



# Bells AI

Smart Documentation Assistance



NEW YORK  
**ALLIANCE FOR  
INCLUSION & INNOVATION**

# Agenda

## The Challenge

- What is the industry facing and how does Bells AI address it?

## The Workflow

- What does a day in the life look like for staff in Bells AI?

## The Results

- What measurable impact is MHA experiencing?

## The Backend

- What configurability is available at the org and staff level?

## Feedback

- What questions or thoughts do you have about Bells AI?

# The Challenge

## *Documentation overload leads to provider dissatisfaction*



In many provider organizations – mental health, addictions, I/DD, children's services



It affects everyone: CEOs, clinical directors, supervisors, service providers, and the QA team



Providers spend 40% of their time/2 days a week on clinical documentation



Average time from session to note signing is over 3 day



Between 15% and 45% of clinical documentation has missing or erroneous information

- Too many notes to review and complete
- Notes rejected due to minor spelling or grammar errors
- Too much time documenting – and then correcting mistakes
- Inconsistencies and inefficient training
- An inability to tag errors or track activity

# Your Challenge

## Documentation is Broken

- ⦿ Affects: CEOs, clinical directors, supervisors, service providers, and the QA team.
- ⦿ Too many notes to review and complete
- ⦿ Too much time documenting — and then correcting mistakes
- ⦿ Inconsistencies and inefficient training

*Handwritten notes on a document titled "Format for CPST progress notes: Address the following points:"*

*250/310*

- 1) What was going on with the client – how was the client presenting? (What symptoms did you observe? What was notable in mood, behavior, or verbally?) *Identify Focus*
- 2) What did the client want/need to achieve in today's meeting? *Identify Focus*
- 3) What was your intervention? Was it congruent with the CPST definition? (Why did the client REQUIRE your assistance with the task?) *Identify Focus*
- 4) How did the client respond and what was the outcome of the intervention? (Rate client as progressing, unchanged, or regressing in response to intervention & state if completed that required intervention)
- 5) What is the follow-up plan? (Include your and client's homework or task completion expectations by next session) *Identify Focus*

*250/310*

**The "WHAT" of CPST progress notes: Use the following action words to describe what you did:**

Accessing	Advocating	Assessing	Collaborating	Communicating	Developing
Educating	Empowering	Engaging	Goal Setting	Identifying	Implementing
Intervening	Listing	Managing	Modeling	Motivating	Planning
Prioritizing	Problem-Solving	Reflecting	Supporting		

*695*

**The "HOW" of CPST progress notes: Specific IDDT Motivational Interviewing techniques:**

*7221*

Open ended questions	Affirmations	Simple reflections
Double-sided reflections	Shifting focus	Agreement with a twist
Summarizing	Eliciting change talk	Express empathy
Develop discrepancy	Avoid argumentation	Roll with resistance
Support self-efficacy	Recognize ambivalence	Recognize change talk
Use importance/confidence ruler	Permission to give advice	Make action plan
Identify problematic thought	Increase positive thoughts	Increase positive activities
Relaxation skills	Identify social problems	Increase social skills
Automatic thought record	Mini-wrap plan	Longitudinal assessment
MI relapse prevention worksheet	Payoff matrix	Contextual assessment
Worked on immediate needs		Supportive Counseling

*719*

**Recording information in the correct place on the progress note:**

- 1) Observations and Mood sections of the progress note address CPST format #1
- 2) Additional information and plan section may be used to elaborate (briefly – one sentence – describe the focus of today's meeting)
- 3) Interventions section of the progress note addresses CPST format #3 (CPST and Evidence-based practice of integrated dual diagnosis should always be checked)
- 4) Client response to interventions section of the progress note address CPST format #4

*100*

*100*

*100*

# Less Paperwork, More Client Care.

Spend 50% less time on documentation.

We created the first and only human services AI documentation tool that's smart, intuitive and seamless.

Not to mention an amazing ally.

# Configurable, Smart Features



## Assisted Data Capture

- Go from mobile to desktop seamlessly
- Choose a template
- Written notes
- Capture notes via photo
- Use voice to text
- Utilize expansions



## Data Accuracy

- Contextual recommendations for compliance and reimbursement
- Proof grammar + spelling
- Check clinical vocabulary
- Leverage user dictionary
- Fact-check treatment notes



## Contextual Recommendation Engine

- Get clinical support
- Set up contextual keywords
- Include must-have blocks of text
- Optimize billing codes

# Results



Key Metric	Improvement
Average time from session to sign	<b>+56%</b>
Faster reimbursement submission	<b>1.5 Days</b>
Average note writing speed	<b>+67%</b>
Average notes per Direct Service Provider	<b>6 More Notes a Month</b>
Average claims per Direct Service Provider	<b>+11%</b>

# Client Feedback

**Q:** About how much time did Bells save each user per week?



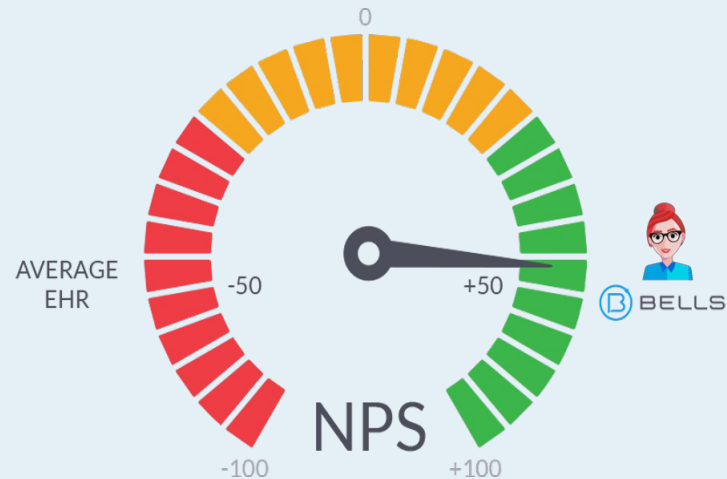
**5 hours**

**Q:** How would you rate Bells' ease of use?



**4.5/5**

**Q:** What is Bells' NPS score?



# What Does this Mean for You?



## Clinical Impact

### Increased Access to Care

Help more people with increased staff capacity

### Improved Ramp Time

Faster ramp time for service providers doing clinical documentation

### Better Morale + Less Turnover

Easier note-taking helps employee satisfaction

### Less QA Headache

Catching errors on the front-end leads to less back-and-forth with QA and service providers



## Financial Impact

### More Revenue

See 6 more clients per week per DSP

### Payroll Savings

Save 21 hours per month per service provider

### Faster Cash Flow

Cut 1-2 days off payer reimbursement cycle

### Reduced Risk of Recoupment

Better notes reduce the risk of recoupment

# MHA of South-Central Kansas Case Study

Bells resulted in 16% increase in avg. revenue per provider

## ◎ **Situation**

MHA joined the Bells JDP looking to leverage AI technology to improve staff productivity and increase revenue

## ◎ **Solution**

Implemented Bells to staff in 3 waves; early adopters, adopters and technology laggards. Used momentum of early adopters to encourage waves 2 and 3

## ◎ **Impact**

- Reduced session-to-sign time by 50%
- Improved note writing time by 49%
- Avg. DSP wrote 28% more notes a week
- Avg. weekly revenue per DSP increased 16%

“We are now getting new staff billing at full capacity in 3 weeks versus 6 weeks because of Bells.”

**Mary Jones**

*President & CEO,  
MHA South Central Kansas*

# What We're About

## *MHA*

- ① Founded in 1957 – a 501C 3 non-profit in Wichita, Kansas
- ① Provide services including prevention, education and community-based treatment (employment, case management, peer services). Also provide outpatient services, medication management, and SUD treatment. In addition, they are the largest housing provider for those with mental illness in the state.
- ① 32 programs and 180 employees serving over 10,000 people annually across South Central Kansas

# Our Agency's Goals

## *Strategic Imperatives*

- ① **Strengthen and protect the community's mental health:**  
Provide the most comprehensive services to consumer in South Central Kansas
- ② **Invest in workforce solutions:** Increase staff morale (reduce turnover)
- ③ **Ensure financial sustainability:** Increase revenue and improve revenue cycles.

# What We Learned

## *Best Practices*

- ① Staff want solutions to focus on clinical priorities
- ① Current, easy access tools encourage enthusiasm in staff (mobile, shortcuts, intuitive to service delivery)
- ① Customization gives control to staff while ensuring medical necessity and clinically supported notes
- ① Supervisors were spending the majority of their time reviewing and auditing notes
- ① Collaborating with a trusted partner who views you as the content expert is central to success

# Remarkable Outcomes

## *Results*

- ⦿ Reduced session-to-sign time by 50%
- ⦿ Improved note writing time by 49%
- ⦿ Average direct support professional (“DSP”) wrote 28% more notes per week
- ⦿ Average weekly revenue per DSP increased 16%

# Agency's Response

## *What Our Staff is Saying*

- ① “Getting back 8 hours of clinical documentation time for one clinical professional is probably four or more consumers that can be added to a caseload.”
- ② “I could not be happier with the product. We are able to guide staff through the documentation process in a way I could not even imagine before.”
- ③ “To be able to leave work after 10 minutes of writing notes, rather than an hour and a half of writing notes, is going to improve my work-life balance.”
- ④ “Doing my intake and therapy notes is so much simpler. Personally, I always struggled with finding the balance between complete documentation and not writing a book. The custom note sections really help me with that.”

# User Quotes

“It makes my job so much easier.”  
– Amanda B., (Parent Support Specialist)

“Bells is user friendly and assists with submitting notes in a timely manner!”  
– Wilbert W., (Mental Health Professional)

“This saves me an hour each day.”  
– Reanne C., Case Manager

“When I’m done with work, I leave. I don’t stay there until 6:30 finishing my notes. Thanks to Bells, I walk out of the door at 5:00.”  
– Baily B., Clinician & Supervisor

“We’re seeing a quicker ramp-up to billing... at this rate, we could have every employee billing at full capacity in three weeks.”  
– Mary J., CEO

# Wings for Children & Families Case Study

Bells resulted in 30% increase in avg. revenue per provider

## ◎ **Situation**

Wings joined the Bells JDP looking to improve staff productivity and throughput on their notes

## ◎ **Solution**

Within 30 days, 100% of staff trained on Bells and doing 99% of their Notes in Bells

## ◎ **Impact**

- Reduced Session-to-Sign time by 67% (45 hours to 15 hours)
- Improved Note writing time by 72%
- Avg. DSP wrote 6 more notes a week, resulting in a 15% increase
- Avg. weekly revenue per DSP increased 30%

“Bells has been transformational to our agency and staff in terms of revenue generated, staff productivity and note quality.”

**Trish Niedorowski**  
*Executive Director, Wings*