



AHA Services, Inc.
A for-profit subsidiary of the Arkansas Hospital Association

Spring Edition Volume 18, Issue 2

Developing and providing value-added services and programs, which benefit the members of the Arkansas Hospital Association

## Is Your Data Worthless?

Is your data valuable or worthless? It all depends on how effectively you use it. To provide value, data must be used in three ways:

- Data must be analyzed so that opportunities can be identified and leaders can set targets.
- Data must be shared so people become aware of these opportunities and implement new processes to address them.
- And finally, your data must be used to measure the effectiveness of your efforts, so you know whether you will achieve your goal by continuing with the new process or trying something new.

#### **Analyze Opportunities & Set Targets**

In order to see an opportunity and set a target, you must first know where you want to be. What benchmark will you use? How do you want to perform relative to the benchmark? Do you strive to have outcomes data that's just above average or in the top 10%? If your Average Length of Stay (ALOS) matches the state average, is that good enough? Do you want to be paid as well as your peers, or do you want to compete on your lower prices?

Once you know where you want to be, drill into your data and find out where you are. The difference between where you are and where you want to be is your opportunity. Be sure to assign it a number and a timeframe so you can measure progress, e.g., reduce LOS by 0.5 days by the end of the quarter, increase reimbursement by \$500K next year, etc.



#### **Share Your Data**

Everyone in your organization who can affect performance on a certain measure, or who is affected by it, needs to see the data and have input. With everyone working together toward a common goal, your likelihood of achieving the desired outcome goes up dramatically. For example, if your goal is to reduce LOS and your data tells you that patients admitted on a Friday stay longer, the team may be able to think of ways to provide more services on the weekends. Or, if your quality scores are sub-optimal, the team will need to work together to improve outcomes to increase the likelihood of securing the desired reimbursement increases during negotiations.

#### Measure and Adjust

As you implement new processes to improve performance and achieve your goals, you need to measure your progress. Not every idea you try will work. You need to know what's working and what's not so you can continually refine your approach until you achieve your goals.



And, once you've done all of the above, start over. The market is constantly changing, so you need to keep setting new targets, implementing new processes, measuring progress, and making adjustments in order to stay on track with your long term goals.

To learn more, contact Leslie Gold, 213.283.8003, lgold@hasc.org; or visit www.pds-data.com.

#### What's inside:



Is Your Data Worthless? PDS	1
Diabetes Discovery - Via the Eyes VSP	2
Congratulations to Howard Memorial Hospital HealthStrong™ Top 100 CAHs	2
AHA Career Center is Your Single Source Solution HealtheCAREERS Network	3
Continuing Revenue Improvement (Webinar) PDS	3
ICD-10 Education & Training/Coding Productivity Studies DocuVoice	4
New Survey Suggests an Emerging Shortage of PAs and NPs Staff Care	5
Point-of-Service Solution nTelagent	5
<b>Vendor Management Services</b> Medefis	6
SUNRx Announces New 340B Seminar Series for Contract Pharmacies SUNRx	7

## **Diabetes Discovery – Via the Eyes**



Recent health studies reveal that as many as 24,000 people lose their sight every year to diabetes and diabetic retinopathy, the leading cause of blindness in the U.S.

A routine eye exam can show so many things. Some, run-of-the-mill for sure – the tiny change in prescription, the need for a different type of contact lens. Others, though, can be downright life changing – and life saving – for that matter.

One doctor found out first-hand when she did the same thing she does every day – she looked into a patient's eyes. But this was no ordinary exam. When Kathleen Clary, O.D., peered into her 48-year-old patient's eyes, she saw blood. It sounds horrible, and it is. The blood and other fluids were seeping from fragile and miniscule vessels in her retinas. The retina is the light and sight-sensing back part of the eye – and without it, you don't see.

"As soon as I noticed the leaking fluids and the hemorrhaging, I suspected that they might be symptoms of diabetes," recalls Dr. Clary, who practices in the Washington, D.C., suburb of Ashburn, Va. "In my 12 years of experience as an eye doctor, that kind of bleeding usually signals that a buildup of sugar in the patient's bloodstream has begun to break down the capillaries that feed the retina. The result is often what we call diabetic retinopathy – a condition in which continuing damage to retinal tissue from diabetes can lead to impaired vision or even blindness, if left untreated."

The eye exam was the very first clue the patient had that she might have diabetes.

Now, it was time for action. Dr. Clary talked with her patient about what she saw – yellowish fluids and dots of blood showing up on her retinas. And, she told her what it could mean. "I want you to have your blood sugar level checked right away by your family doctor," she told her pa-

tient. "Tell the doctor you need to be evaluated for diabetes with a fasting blood sugar test, because your optometrist noticed some retinal bleeding."

Dr. Clary was right – a medical exam the next day did indeed show the patient had diabetes. What's

more, her blood sugar level was more than quadruple what's normal. Insulin therapy and a new approach to diet and exercise came next.

Fast forward a few months, and you'd find a much happier Dr. Clary — and a much healthier patient. "The retinal bleeding had stopped, and her eyesight had begun to improve," says the Virginia doctor. "I think her vision has very likely been spared, because she was able to catch her uncontrolled diabetes in the early stages, before major damage to her retina."

Dr. Clary calls it, "a very encouraging outcome. I'm glad I was able to help this patient protect her eyesight. That retinal exam really made a difference – and it's a good example of why I tell patients that a yearly eye exam can protect your vision and your health!"

Visit www.vsp.com for more information.

## Congratulations to Howard Memorial Hospital

Howard Memorial Hospital (HMH) in Nashville, Arkansas was recently named one of the HealthStrong<sup>™</sup> Top 100 Critical Access Hospitals (CAHs) in the United States.

The HealthStrong<sup>™</sup> Top 100 Critical Access Hospitals including **Howard Memorial Hospital**, scored best among CAHs on the iVantage Health Analytics' Hospital Strength Index<sup>™</sup>. The 2013 Top 100 CAH announcement is the second release of this important designation. The Hospital Strength Index is the first-ever comprehensive rating of CAHs and the results recognize the Top 100 CAHs that provide a "safety-net" to communities across rural America—measuring them across 56 different performance metrics, including quality, outcomes, patient perspective, affordability and efficiency.

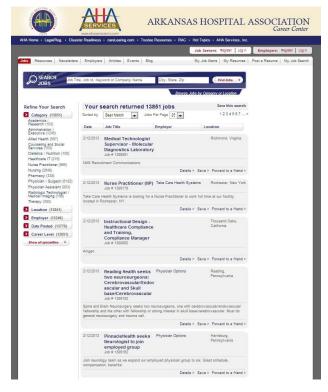
More information can be found at www.iVantageHealth.com/HSI.

Page 2 Facts & Features

# AHA Career Center is Your Single Source Solution

Recruit the very best candidates with the <u>AHA Career Center</u>, the official online job board of Arkansas Hospital Association. Fast, smart and optimized to provide direct access to the most qualified healthcare Professionals, the <u>AHA Career Center</u> makes it easy to target highly-specialized candidates across every healthcare specialty.

With a robust selection of online recruitment tools, the <u>AHA Career Center</u> is designed to be your single-source solution for all your recruiting efforts online.



#### Only the AHA Career Center delivers:

**Maximum exposure** – When you purchase a job posting, your ad is plugged into its extensive network of job distribution partners, resulting in more qualified candidates viewing your jobs. The AHA Career Center has partnerships that ensure your jobs receive premium placement on Indeed, Simply Hired, Glassdoor and many others.

More Targeted Advertising and Branding Opportunities – The site features advertising zones and more of them, allowing you to target candidates at the discipline level and broadcast your brand to larger audiences. Extend your reach further to quality candidates with Targeted Email Campaigns that put your brand front and center to the job seekers you desire.

**Competitive Pricing** – Pricing is flexible depending upon your hiring needs. It offers competitive pricing and volume discounts for every



budget. Whether you're a single specialty looking to sell your practice or are a large hospital system bringing on new staff, you'll find a package that's just right.

**Resume Database** – The Resume Search subscription provides access to an extensive listing of candidate resumes. Resume Search can serve as a supplement to your job postings or be used alone, offering unparalleled access to pre-screened resumes.

**Customer Support Team** – A seasoned account manager provides branding and hiring consultation during your entire contract term. They also counsel clients on writing job posting best practices, ensuring your ads resonate with candidates.

To access the Career Center visit <a href="www.healthecareers.com/aha">www.healthecareers.com/aha</a> and register as an employer to begin posting jobs online.

Questions? Contact us at 888.884.8242 or <a href="mailto:info@healthecareers.com">info@healthecareers.com</a> and we'll walk you through the process.

Better job candidates, better response. Start today and post your open positions to AHA Career Center!

## **PDS University**

Continuous Revenue Improvement

This popular 20 minute interactive webinar will cover:

How PDS can help identify revenue opportunities

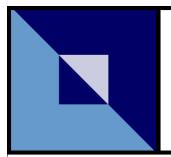
Show how to identify areas of opportunity to:

- · Set measurable goals
- · Track those goals
- Take meaningful next steps

PDS is an important component of your long term revenue planning. Also covered: Ways to share PDS data throughout your organization to improve your overall revenue strategy.

~ April 26th ~ 1:00 p.m., CT ~ Register: click here

Volume 18, Issue 2 Page 3



## YES HIM Consulting, Inc.

The Premiere Health Information Management Consulting Firm

## ICD-10 Education & Training

- Assess coding professionals' baseline clinical knowledge
- ♦ Begin overall coder clinical education
- Re-assess coding professionals' clinical knowledge
- Develop educational plans

## **Coding Productivity Studies**

- Assess coding professionals' baseline productivity standards
- Determine how much time is spent on chart types, research, etc.
- ◆ Assess the workflow throughout the week
- ♦ Advise steps to take to limit unprofitable time

## **Coding Compliance & Clinical Documentation Audits**

#### ICD-10 Clinical Documentation Audits -

- ♦ To evaluate if your facility has the documentation in place for the transition to ICD-10 coding.
- Comparisons between current documentation and actual coding within ICD-10CM/PCS would be performed.

### MS-DRG Coding Compliance Audits -

♦ To ensure your accuracies within Principal Diagnosis, Secondary Diagnoses, Principal Procedure, Secondary Procedures, Present on Admission (POA) indicator, Discharge Disposition status, Documentation issues/opportunities, and Physician Query opportunities.

### APC Coding Compliance Audits -

♦ To ensure your accuracies within Principal Diagnosis, Secondary Diagnoses, Principal Procedure, Secondary Procedures, Present on Admission (POA) indicator, Discharge Disposition status, HCPCS coding, Documentation issues/opportunities, and Physician Query opportunities.

#### Clinical Documentation Improvement Audits –

♦ It is essential to examine if the documentation is representative of your high quality care, reflects patient acuity levels, reduces risks from incomplete or unclear documentation, and provides accurate and complete documentation for coding.

A detailed and comprehensive report is delivered with all audits.

For more information contact Bob Stewart, 615.275.7312 or bob@docuvoice.com





Page 4 Facts & Features

# New Survey Suggests an Emerging Shortage of PAs and NPs



Hospitals, medical groups, and other healthcare facilities which for years have used temporary (*locum tenens*) physicians now are turning to temporary physician assistants (PAs) and nurse practitioners (NPs) to fill gaps on their medical staffs, a new survey suggests. This is one clear signal that a shortage of these practitioners is emerging.

The annual Staff Care survey polls hospital and medical group managers about their use of temporary clinicians and includes data on the types of clinicians healthcare facilities use on a temporary basis. The survey indicates that requests for temporary PAs and NPs received by Staff Care grew from less than two percent of all requests in 2010 to ten percent of all requests in 2012.

As has been seen in nursing and in medicine, hospitals turn to temporary clinicians when they cannot fill permanent positions, which now is the case with PAs and NPs. In some cases, these same facilities are seeking PAs and NPs to supplement their physician staffs, which also have openings that are hard to fill.

The survey further indicates that 74 percent of hospitals had used temporary physicians or advanced practitioners sometime in the last 12 months. Of these, 35 percent had used temporary primary care physicians, thirty-one percent had used temporary behavioral health professionals, 12 percent had used temporary surgeons, and 10 percent had used temporary PAs or NPs.

The survey also indicates that many healthcare facilities are seeking to extend their clinical workforce through the use of telemedicine. Forty-three percent of healthcare facility managers said their facilities had integrated telemedicine into at least one of their departments. Of these, 42 percent have integrated telemedicine into radiology, 38 percent into behavioral health, and 24 percent into primary care.

Readers who would like complete results of Staff Care's 2013 Survey of Temporary Physician Staffing Trends are welcome to contact Bonnie Owens at 800.685.2272 or <a href="mailto:bonnie.owens@staffcare.com">bonnie.owens@staffcare.com</a>.

## ntelagent

nTelagent pioneered a healthcare IT solution that settles all accounts (insured, uninsured, charity) at the point-of-service.

#### As a result its clients have been able to:

- $\Rightarrow$  increase cash up-front,
  - $\Rightarrow$  lower bad debt and
- ⇒ lower A/R days outstanding

The majority of nTelagent hospitals have seen a 400% ROI in as little as 45-60 days after implementation

For more information on nTelagent's point-of-service solution contact:

Jaclyn O'Neil • 225.933.7013 •

• jaclyn.oneil@ntelagent.com •

Volume 18, Issue 2 Page 5

As hospitals continue to implement EMR/EHR electronic record systems, Medefis, an AHA Services, Inc. endorsed company specializing in Vendor Management Services (VMS) for Healthcare Staffing, is perfectly positioned to assist AHA facilities with the on-boarding of temporary nurses during the training phase of EMR installs.

As the nation's leading VMS with a vetted agency network of 500+ staffing agencies, Medefis is integrally involved in assisting hospitals tackle the short-term challenges of on-boarding specialized IT Consultants and Temporary Nurses to backfill nursing units while hospitals undergo the required software training during EMR implementations.

Due to the extensive size of the Medefis Agency Network, hospitals are

able to successfully fill these temporary vacancies quickly and economically.

If your hospital is planning an EMR phase implementation in 2013, feel free to contact Medefis directly at <a href="mailto:info@medefis.com">info@medefis.com</a> or call 1-866-711-6333 x109





Page 6 Facts & Features

## **SUNRx Announces New 340B Seminar Series for Contract Pharmacies**



SUNRx announces the launch of Pharmacy University™, a continuing education program for network pharmacies, covered entities and others interested in the 340B Drug Discount Program.

SUNRx has always viewed its network pharmacies as partners, and they are fundamental to the success of its covered entity clients' 340B programs. The Pharmacy University seminar series represents a forum that all of us in the broader 340B community can participate in—a way of The online seminars are 60 minutes in length, and held twice weekly. educating ourselves on a wide range of topics and best practices. The program is designed to enhance pharmacists' understanding of the 340B Drug Discount Program, augmenting the training they receive when they first joined the SUNRx contract pharmacy network.

Pharmacy University is an educational opportunity for all healthcare industry stakeholders that wish to learn more about the complex landscape of 340B. Seminars will cover issues such as: an introduction to 340B; inventory management; virtual inventory reporting; pharmacy accounting and cash management; and invoices, payments and true

(see schedule below)

For more information and to register, visit www.SUNRx.com/Pharmacy-University.html

#### **SUNRx Pharmacy University Topics and Schedule**

Introduction to SUNRx 340B Pharmacy Administration		
Dates: 04/17/2013 Weekly thereafter	Who Should Attend: Owners, Pharmacists In Charge, Managers, Ordering/Receiving Personnel, Anyone interested in learning about 340B pharmacy  Topics include lesser of logic, third-party profit model and all claims model, switch interaction, process timing, and SUNRx's account management model.	
Inventory Management		
Dates: 04/24/2013 05/15/2013 06/05/2013 06/26/2013 07/17/2013	Who Should Attend: Owners, Pharmacists In Charge, Managers and Ordering/Receiving Personnel  This module is a focused overview of what you need to know and do to be successful under the SUNRx-administered 340B program. Topics include ordering, receiving, non-standard drugs and inventory swell.	
Virtual Inventory Reports, Invoices, Payments and True Ups		
Dates: 05/01/2013 05/22/2013 06/12/2013 07/03/2013 07/24/2013	Who Should Attend: Owners, Accountants and Bookkeepers  Topics include obtaining invoice detail, understanding how payments are applied, why and how true ups occur, and a brief review of all available reports.	
Pharmacy Accounting and Cash Management		
Dates: 05/08/2013 05/29/2013 06/19/2013 07/10/2013 07/31/2013	Who Should Attend: Owners, Accountants and Bookkeepers  The module is a focused overview of what you need to know and do to be successful under the SUNRx administered 340B program. Topics include accounts receivable creation and management, store physical inventories and cost controls.	

Volume 18, Issue 2 Page 7

## **AHA Services, Inc. Endorsed Companies**

<u>AUDIT Trax</u> - Web-based management tool for RAC audits. <u>www.njha.com/hbs/audit-trax.aspx</u>. Maureen Barrie, 609.275.4108.

<u>BancorpSouth Insurance Services, Inc.</u> - Liability insurance products and services, AHA Workers Compensation Self-Insured Trust. <u>www.rkfl.com</u>. Floyd McCann, 501.614.1179. Sherman Moore, 501.614.1183. Ray Robinson, 501.614.1139.

<u>careLearning.com</u> - Mandatory education including Health & Safety Compliance courses; webinars - online, interactive courses; competencies addressing core or discipline-specific education; continuing education toward licensure or various types of certification; hospital-specific private courses; nursing education. <a href="https://www.carelearning.com">www.carelearning.com</a>. Liz Carder, 501.224.7878.

<u>careSkills</u> - Performance and Competency Management System for workforce planning, employee selection, strategic learning, performance management, career development and succession planning. <u>www.carelearning.com</u>. Liz Carder, 501.224.7878.

<u>ControlPay® Advanced</u> - Earn monthly revenue share by replacing paper checks with electronic payment through the Visa®Network. Brandon Faircloth, 337.296.1420. Mike Simonett, 816.234.2565.

<u>Denial Management Services</u> - Manage QIO, MAC, CERT, RAC and Commercial Insurance, Admission Denials. <u>www.fhahims.org.</u> Barbara Flynn, 407.841.6230.

<u>DocuVoice</u> - Marketing/consulting company that specializes in outsourced coding/transcription solutions to address healthcare needs. DocuVoice's solutions also include ICD-10 assessment/training services, encoder software and physician-conducted chart reviews. DocuVoice's team works closely with you to design a custom program to address any of these areas by identifying your current situation at no charge. <a href="https://www.docuvoice.com">www.docuvoice.com</a>. Bob Stewart, 615.275.7312.

<u>Hagan-Newkirk Financial Services, Inc.</u> - Single source solution for employee benefit needs. Providing benefit design and consulting services, benefit enrollment solutions, custom employee education strategies, compliance assistance, wellness programs and payroll processing services. *Creditguard*. <u>www.hagan-newkirk.com</u>. Chris Newkirk, 501.823.4637.

<u>HealtheCAREERS Network</u> - Online recruitment, advertising and career solutions for the healthcare industry. Delivers content, job postings, news, events and career resources that are customized to a candidates' career path and relevant at every stage of their healthcare career. <a href="https://www.HEALTHeCAREERS.com/aha">www.HEALTHeCAREERS.com/aha</a>. Gary Seaberg, 214.256.4811.

<u>Med Travelers</u> - Temporary allied health professional staffing, temporary mid-level health professional staffing, locum tenens-allied health professionals. <u>www.medtravelers.com</u>. Kim Trepkus, 800.788.4815.

<u>Medefis</u> - Vendor Management Solutions. <u>www.medefis.com</u>. Bryan Groom, 866.711.6333, ext. 114.

<u>Merritt Hawkins</u> - Permanent physician staffing, healthcare staffing, recruiting. <u>www.merritthawkins.com</u>. Harold Livingston, 214.801.3774.

<u>nTelagent</u> - managing accounts receivable with a total point-of-service solution. <u>www.nTelagent.com</u>. Jaclyn O'Neil, 225.933.7013.

<u>Press Ganey</u> - Satisfaction measurement (patient/employee/physician/home health), survey instruments, reporting and analytical tools, quality improvement solutions for HCAHPS. <u>www.pressganey.com</u>. Christel Folkes, 877.398.9868, Tina Minnick, 855.736.4407.

<u>Professional Data Services (PDS)</u> - Revenue benchmarking for hospitals. <u>www.pds-data.com</u>. Leslie Gold, 213.283.8003.

<u>Staff Care, Inc.</u> - Locum tenens-physicians, temporary physician staffing. <u>www.staffcare.com</u>. Erica Gerber, 469.759.8918.

<u>SUNRx</u> - automated solutions that help community health organizations manage 340B contract pharmacy relationships and other discount drug programs and comply with government regulations. <u>www.SUNRx.com</u>. Matthew Bobo, 210.646.1885.

VSP - Vision care. www.vsp.com. Tracey Escobar, 800.638.2626.

<u>Volunteer Insurance Plan</u> - Cost-effective "on-the-job" Accident Coverage. Tina Creel, 501.224.7878.