Judiciary Committee Adds Medical Malpractice Issues To Agenda

Again this year, the General Assembly's Judiciary Committee will entertain a host of medical malpractice bills during the 2011 legislative session. Legislators have filed a number of medical malpractice-related bills and the Judiciary Committee has taken preliminary action on three bills. Thus far, the committee is scheduled to meet to raise the following concepts: An Act Concerning The Limitation Of Time For Bringing A Civil Action For Damages By A Victim Of Child Sexual Abuse; An Act Concerning The Evidentiary Standard For Punitive Damage Awards; and An Act Concerning Certificates Of Merit. A raised concept is the first step a committee takes prior to a policy issue of interest being drafted as a piece of legislation.

In the past CHA has worked closely with the co-chairs of the Judiciary Committee, resulting in the passage of PA 10-122 (An Act Concerning The Reporting Of Adverse Events At Hospitals And Outpatient Surgical Facilities And Access To Information Related To Pending Complaints Filed With The Department Of Public Health) and the defeat of an effort to weaken the certificate of merit process. In January 2011, long-time committee co-chairs Michael Lawlor and Andrew McDonald retired from the General Assembly and accepted senior-level positions in the Malloy administration. Mr. McDonald and Mr. Lawlor were replaced by Representative Gerald Fox (D-Stamford) and Senator Eric Coleman (D-Bloomfield) as co-chairs of the Committee. As co-chairs they will largely determine the priority of legislation moving through the Committee.

CHA has scheduled a meeting with the co-chairs and will work with them and other key committee members based on guidance and recommendations provided by the subcommittee on medical malpractice of CHA's Committee on Government.

Florida Judge Rules Against Piece of Healthcare Reform Act; Senate Rejects Repeal

On Monday, January 31, Judge Roger Vinson of the US District Court of the Northern District of Florida ruled that the requirement in the Patient Protection and Affordable Care Act (PPACA) that nearly all Americans purchase health insurance is not within the legal bounds of Congress’s power under the commerce clause. The judge stopped short of issuing an injunction to keep the federal government from enacting the law. Yesterday, the US Senate rejected a repeal vote, with senators voting their party line 51-47.

The administration called the Florida ruling “well outside of the mainstream judicial opinion” and said implementation won’t change. The Florida case is now quite likely headed for the 11th Circuit Court of Appeals, which is based in Atlanta and considered one of the most conservative circuit courts. Other reform-related lawsuits are proceeding through the 4th and 6th Circuits. The issue is expected to be decided by the US Supreme Court. The individual mandate is due to go into effect in 2014.

The PPACA lacks a severability clause, which prevents a law from being voided if one provision is challenged. This will make challenges to the law more problematic, even though proponents of the law have frequently said the missing severability clause shouldn’t hold up the whole law.

While governors and attorneys general in some states are suspending planning efforts on implementing healthcare reform in their states, Governor Dannel Malloy issued a statement that said, “I believe Judge Vinson’s ruling was a clear case of judicial overreach. We need to figure out ways to make healthcare more affordable and accessible to people, but the way to do that is not by scrapping the entire law and starting all over again. As I’ve said before, the rising cost of health care is a major detriment to job creation here in Connecticut, and I commit to resolving open SustiNet issues with all parties at the table on behalf of Connecticut residents and businesses.”
CHA supports the PPACA. Click here to read the statement.

Connecticut Scores in Top Ten in Providing Healthcare for Children

The Commonwealth Fund, a private foundation promoting high performing healthcare systems, this week published a state-by-state scorecard on children’s health—and found that there is a wide disparity across the United States in terms of children’s access to healthcare and their opportunity to live healthy lives. The scorecard reveals that Connecticut ranks ninth overall in rankings, including access to healthcare, affordability, and prevention and treatment of illness.

In all, the new report analyzes 20 indicators of how the health system is performing for children in each state. An interactive map enables comparisons among states on individual scorecard indicators, with results downloadable into either PowerPoint or Excel. The findings demonstrate that federal and state policy actions maintained and, in some cases, expanded children’s insurance coverage during the recent recession, even as many parents lost coverage. The report also highlights the need for initiatives specifically focused on improving health system performance for children.

The findings of the scorecard emphasize the criticality of policy action to sustain children’s access to care in the midst of rising healthcare costs and economic downturns. The report notes: “While coverage rates for parents have declined in 41 states over the past decade, children have fared dramatically better, with rates increasing in 35 states over the same period, thanks to earlier Medicaid expansions, the economic stimulus bill’s Medicaid stabilization funds, and the CHIP expansion and reauthorization. Access to care must be coupled with statewide initiatives and community efforts to improve healthcare system performance for children.”

For more information, click here.

Save the Date for CHA's Patient Safety Summit, March 11

The agenda is shaping up for CHA’s 2011 Patient Safety Summit, scheduled for Friday, March 11, 9-4:00 p.m. in Wallingford. Brian Wong (pictured left), MD, MPH, CEO of The Bedside Trust in Seattle, WA, will be the keynote speaker, kicking off a day-long schedule of expert speakers on patient safety and quality. Dr. Wong is a patient and quality safety expert who has spoken nationally and internationally on these topics.

Save the date for the Patient Safety Summit and look for more information coming soon. Click here to register.

Education Updates

Eliminating Preventable Harm Through FMEA, Tuesday, February 15, 8:30 a.m. - 3:30 p.m.

Failure mode and effects analysis (FMEA) has become a centerpiece in today’s proactive patient safety improvement initiatives. Although many healthcare organizations began using FMEA to meet Joint Commission standards, the technique has turned out to be an effective process improvement strategy. However, misconceptions or misapplication can turn FMEA into a laborious project that generates a lot of paperwork without sustainable patient safety gains. In this workshop, participants learn how to harness the power and benefits of FMEA for their organizations by avoiding common pitfalls and concentrating efforts on making sustainable safety improvements.

At the conclusion of this program, participants will be able to: describe the steps required to implement an effective failure mode and effects analysis (FMEA); determine how to identify the potential failures in high-risk patient care processes and select failures most in need of prevention; identify and avoid common errors that turn FMEA into a “paperwork” exercise rather than a tool to prevent harm; and integrate FMEA projects into the organization’s quality improvement strategy.

The program’s speaker, Patrice L. Spath, is a Healthcare Quality Specialist, teacher, and author, who has presented more than 300 training programs on quality improvement, case management, outcomes management, and patient safety improvement topics for hospitals and healthcare organizations, including past programs at CHA. She has also written numerous books and journal articles on these subjects for the American Hospital Association, Health Administration Press, and the American Health Information Management Association.
Changes in CPT/HCPCS for 2011, Wednesday, February 16, 8:30 a.m. - noon

CPT and HCPCS codes are the primary codes that describe individual hospital services that are billed to all payers. These code sets go through annual revisions with codes that are added, deleted, or revised. There are 1,066 code changes for 2011: 343 new codes, 545 deleted codes, and 178 codes with revised descriptions.

Co-Sponsored by the Connecticut Association of Healthcare Executives, this workshop will review code changes in CPT and HCPCS code ranges, with emphasis on the coding changes in wound debridement, cardiac catheterizations, and the entire new section on revascularization procedures. There are also changes in interventional radiology and other key issues for both CPT and HCPCS codes. Additionally, the workshop will provide any updates published by AMA or CMS since the actual files were posted.

Each program participant will receive a comprehensive manual that outlines all the key code changes in 2011. The manual includes an itemized table that shows all added, deleted, or revised CPT or HCPCS codes for 2011. Deleted codes will list cross-reference codes where possible and revised codes will list the content of the revision. The program's speaker, Penny Brennan, Certified Massachusetts Patient Account Manager, is the Director, Consulting Division at Medical Bureau/ROI.

This program is pending approval of Category II credit through the American College of Healthcare Executives (ACHE).

Rescheduled Date: OPPS Final Rule for 2011, Wednesday, February 16, 1:00 p.m. - 4:30 p.m.

The Centers for Medicare and Medicaid Services (CMS) has published the Outpatient Prospective Payment System (OPPS) Final Rule for 2011, defining what CMS will be implementing for OPPS in 2011. The Final Rule documents CMS’s final decisions regarding its proposed changes, including composite Ambulatory Payment Classifications (APCs), drug administration, visits, partial hospitalization, implantable biologicals, physician supervision (more changes), pulmonary rehabilitation, cardiac rehabilitation, reduced payments for therapy services, and new codes for 2011. In addition, the Final Rule continues to address quality reporting of outpatient services.

Each program participant will receive a comprehensive manual that outlines the final changes for 2011, an itemized table that shows all the changes for each CPT/HCPCS code between 2010 and 2011, and detailed material and references for the other topics.

This program is approved for 3.0 hours of Category II credit through the American College of Healthcare Executives (ACHE).

Leaping from Staff to Management: You’re a Manager. Now What? Thursday, February 17, 8:30 a.m. - 3:45 p.m.

Making the transition from being a staff person one day to a supervisor/manager the next is a significant step for nearly everyone. Taking on a leadership role is far more challenging and complicated than ever before. Once you have met the challenge of simply getting oriented to what it means to be a manager/leader, you will discover that you carry the responsibility for meeting the demands of your organization for high productivity combined with financial prudence and regulatory compliance. You will discover that those tasks must be balanced with an excellent grasp of human relations skills in working closely and collaboratively with others. This program has been designed to get you started by exploring the basics of management and leadership in theory and applied practice, and to lay the groundwork for continued development of your leadership and management skills.

The program's speaker, Victor Walton, M.A., is a professional educator, speaker, trainer, and leadership consultant to organizations throughout the United States. He has a deep personal involvement and interest in the professional, personal growth, and development of people in changing organizations. Participants who have attended this program in the past routinely rate Vic as an outstanding speaker who offers practical approaches to effective leadership.

Connecticut Hospital Association is an Approved Provider of Continuing Nursing Education by the Connecticut Nurses’ Association, an Accredited Approver by the American Nurses Credentialing Center’s Commission on Accreditation (6.25 contact hours). This program has met the HR Certification Institute’s criteria to be pre-approved for recertification credit (6.25 contact hours). This program has been approved for Continuing Education Credit Hours by the National Association of Social Workers, CT and meets the continuing education criteria for CT Social Work Licensure renewal (6.25 contact hours).
Coaching Skills to Improve Performance, Monday, February 28, 8:30 a.m. - 2:30 p.m.

Effective managers from all walks of life have discovered that the same skills successful coaches use to create winning athletic teams are applicable in an organizational setting as well. In fact, the ability to have effective coaching conversations with colleagues and employees is a critical skill for leaders today. So what are the characteristics of a successful coach—and how do coaching skills help to develop a culture of excellence, reliability, and accountability? Building trust, appreciating differences, encouraging and mentoring growth, active listening, providing constructive feedback, asking insightful questions, and overcoming roadblocks to goal achievement are all part of the process. In this highly interactive program, participants will learn how coaching is different from other developmental strategies, understand the coaching process, and practice coaching tools and techniques.

The program’s speaker, Joan Evans, MBA, has presented several successful programs in CHA’s leadership and management development series, and is a national speaker and author on a variety of leadership topics. She currently serves as Chief Learning Officer for the Moses Cone Health System in Greensboro, North Carolina.

Click here for the brochure; click here to register.