



HOSPITAL CHECK-IN

Linking hospitals to
quality and safety
resources

June 2009

LATEST STRATIS HEALTH HIT TOOLKIT RELEASED

Released June 1, 2009, the [Health Information Technology Toolkit for Home Health](#) is the second Stratis Health toolkit funded by Aging Services of Minnesota and Alliance Purchasing. The [Health Information Technology Toolkit for Nursing Homes](#) was released in February 2009.

New and updated versions of other Stratis Health HIT toolkits are in the works, including a new e-prescribing toolkit and updated versions of our HIT toolkit for clinics and HIT toolkit for small and rural hospitals.



In 2007, the Minnesota Legislature mandated that all Minnesota health care providers have an interoperable electronic health record (EHR) system in place by January 1, 2015. Stratis Health is helping home health agencies, nursing homes, clinics, and hospitals meet this mandate through the selection and use of health information technology to improve quality of care and increase patient safety.

Based on an extensive background helping providers adopt HIT, Stratis Health's developing toolkits, and working with providers on quality improvement and patient safety, the HIT toolkits will help facilities improve quality of care, medication safety, communication, patient and family satisfaction, as well as enhance coordination of care, support documentation and reimbursement, increase referrals, and help patients achieve their health care goals.

The HIT toolkit for home health agencies provides tools, tested in the home health environment, to plan and make the right choices for their processes. It

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can be used for implementing a comprehensive HIT or EHR system, for acquiring individual applications, or for overhauling existing systems.

Laying a solid foundation that addresses hardware, software, people, and policies is a critical first step. A carefully constructed foundation and the right tools to plan and implement HIT can mean the difference between systems that are not well-used, and those that achieve value.

Watch Hospital Check-In in the next few months for news about additional new and updated toolkits. For more information, contact Stratis Health's Health Information Technology Services, 952-854-3306, info@stratishealth.org.

CLINICAL QUALITY IMPROVEMENT

Patient Safety Resources

Medical Errors and Patient Safety: AHRQ PSA Campaign for Patient Involvement

In partnership with the private sector, the Agency for Healthcare Research and Quality has launched a major federal [initiative](#) to reduce medical errors and improve patient safety in federally funded health care programs. Through this initiative, AHRQ provides tools and techniques for health care providers, information on working conditions, communication, and conferences and workshops, as well as tips for consumers.

Patient Safety through Teamwork and Communication Toolkit

The Denver Health Medical Center's [toolkit](#) provides techniques to assist health care organizations in improving teamwork, team communication, and patient safety.

Overview of Health Care Associated MRSA

View a CDC overview of hospital-associated Methicillin-resistant Staphylococcus aureus. MRSA is a bacteria that is resistant to certain antibiotics, such as methicillin and other more common antibiotics such as oxacillin, penicillin, and amoxicillin. Staph infections, including MRSA, occur most frequently among persons in hospitals and health care facilities, such as nursing homes and dialysis centers, who have weakened immune systems. [More information >](#)

New York Hospital Targets Zero MRSA Cases

Read about a Rochester, New York, hospital that eliminated MRSA in its cardiothoracic unit. No MRSA cases have been reported in the unit since January 2008. [More information >](#)



Surgical Care Improvement/Heart Failure National Recorded Call

A [presentation](#) on national SCIP performance, given by Dale Bratzler of the Oklahoma Foundation for Quality in April 2009, is available to view and download.

Updated SCIP Antibiotic Selection Pocket Card

Updated in March 2009, this [antibiotic selection card](#) reflects the combined published recommendations of the Hospital Specifications Manual for discharges from April 1, 2009 through September 30, 2009.

DATA AND PUBLIC REPORTING



Data Submission Reminder

Next quarter of clinical data due to Warehouse: Q1 09
(January - March 2009)

Data submission deadline: August 15, 2009
Must use CART version: 4.5



Abstraction Assistance

To receive Stratis Health assistance with abstraction, email Robyn Carlson at rcarlson@stratishealth.org, or call 952-853-8587.

UTILIZATION

Hospital Discharge Appeal Reminders

When a Medicare beneficiary asks for a hospital discharge appeal, Stratis Health requests a copy of the medical record from the hospital, including copies of the Important Message from Medicare (IM) and the Detailed Notice of Non-coverage.

When sending this documentation to Stratis Health, please observe the following procedures:

- Send both page 1 and page 2 of the notices to Stratis Health. [Review instructions](#) for completing the revised CMS-R-193 form. Confirm that your organization has the following discharge appeal phone numbers listed on the IM: **1-866-894-1327** and **TTY 1-800-627-3529**. These phones are monitored seven days a week.
- Provide “detailed and specific information” about the patient’s current medical condition and the reason for discharge in clear, understandable language on the Detailed Notice of Non-coverage. Explain clearly, in complete sentences, the reason the patient no longer meets inpatient criteria, such as, “You no longer require oxygen; you are taking medications by mouth; you are tolerating a regular diet,” etc. Avoid medical terminology and acronyms.

Stratis Health continues to receive insufficient information on these notices.

When a beneficiary has been discharged from one acute inpatient setting to another acute inpatient setting, the beneficiary does not receive a follow-up copy of the IM from the discharging hospital if he/she will remain at the same level of care.

Example: A beneficiary is admitted to short-term acute care hospital #1 and is discharged to long-term acute care hospital #2. Hospital #2 is responsible for providing the beneficiary with a copy of the IM if the beneficiary remained at an acute inpatient level of care.

Other Hospital Notices

Review the updated version of the [Pre-Admission/ Admission Hospital Issued Notice of Non-coverage \(HINN\)](#) notices and further instructions on completion of HINNs, IMs, and Detailed Notices.

Observation Stays

Stratis Health is not authorized to review observation stays or three-day qualifying stays. Refer beneficiaries to 1-800-MEDICARE (1-800-633-4227) to speak to a Medicare representative about observation.

Patient ID Number

In order to limit use of confidential identifiers, using the Health Insurance Card (HIC) or Medicare number as the patient identification number on Medicare notices is not recommended.

EVENTS

Minnesota Critical Access Hospital and Rural Health Conference: Rethinking Rural Health Care, A Community Effort, June 15-16, 2009, Duluth

Featured speakers include Minnesota Commissioner of Health, Sanne Magnan, MD; Minnesota Hospital Association President and CEO Lawrence J. Massa; and National Rural Health Association CEO Alan Morgan. [More information >](#)

Webinar: Medication Safety, Complex Issues for All, June 18, 2009, 12:00 pm, CT

Presented by the National Quality Forum and Texas Medical Institute of Technology, this patient safety Webinar is intended to assist health care professionals more rapidly identify and adopt techniques presented in NQF’s Safe Practices for Better Healthcare 2009 Update.

Session topics will include policy development for medication management, current issues in medication safety, pharmacist leadership in the hospital, medication reconciliation, and the patient perspective. [More information >](#)

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EVENTS CONTINUED

Minnesota e-Health Summit 2009, June 24-25, 2009, Brooklyn Park



Register by June 19 for this year's Minnesota e-Health Summit: *Strategies for Success in Challenging Economic Times*. The Summit will take place Thursday, June 25, from 8:15 a.m. to 4:30 p.m. at the Northland Inn. A pre-Summit workshop entitled: *The Road to Effective Use of EHRs in Minnesota* will take place Wednesday, June 24, 1:00 to 5:00 p.m.

For the fifth year, Stratis Health is a proud sponsor of the Summit and Pre-Summit. Presentations will be provided by Stratis Health President and CEO Jennifer P. Lundblad on strategies for success in challenging economic times and by Director of Health Information Services Susan Severson on EHR planning resources. [More information >](#)

Living with Lynch Syndrome: An Update for Families with HNPCC, June 27, 2009, Rochester

The educational program will cover a variety of topics, including the biological basis of Lynch syndrome (also known as Hereditary Non-Polyposis Colorectal Cancer syndrome), psychological impacts of a diagnosis, and practical health care tips. Lynch syndrome is a rare inherited condition that increases the risk of colon cancer and other cancers. An estimated two to three percent of colon cancers are thought to be caused by Lynch syndrome.

The program is designed for people living with Lynch syndrome, their families, and health care professionals. The event also will offer patients and families an opportunity to network with one another and share their experiences. Register by June 10. [More information >](#)

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Stratis Health is a nonprofit

organization that leads collaboration and innovation in health care quality and safety, and serves as a trusted expert in facilitating improvement for people and communities.

Stratis Health works toward its mission through initiatives funded by federal and state government contracts, and community and foundation grants, including serving as Minnesota's Medicare Quality Improvement Organization.

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