between patient outcomes, hospital rankings, and hospital reimbursement to the quality of care that is delivered, documented, and measured.
TRACK 4: EXPANSION & INNOVATION

Physician Engagement: Drive Success With a CDI Physician Educator
Judy Cassetty, BSN, RN, CCDS, & Sylvia Emery, MSN, RN, RHIA, CCDS, CCS
INTERMEDIATE
Implementing the CDI physician educator role led to a 20% increase in the provider response rate throughout St. Joseph Health System. This session offers a panel discussion with St. Joseph CDI staff to explore the role of CDI physician educator and the significant contribution the position brings to the organization.

TRACK 5: OUTPATIENT

HCCs: Meeting Compliance Demands
Richard D. Pinson, MD, FACP, CCS
ADVANCED
This session describes differences in hospital and provider payment methodologies to set the stage for understanding how HCCs affect reimbursement and quality reporting. Participants will learn outpatient coding guidelines and clinical diagnostic validation standards and criteria. The session also highlights some of the most common HCC diagnoses via case study examples.

TRACK 6: PEDIATRICS

How to Implement CDI in the NICU
Rabia Jalal, MBBS, CCS, CDIP, CCDS, & Loni J. Johnston, RN, BSN, CCDS
BASIC
The neonatal intensive care unit (NICU) represents a growth opportunity for CDI. Unfortunately, due to specialization training, rolling out CDI to the NICU can seem like an impossible task. Participants will learn strategies to leverage existing resources.

2:45 P.M.—3:45 P.M.
Networking break
Exhibit Hall

3:45 P.M.—4:45 P.M.
Breakout Sessions (choose 1 of 6)

TRACK 1: CLINICAL & CODING

Everything You Need to Know About Sepsis
Sam Antonios, MD, FACP, SFHM, CPE, CCDS
BASIC
Sepsis has been on an interesting, albeit winding ride, with a big twist in 2016 as clinical definitions changed once again. This presentation will review the history of the disease, explore new definitions and how to critically think about them, and look at how to build a case for sepsis in the new world.

TRACK 2: MANAGEMENT & LEADERSHIP

Integrating Analytics Into CDI Operations to Build a Stronger Program
Susanne Gleason, RHIT, CCDS, & Sandeep Soman, MD
INTERMEDIATE
When Henry Ford Health System centralized CDI programs at four acute care hospitals, it transitioned performance measurement from a reporting focus to the integration of analytics into all aspects of CDI, including quality. Participants will be able to identify standardized measurement processes and metrics, and create an analytics dashboard to identify and prioritize cases for review.
TRACK 3: QUALITY & REGULATORY

HAC, PSI, and PDI: Incorporating Reviews Into Daily CDI Workflow
Vicki J. Galyean, RN, BSN, CCDS

BASIC
Accurate reporting of quality measures is imperative for hospitals. This session will explore definitions of hospital-acquired conditions, patient safety indicators, and pediatric quality indicators (HACs, PSIs, and PDIs) and provide insight into inclusion and exclusion criteria for adverse events as well as tips for concurrent record review.

TRACK 4: EXPANSION & INNOVATION

Leveraging the EHR to Create Real-Time Provider Documentation Tools
Michelle McCormack, RN, BSN, CCDS, CCS, CRCR

ADVANCED
To keep technology useful, CDI programs need to create workflows and tools to increase effectiveness within the review process. This session will recount how Stanford Health Care’s CDI program created interactive, real-time documentation tools for providers. Participants will gain strategies for determining tool focus, creation and implementation, provider engagement, and IT support.

TRACK 5: OUTPATIENT

Some Assembly Required: Building an Outpatient Program
Tracy Boldt, RN, BSN, CCDS, CDIP, & Robert Erickson, MD, CCDS

INTERMEDIATE
Essentia Health System is a member of an accountable care organization with over 75,000 members, and its outpatient CDI program touches over 60 clinics systemwide. This presentation provides attendees with tools for effective outpatient data mining, approaches to hiring, policy and procedure development for the outpatient setting, query examples, and more.

TRACK 6: PEDIATRIC

Pediatric Risk Adjustment for CDI Professionals
Mark N. Dominesey, RN, BSN, MBA, CCDS, CDIP, CHTS-CP

INTERMEDIATE
Many CDI specialists are just beginning to scratch the surface of risk adjustment as it pertains to their work, and even fewer have undertaken the specialized education necessary to work in the pediatric setting. Inpatient and outpatient risk adjustment methodologies in these settings will be discussed as well as case examples that will allow participants to put their learning into action.

4:45 P.M.
Adjourn

“Great opportunity to get ahead of what is coming in the future of CDI. Great opportunity to confirm things that you are doing right and correct things that need correction in your practice.”

John Worthy
Medpartners
Indianapolis, IN
2017 attendee
Day 2—Wednesday, May 23

7:00 A.M.—8:00 A.M.  Continental breakfast
Exhibit Hall

8:00 A.M.—8:30 A.M.  2018 ACDIS Achievement Awards
Brian Murphy, Director, ACDIS

8:30 A.M.—9:30 A.M.  Keynote session: CMS Regulatory Update
David S. Nilasena, MD, MSPH, MS, Chief Medical Officer, U.S. Centers for Medicare and Medicaid Services, Dallas Regional Office

9:45 A.M.—10:45 A.M.  Breakout Sessions (choose 1 of 6)

TRACK 1: CLINICAL & CODING
Surgical Complication, or Not, That Is the Question
Adriane Martin, DO, CCDS
BASIC
Identifying whether a condition that occurred in the operative suite or in the postoperative period is a surgical or postoperative complication can be challenging, even for the most seasoned professionals. Participants will learn common intraoperative complications and postoperative conditions and obtain a clear understanding of each.

TRACK 2: MANAGEMENT & LEADERSHIP
How Many Hats Is Too Many? Balancing Expansion With Resources and Staff Abilities
Laurie L. Prescott, RN, MSN, CCDS, CDIP, CRC
INTERMEDIATE
CDI easily demonstrated its return on investment over the past 10 years. That success led to increased demands on CDI programs’ attention. Yet, many CDI directors struggle with how to support such requests and meet the needs associated with the evolution of healthcare reimbursement and the focus on quality. This session offers tools and responses to assist the manager in responding effectively and thoughtfully to these requests.

TRACK 3: QUALITY & REGULATORY
Malnutrition: Will the OIG Be Coming to See You?
Kristen Gonzalez, MHA, RHIA; Shelby Humphreys, RHIA; & Vaughn M. Matacale, MD
ADVANCED
Following on the heels of its kwashiorkor audits, the Office of Inspector General (OIG) tested the waters on severe malnutrition at Vidant Health, which had implemented a clinical initiative aimed at improving patient outcomes by applying ASPEN guidelines for the diagnosis and treatment of malnutrition. Discover what happened to one of the institutions selected for the OIG’s test audits. Learn how the process works, the auditor rationales, and how Vidant responded to OIG investigations.

TRACK 4: EXPANSION & INNOVATION
How to Mitigate and Manage Denials
Tammy Combs, RN, MSN, CDIP, CCS, CCDS, & Melanie Endicott, MBA/HCM, RHIA, CDIP, CHDA, CPHI, CCS, CCS-P, FAHIMA
INTERMEDIATE
Participants will learn how to recognize the opportunity to appeal a denial and leverage denial data to inform CDI opportunities. Drafting appeals, monitoring and tracking denials, as well as policy and procedure development will be discussed.

“There were so many positive interactions and new information provided that all CDI should experience at least one conference if not all.”
Constance Pickens, RN, BSN Medstar Georgetown University Hospital Washington, DC 2017 attendee
**TRACK 5: OUTPATIENT**

*The Ins and Outs of HCCs: How HCCs Affect the Inpatient Stay*

*Tara Bell, MSN, RN, CCDS, CCM, & Lisa A. Farhar, RN, MSN, MBA, CCDS*

**INTERMEDIATE**

This session will help seasoned inpatient CDI staff use their expertise in a new and challenging field. Further, this session will define common HCCs that are as important in the inpatient arena as CCs and MCCs. Learn how to step out of your comfort zone and embrace the future in this new and exciting CDI role.

**TRACK 6: PEDIATRICS**

*Baby Steps: Implementing and Maintaining a Pediatric CDI Program*

*Jeff Morris, RN, BSN, CCDS; Leah N. Savage, MSN, RN, CCDS; & Sheilah Snyder, MD*

**BASIC**

In this panel discussion between a pediatric CDI program physician advisor and two pediatric CDI leaders, attendees will learn key areas for assessment prior to program implementation, clinical conditions unique to the pediatric population, and differences in payment methodologies; they’ll also gain a better understanding of the physician support needed for program success.

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10:45 A.M.—11:30 A.M.  Networking break

Exhibit Hall

11:30 A.M.—12:30 P.M.  Breakout Sessions (choose 1 of 6)

**TRACK 1: CLINICAL & CODING**

*Electronic Laboratory Alerting: Effect on Early Detection and Documentation of Acute Kidney Injury*

*Tarush Kothari, MD, MPH, & Deborah Mallon, RN, MPA, CCS, CCS-P*

**INTERMEDIATE**

Varying standards of care for patients with acute kidney injury (AKI) contribute to poor outcomes and high care costs. This case study shows how AKI detection algorithms can be embedded in biochemistry laboratories of acute hospitals to provide clinical decision support, ensure accurate provider documentation, and prevent adverse patient outcomes.

**TRACK 2: MANAGEMENT & LEADERSHIP**

*Compliance Risks Associated With DRG Mismatches*

*Kathryn DeVault, MSL, RHIA, CCS, CCS-P, FAHIMA, & Mary H. Stanfill, MBI, RHIA, CCS, CCS-P, FAHIMA*

**BASIC**

The issue of DRG mismatches isn’t new, but it’s become more significant with the transition to ICD-10. This presentation focuses on the factors affecting DRG assignment, how to manage the operational and financial issues related to mismatches, and how to monitor and leverage CDI and coding efforts to minimize adverse outcomes.

**TRACK 3: QUALITY & REGULATORY**

*ACDIS Advisory Board Panel Discussion: Ideas Lightning Round*

Join members of the ACDIS Advisory Board as they share a variety of quick-hit ideas in an entertaining “lightning round” panel session. Board members have eight minutes each to share a successful wrinkle in their CDI department, including mortality reviews, clinical validation processes, training residents in documentation, and more.
**TRACK 4: EXPANSION & INNOVATION**

Hospice and Palliative Medicine: Specialties Characterized by Risk and Severity  
*Beth Wolf, MD, CPC, CCDS*

**ADVANCED**

Palliative medicine patients have an increased risk of mortality, and the documentation needs to reflect that risk. Participants will learn documentation needs related to acute care, hospice medical necessity, and professional services billing.

**TRACK 5: OUTPATIENT**

Evaluation & Management 101 for Clinicians  
*Kerin Draak, MSN, WHNP-BC, CPC, CEMC, COBGC, CPC-I*

**BASIC**

The complexity of coding and payer guidelines and limited training in CPT coding likely accounts for the high error rate in physician evaluation and management (E/M) coding. Participants will be able to identify potential gap areas in E/M and apply CPT coding principles to medical record documentation and query opportunities.

**TRACK 6: PEDIATRIC**

The ABCs of Understanding the AHRQ Pediatric Quality Indicators  
*Karen Bridgeman, MSN, RN, CCDS*

**ADVANCED**

Most quality of care and risk adjustment CDI efforts focus on adults and are not easily applied to the pediatric population. This session examines the challenges in the development of pediatric quality measures relating to the AHRQ Pediatric Quality Indicators (PDIs) and provides an understanding of pediatric risk adjustment models.

12:30 P.M.—1:45 P.M.  
**Lunch**

Exhibit Hall

1:45 P.M.—2:45 P.M.  
**Breakout Sessions (choose 1 of 6)**

**TRACK 1: CLINICAL & CODING**

Making Sense and Demystifying the Relationships Within the Grouper  
*Debbie Mackaman, RHIA, CPCO, CCDS, & Shannon E. McCall, RHIA, CCS, CCS-P, CPC, CPC-I, CEMC, CRC, CCDS*

**BASIC**

Understand the moving parts that create the background logic of how diagnoses and procedures interact with one another while uncovering hidden opportunities for revenue accuracy and enhancement in this interactive session. Those new to the profession will understand how information is categorized into the correct DRG and the effect it can have on the revenue integrity of an IPPS hospital.

**TRACK 2: MANAGEMENT & LEADERSHIP**

Auditing Your Staff for Performance Improvement: Tips to Manage Underperformers  
*Rachel Layne Mack, RN, MSN, CCDS, CDIP, & Kari Thie, RN, BSN, CCDI*

**INTERMEDIATE**

Two CDI staff with comparable years of experience nevertheless have very different performance levels—what’s the difference? SCL Health hired a CDI auditor in 2016 to help find out. This session explores the role and responsibilities of the CDI auditor to help leadership design CDI education, manage poor performers, and continue to grow CDI effectiveness.
TRACK 3: QUALITY & REGULATORY
Secondary Effects of APR-DRG Assignments
Candace E. Blankenship, CCDS
INTERMEDIATE
Using the framework of risk of mortality scoring, this session will review aspects of the APR-DRG coding system, effective use of the 3M™ APR-DRG encoder, and APR-DRG tips and strategies for primary and secondary diagnoses.

TRACK 4: EXPANSION & INNOVATION
Clinical Validity: Assessing Clinical Indicators, Composing Nonthreatening Queries, and Avoiding Denials
Erica E. Remer, MD, CCDS, & Kelly Skorepa, BSN, RN, CDIS
INTERMEDIATE
CDI professionals must anticipate which diagnoses are prone to clinical validation concerns and understand the clinical indicators and criteria to be able to assess clinical validity. The session provides a discussion of how to appeal clinical validation denials, and how to give providers formative feedback.

TRACK 5: OUTPATIENT
Calling Rampart: CDI and Your ED Physician
Howard Rodenberg, MD, MPH, CCDS
INTERMEDIATE
Do you remember the show “Emergency” or Dr. Wayne Fiscus in “St. Elsewhere” or Dr. Doug Ross in “ER?” During this session, participants will learn about the very different thought processes of local ED doctors and why they’re resistant to traditional CDI efforts. With this knowledge in hand, attendees will explore ways to develop and implement a focused, goal-directed, impactful CDI program within the fast-paced world of the ED.

TRACK 6: PEDIATRIC
Growing the Physician Advisor Role:
A Tale of Four Pediatric Physician Advisors
Daxa Clarke, MD; Lucinda Lo, MD; Amy Sanderson, MD; & Sheilah Snyder, MD
INTERMEDIATE
In this panel discussion, participants will learn how four pediatric physician advisors—from large to small freestanding children’s hospitals—make an impact on CDI through their EHR, billing, education, and quality improvement projects. Presenters provide additional tools to engage their physician learners and identify synergistic roles for your physician advisor to optimize your pediatric case-mix index, severity, and mortality measures.

2:45 P.M.—3:30 P.M.  Networking break
Exhibit Hall

3:30 P.M.—4:30 P.M.  Breakout Sessions (choose 1 of 6)

TRACK 1: CLINICAL & CODING
Taking the Mystery Out of Encephalopathy
Dawn R. Valdez, RN, LNC, CDIP
BASIC
Experienced or new CDI specialists will benefit from this review of the clinical and coding definitions related to encephalopathy and other altered mental status disorders. The presentation features a discussion of dementia as well as the four common types of encephalopathy—toxic, metabolic, hepatic, and septic—along with the pathophysiology of each type.
**TRACK 2: MANAGEMENT & LEADERSHIP**

**Time to Level-Up Your Data: Welcome to CDI Analytics 2.0**  
Amy Czahor, RHIT, CDIP, CCS  
**INTERMEDIATE**

Very few CDI professionals were trained to be data scientists. During this session, attendees will learn how to leverage statistical process controls to identify trends and obtain practical guidance to begin analytics 2.0 projects using Lean management techniques and John Shook’s *Managing to Learn: Using the A3 Management Process.*

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**TRACK 3: QUALITY & REGULATORY**

**It’s All in the Claims Data! Observed to Expected Ratio & Risk-Adjusted Rates Explained**  
Faisal Hussain, MD, CCDS, CDIP, CCS, & Beth Ming, BSN, RN, CCDS  
**INTERMEDIATE**

CDI can influence the observed to expected (O/E) mortality and risk-adjusted data through second-level reviews. These help maximize the patient’s severity of illness and risk of mortality before the bill is dropped. Attendees will gain insight from the experiences of two academics and be able to adapt a related survey instrument to assess clinician engagement in their CDI program.

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**TRACK 4: EXPANSION & INNOVATION**

**CDI for Acute Inpatient Rehabilitation Facilities**  
Anthony O. Nkwuaku, RN, PHN, MSN, CPHQ, CCDS  
**BASIC**

Inpatient rehabilitation facilities use a totally different payment system. Nevertheless, there are lots of opportunities for CDI programs here. During the presentation, attendees will learn about the IRF-PAI requirement, 60% rule, impairment group categories (IGC), rehab impairment categories (RIC), and the differences from MS-DRGs and MDCs.

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**TRACK 5: OUTPATIENT**

**Understanding MIPS and the Shared Savings and Losses Programs**  
Yvonne Whitley, RN, BSN, CPC, CRC, CDEO  
**INTERMEDIATE**

MACRA is the law, and MIPS and APMs are how this law will be carried out. This presentation provides overview of these programs and defines the effect of CDI efforts on achieving available incentives as well as maximizing shared savings.

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**TRACK 6: PEDIATRIC**

**Kids, Kidney Injury, and Malnutrition**  
Valerie A. Bica, BSN, RN, & Michelle Limo, RN, MSN, MSMIT, CCDS, CCS  
**BASIC**

Attendees will obtain an in-depth look at kidney injury and malnutrition clinical indicators and coding requirements to clarify the documentation differences needed for diagnoses within the pediatric versus adult populations. The information provided could help attendees implement early recognition strategies and tools for query effectiveness.

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4:45 P.M.  
Adjourn

5:00 P.M.–6:30 P.M.  
**Closing Night Awards Reception** *(Optional)*

For $25 additional, enjoy appetizers and drinks in an indoor/outdoor venue where we continue to celebrate the ACDIS Achievement Awards winners.  
*Requires separate registration*
Day 3—Thursday, May 24

7:00 A.M.—8:00 A.M.  Continental breakfast  
Exhibit Hall

8:00 A.M.—9:00 A.M.  General Session  
The Survival Guide to Being Human—And the Art of Happiness  
Allison Massari

9:15 A.M.—10:15 A.M.  Breakout Sessions (choose 1 of 6)

**TRACK 1: CLINICAL & CODING**

*A Matter of Principal (Diagnosis)*  
Sandra Routhier, RHIA, CCS, CDIP  
*INTERMEDIATE*  
Principal diagnosis selection is one of the most crucial decisions that coding and CDI professionals must make. Even with advanced skills and years of experience, some cases still present challenges. This presentation will cover key concepts that govern principal diagnosis selection and problematic scenarios.

**TRACK 2: MANAGEMENT & LEADERSHIP**

*How to Engage and Motivate Your CDI Staff*  
Mark N. Dominesey, RN, BSN, MBA, CCDS, CDIP, CHTS-CP  
*INTERMEDIATE*  
Many CDI managers are challenged with finding opportunities to engage seasoned CDI staff who have “hit a wall” with their day-to-day work. Participants will explore various role specializations, gain insight into developing roles specific to their institutions, and obtain a career ladder “shelf-ready” for implementation.

**TRACK 3: QUALITY & REGULATORY**

*Mortality Risk Adjustment and HCCs: Is This the New ‘Sweet Spot’ for Physician Buy-In?*  
Kyra W. Brown, RHIA, CCS, CCDS  
*INTERMEDIATE*  
CDI staff are always looking for the “what’s in it for me” factor to engage physicians. Understanding CMS 30-Day Risk-Standardized Mortality Measures, the factors involved in the star rating assignment, and the link to HCCs could be the new “sweet spot” for physician buy-in.

“I was a first-timer and absolutely loved it! I learned so much and it was so interesting. I loved meeting so many people who are into the same career/interests.”  
Jennifer Wood, RN, CDI  
Community Hospital Anderson  
Anderson, IN  
2017 attendee
TRACK 4: EXPANSION & INNOVATION

Inpatient Psychiatric Hospital: Quality Care and Reimbursement Potential
Linda Jackson, RHIT
BASIC
This presentation details the journey of a behavioral health hospital’s quest to embrace CDI when there was no precedent to do so. Behavioral health hospitals need to employ CDI tenets and practices to support great quality of care, accurate coding, and documentation that supports the level of care, resources, and behavior trends.

TRACK 5: OUTPATIENT

We Started an Outpatient CDI Program, Now What Do We Do?
Sara Atwater, MD, MPH, & David Reece, BSN, RN, CCDS
INTERMEDIATE
Outpatient CDI has blurred definitions, few established guidelines/metrics, limited software, and a mostly “home-grown” group of relatives. This session provides insight from an established outpatient CDI program on incorporating an EMR as a software tool, identifying ROI and tracking impact, defining program metrics, and offering provider perspective on challenges faced by ambulatory providers.

TRACK 6: PEDIATRIC

A Primer for an OB/GYN Clinical Documentation Excellence Program
Sandra Surratt, BSN, RNC-OB, & Michelle Walters, MSN, RNC-OB
BASIC
This presentation includes detailed strategies for physician engagement and education to ensure accurate documentation of diagnoses and procedures as they affect quality measures and publicly reported data.

10:15 – 11:00 A.M.
Networking break

11:00 A.M.—12:00 P.M.
Breakout Sessions (choose 1 of 6)

TRACK 1: CLINICAL & CODING

Coding Clinic Update (Repeat Session)
James S. Kennedy, MD, CCS, CDIP, CCDS
INTERMEDIATE
See description above.

TRACK 2: MANAGEMENT & LEADERSHIP

2 Departments, 1 Mission: How CDI and Coding Work in a Service Line Structure
Kimberly A. Seery, RHIT, CDIP, CCS, CHDA, CPC, CRC, & Karen Frosch, CCS, CCDS, CRC, CPHQ
BASIC
Walk away with tools and tips on how to best align your clinical, CDI, and coding areas within their organization. This session explores the positive benefits of daily interaction between CDI and coding, workflow systems, and innovative solutions to common concerns that plague the acute care setting such as delayed query response, missed queries, and delays in revenue cycle.
**TRACK 3: QUALITY & REGULATORY**

**Effectively Managing Sepsis Denials**  
Krysten Brooks, RN, BSN, MBA  
**INTERMEDIATE**

How can CDI staff identify sepsis query opportunities when there is so much confusion? What policies and processes should your organization have in place to aggressively manage sepsis denials? This presentation will provide a comprehensive overview of sepsis core measures, describing a successful process for denials management focused on the ESCAPE methodology (Evaluate-Search-Coding-Assess-Physician-Escalation).

**TRACK 4: EXPANSION & INNOVATION**

**How to Mitigate and Manage Denials (Repeat Session)**  
Tammy Combs, RN, MSN, CDIP, CCS, CCDS, & Melanie Endicott, MBA/HCM, RHIA, CDIP, CHDA, CPHI, CCS, CCS-P, FAHIMA  
**INTERMEDIATE**

See description above.

**TRACK 5: OUTPATIENT**

**The Impact of Inpatient CDI on Risk Adjustment Factors**  
Jon Elion, MD, FACC  
**INTERMEDIATE**

Based on review of the current literature, attendees will learn about a unique study based on actual data and risk adjustment factor (RAF) aggregated from a large number of institutions. To "bring the data to life," participants will explore a scatter-plot illustration of baseline RAF versus final RAF.

**TRACK 6: PEDIATRIC**

**CDI Life Without CAC: Are You Getting the Most Out of Your Electronic Health Record and Resources?**  
Stephanie Hill-Sandoval, RN, & Lucinda Lo, MD  
**INTERMEDIATE**

While 100% concurrent review might be touted as the gold standard, there are usually more charts to review than time and resources. Speakers will share three methods to prioritize CDI workflow and share case examples demonstrating CDI metrics both before and after the implementation of these methods.

12:00 P.M.  
Adjourn

*Agenda and speakers subject to change.*

“**I look at the conference as a ‘professional recharge.’ We immerse ourselves in an environment of smart, driven, and talented professionals who all share a passion for CDI—your batteries recharge and send you home with an increased pride in what you do and a new drive to grow and improve to perform better and more effectively.”**

Laurie Prescott  
CDI Education Director, ACDIS
At the conclusion of the **2018 ACDIS Conference**, you will be able to:

- **Understand** additional roles for physician advisors that will be synergistic to CDI goals
- **Incorporate** case management and utilization review to enhance CDI outcomes
- **Define** clinical conditions unique to the pediatric patient population
- **Identify** strategies for program success, maintenance, and expansion
- **Partner** with the laboratory to reduce variability in the diagnosis, staging, and management of patients with AKI in real-world settings
- **Understand** how the selection and manipulation of diagnoses and procedures influences the DRG assignment
- **Define** malnutrition in the pediatric population and understand the impact of not capturing this diagnosis
- **Identify** benefits of establishing provider documentation tools within your EHR
- **Recognize** the importance of statistical process control and how it can be used to measure process improvement for CDI changes
- **Identify** and discuss ambulatory provider program engagement and integration
- **Describe** benefits of implementing quality focused pre-bill audits as well as understand infrastructure needs for a successful and effective workflow
HOTEL INFO

Book your hotel room by April 20, 2018 and get special rates starting at $169 (tax not included, rate varies by hotel).

San Antonio Marriott Riverwalk Hotel
889 E Market Street, San Antonio, TX 78205
Reservation center: 800-648-4462
• Room rate $219/night
• Hotel cut-off date is Friday, April 27, 2018

San Antonio Marriott Rivercenter
101 Bowie Street, San Antonio, TX 78205
Reservation center: 800-648-4462
• Room rate $219/night
• Hotel cut-off date is Friday, April 27, 2018

Hyatt Regency San Antonio Riverwalk
123 Losoya Street, San Antonio, TX 78205
Reservation center: 888-421-1442
• Room rate $219/night
• Hotel cut-off date is Friday, April 20, 2018

La Quinta Inn & Suites
San Antonio Riverwalk
303 Blum Street, San Antonio, TX 78205
Reservation center: 866-527-1498
• Room rate $159/night
• Hotel cut-off date is Friday, April 20, 2018

Hilton Palacio Del Rio
200 South Alamo Street, San Antonio, TX 78205
Reservation center: 800-445-8667
• Room rate $199/night
• Hotel cut-off date is Friday, April 20, 2018

If calling to make your reservation, please mention “ACDIS” to receive the discounted rate.

For online reservations, go to hcmarketplace.com/acdis-conference and click on the hotel tab.

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