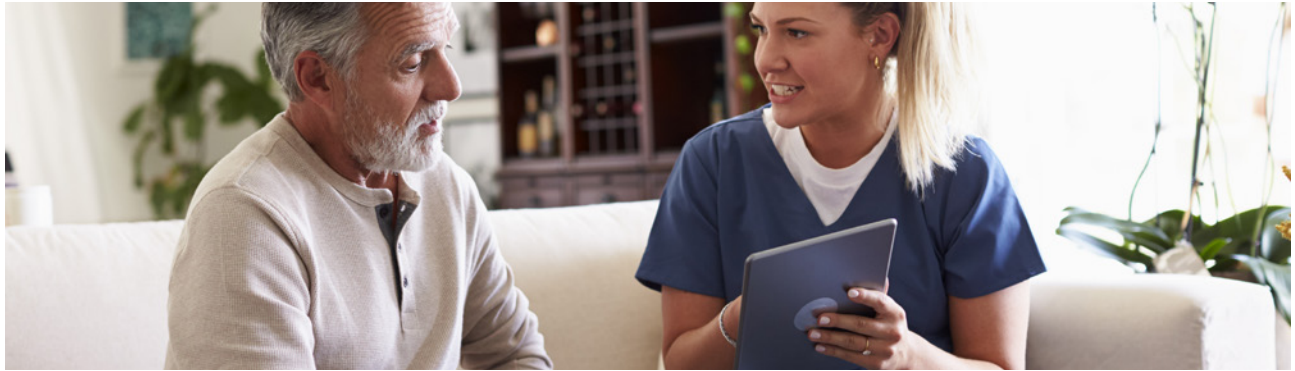




Improving the Quality of the Hospice Patient Narrative with Speech Recognition

**Telling a Meaningful
Patient Story in the
Documentation Age**

Telling a Meaningful Patient Story in the Documentation Age.



About The Speech Recognition Impact Study

nVoq recently partnered with Amedisys, a leader in clinical home-based care, to scientifically review the impact of speech recognition on the quality of hospice physician documentation as it relates to meeting specific CMS benefit requirements.

Hospice care is undoubtedly one of the most noble services in healthcare. For caregivers who bring patients comfort in the final stages of their lives, providing that care has never been more challenging.

Home health & hospice organizations face increasing demand for their services, as care more frequently moves out of the acute hospital environment in effort to make it more cost effective. Many organizations are also beginning to extend the scope of their care by building advanced illness care programs that serve chronically ill patients earlier in their care pathway¹.

Challenges in Documenting Hospice Care



**Increasing Demand
for Services**



**Clinician &
Staff Shortages**



**Specific Reimbursement
Requirements &
Documentation Fatigue**

Clinician shortages and specific reimbursement requirements also challenge hospice organizations. For a patient's care to be eligible for reimbursement benefit from the Centers for Medicare and Medicaid Services (CMS), which provides benefits to more than 80% of all hospice patients, clinicians must effectively capture a unique patient narrative that meets meticulous documentation requirements. Ongoing demand to provide more of this care with fewer clinicians makes this task especially challenging.

¹ "Top Hospice Trends to Watch in 2021." Parker, Jim. Hospicenews.com. January 1, 2021.

The Cost of Not Enough.

The way in which home-based hospice care is provided also makes comprehensive documentation essential. Services provided by the interdisciplinary group (IDG), which includes clinicians, social workers, chaplains, bereavement coordinators and others, rely heavily on what is documented by nurses and physicians. The IDG works a coordinated care plan according to the documented patient narrative and team discussion. The clinical documentation also becomes the basis of what is used to assess the patient's care for Medicare reimbursement.

As a result, the quality of documentation is paramount; both to support the communication and coordination of the interdisciplinary group, and also in securing Medicare reimbursement.

Large hospice organizations spend millions in rework, trying to resolve unpaid claims each year.

Hospices spend an extra \$25 to \$30 each time they rework a denied claim. — American Medical Association

If the patient documentation is insufficient in meeting Medicare benefit requirements, it is denied with an Additional Documentation Request (ADR). This requires an already-stretched-thin hospice team to go back into a dormant patient chart, examine the notes and determine where documentation is lacking so that they can attempt to rebill for the patient's care. Rather than spending this time caring for new patients, the team unnecessarily spends time on rework.

reimbursement per year. In 2020, the American Medical Association estimated that the CMS denial rate is from 6-10% for hospice care claims and that hospices spend an extra \$25 to \$30 each time they rework a denied claim.

This means that an organization with 25,000 annual hospice admissions spends thousands of dollars on rework and writes off around 1,500 claims per year. If hospice billings are valued near \$375 million in a large hospice organization, write-offs will cost around \$22.5 million or more annually. These costs have become so predictable that it is now prudent for hospice organizations to budget for a write-off of at least 5-6% of all planned CMS billed claims.

What this means for hospices is that for every 100 admissions, there are tens of thousands of dollars at risk. Money that could be used to expand, serve and continue the mission of the organization and the patients and families they serve.

LARGE HOSPICE ORGANIZATION

Hospice Admissions Annually	25,000
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Number of Episode Write-offs	1,500
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Percentage of Episode Write-offs

6%

Hospice Billings Annually	\$375 MILLION
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Percentage of Episode Write-offs	6%
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Write-offs Annually

**\$22.5
MILLION**

An Emerging Solution.

Speech recognition technology can help. Already widely used in acute care settings, speech recognition in the post-acute care space is increasingly adopted to support effective communication among caregivers and construct essential documentation for CMS & healthcare insurance providers.

A spoken note created with speech recognition is typically twice as long as a typed one, and follows the natural flow of a caregiver's speech, creating a true, meaningful narrative. When notes are typed, caregivers are often inclined to use medical shorthand for speed and efficiency. This leads to errors and gaps when it is time to submit documentation for financial reimbursement.

When speech recognition technology has been specifically adapted for hospice care, it can allow caregivers to speak a more detailed, higher quality narrative, which offers an improvement over most typed notes in supporting the IDG and meeting CMS requirements.

A spoken note is typically twice as long as a typed one—and follows the natural flow of speech, creating a true, meaningful narrative.



The Study.

nVoq, a leading provider of speech recognition technology for home health & hospice care, recently partnered with Amedisys, a leader in clinical home-based care, to scientifically review the impact of speech recognition on the quality of hospice physician documentation as it relates to meeting specific CMS benefit requirements.

Amedisys provides home-based care to more than 415,000 patients annually, which makes care-team collaboration and communication paramount. Amedisys sought a speech recognition solution that would help its care team enhance workflow efficiency and improve clinical documentation quality. This specific study assessed what happened when Amedisys hospice physicians adopted speech recognition and how well their documentation met CMS requirements.

CMS requires that every hospice narrative note includes a **prognostic statement**, which states that the patient will survive six months or less if their disease runs its normal course, and evidence of **disease progression** as it relates to terminal illness. Additionally, the note must include quantitative data elements that capture the patient's cognitive, functional and nutritional status such as the **Palliative Performance Scale (PPS)**.

The results of the study show that speech recognition has a statistically significant impact on improving the quality of the physician hospice note as it pertains to meeting CMS requirements.

Speech Recognition Impact

Improved compliance with requirements for financial benefit

Increased accuracy and efficiency

Reduced write-offs

Increased clinician satisfaction

Methodology

A rubric was developed that identified three key quality elements in a physician's hospice documentation: prognostic statement, disease progression and a palliative performance scale (PPS).

Additional data collected included anthropometric measurements (weight, BMI, mean arm circumference measurement) and activities of daily living documentation. Key-word search criteria were developed to identify the key elements contained within each note.

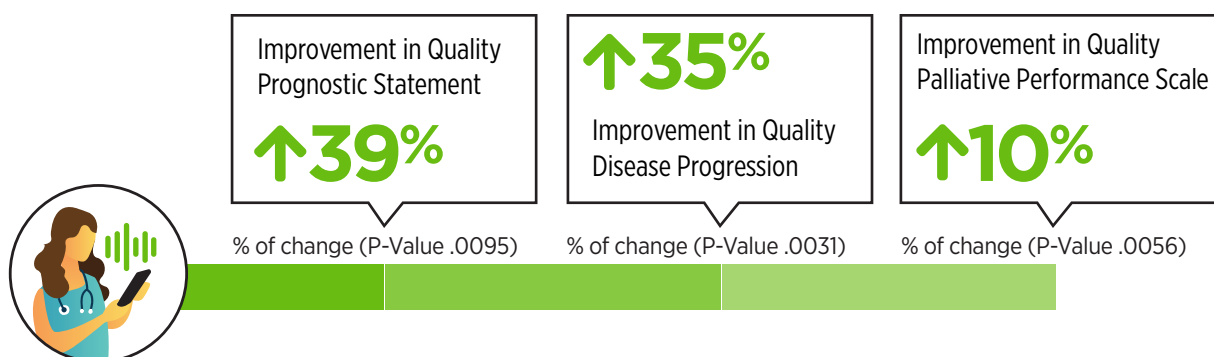
7,300 hospice narrative notes from 21 hospice physicians were analyzed. Baseline data on the quality of the typed notes as it pertains to meeting the criteria for CMS above, was first obtained.

The typed notes were then compared to the mean difference in documentation of the same group of physicians' notes after the implementation of speech recognition. The statistical analysis was performed using a paired sample t-test, and the difference was measured as a change in percentage in meeting rubric criteria along with the other key metrics listed above.

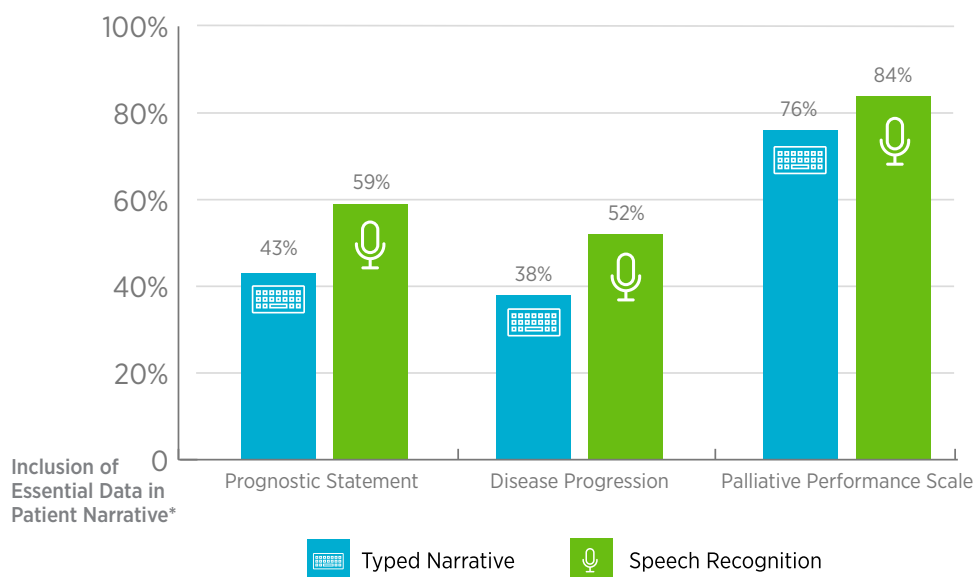
The Results.

After the implementation of speech recognition technology, the quality of documented prognostic statements improved by 39%, disease progression notes by 35%, and compliance to the palliative performance scale (PPS) by 10%.

Key Improvements on the Quality of the Hospice Patient Narrative with Speech Recognition



Speech Recognition Impact Study Findings



*Comparison of 7.3K narratives

Additional Key Findings

- ↓ 50% reduction in documentation time (self-reported)
- ↑ Length of note increased by 42% (character count)
- ↑ Increased job satisfaction (self-reported)
- ↑ Improved ADL documentation
- ↑ Improved Anthropometric Measurement documentation



Caregiver Impact.

The improvement that speech recognition can bring to both the practice and quality of a caregiver's work is profound, but only if hospice providers are willing to make the switch. Those who come to home health & hospice organizations from the acute care environment are often accustomed to using speech recognition, but many others are not and may be apprehensive about making the change. Once they do, however, the experience is clearly superior.

Documenting hospice care is about *telling a patient story*, and speech recognition allows clinicians to do just that. It captures exactly what they say, the way they say it. That story will inform how every member of the care team sees and serves that patient.

After adopting speech recognition, Dr. Stacey Brown-Brocklehurst shared that it “makes caregivers’ lives easier because we can focus on the patients. It has changed my life. The team is not waiting for me to type. It’s so much better for me and for the interdisciplinary group.”

The old way of capturing a robust patient story requires elaborate typing, which is often labor

intensive and time consuming for a mobilized caregiver team.

These teams are often responsible for providing care to up to hundreds of patients at a time. They regularly work from home and during odd hours, so protecting them from burnout is of critical concern to their employers. With staffing as a top challenge at every hospice organization, caregiver efficiency and job satisfaction are critical.

After implementing the nVoq speech recognition solution at Amedisys, Dr. Amy Moss, Senior Vice President of Hospice Clinical Operations at Amedisys, observed that “it allowed our clinicians to tell the patient story in a way that was meaningful to them, both in their desire to provide the right level of care and also in meeting the technical requirements of their job.”

The increase in efficiency that our physicians have achieved has given them better work-life balance. The result is improved provider satisfaction.

Dr. Amy Moss
Senior Vice President of Hospice
Clinical Operations, Amedisys

Speech recognition makes our lives easier because we can focus on the patients. It has changed my life.

Dr. Stacey Brown-Brocklehurst
Medical Program Director,
Amedisys

“The increase in efficiency that our physicians have achieved has given them better work-life balance. The result is improved provider satisfaction.”

Dr. Abi Katz, Vice President and Executive Medical Director at Amedisys, championed the organization’s initiative to implement speech recognition.

“In addition to efficiency, our notes are more robust and have greater clinical relevance,” she said. “It also helps that nVoq not only understands medical terminology, but unique terms to the hospice subspecialty. That’s really powerful.”

“In a hospice workflow, what the physicians write in their narrative is critical to every other aspect of what follows downstream with the patient record. It significantly impacts the patient’s care, she shared, “so being able to demonstrate an improvement in the actual body of the language that was used by our physicians was particularly important to our team at Amedisys.””

It also helps that nVoq not only understands medical terminology, but unique terms to the hospice subspecialty. That’s really powerful.

Dr. Abi Katz
VP, Executive Medical Director,
Amedisys



The Imperative.

The home health & hospice market continues to grow and expand to serve chronically ill patients earlier in their care journey. In order to provide the best care to these patients, providers need access to the same technological advances that are commonplace in acute care.

The efficiencies gained with speech recognition give caregivers more time for patient engagement, without sacrificing quality or work-life balance. The quality of the documented patient narrative is in fact vastly improved. As more home health & hospice organizations take advantage of these improvements, they can improve their bottom line and take better care of their providers, who in turn can take better care of their patients.



SPEECH RECOGNITION PLATFORM

nVoq offers the most advanced technology for utilization of speech recognition in post-acute care settings. It is supported by dictionaries that have been specifically customized for hospice care. Accessible on a tablet and at a low cost, the nVoq solution is suitable for the broad, mobilized caregiver teams that collaborate to provide hospice care.

For a demo or more information, contact us at Connect@nvoq.com or call 866.383.4502.