Readmissions Collaborative Focus of CHA Presentation to CT Association of Health Care Facilities’ Quality Symposium

Today, Alison Hong MD, CHA Interim Vice President for Quality and Patient Safety, provided an overview of the CHA Reducing Heart Failure Readmissions Collaborative at the First Quality Symposium of the Connecticut Association of Health Care Facilities (CAHCF). The 24-month, outcome-focused clinical collaborative was launched in 2010 by CHA in partnership with Qualidigm. Twenty-five hospitals and their community care partners and 12 Qualidigm adjunct “Communities of Care” groups are actively engaged in sharing and learning best practices that translate to improved patient care and reduced preventable hospital readmissions in this statewide collaborative, based on the model and strategies developed by the Institute for Healthcare Improvement.

In a related presentation, Ann Spenard, Vice President for Operations from Qualidigm, discussed quality and hospital readmissions and spoke about the Communities of Care initiative, a voluntary collaboration among hospitals, nursing homes, rehabilitation centers, home health care providers and physicians that was developed in partnership with CHA. Through this initiative, nearly 150 providers from across the state belong to 12 “communities,” each of which is centered on a hospital and includes various other affiliated entities across the care continuum. These communities are actively engaged identifying and implementing strategies for improving communication and coordination among healthcare providers and improving education and health literacy for patients and their families and, as noted above, are key participants in the Reducing Heart Failure Readmissions Collaborative.

Qualidigm and the Communities of Care were also recognized today by the Hartford Business Journal's Health Care Heroes 2011 Winner of Advancements in Health Care Prevention.

To learn more the Reducing Heart Failure Readmissions Collaborative, please contact Alison Hong MD at Hong@chime.org.

Veteran State Representatives Announce Retirements

Long-time State Representatives Richard Roy (D-Milford) and Marie Kirkley-Bey (D-Hartford) announced this week that they will not seek reelection in 2012. Representatives Roy and Kirkley-Bey both won their first election in 1992 and will have finished 20 years of service in the General Assembly when they step down in January 2013.

In addition to serving as Co-Chairman of the Environment Committee, where he has championed clean air and clean water issues, Representative Roy also was a member of the Executive and Legislative Nominations and the Public Safety and Security Committees. Representative Roy’s 119th House District currently encompasses the city of Milford.

Representative Kirkley-Bey serves as Deputy Speaker and is a member of the Executive and Legislative Nominations, Public Safety and Security, and Appropriations Committees, as well as the Joint Committee on Legislative Management. Representative Kirkley-Bey’s 5th House District covers part of the city of Hartford.

Both the 5th and 119th House districts were redrawn and folded into other House districts during the most recent redistricting proposal, which would have had Representatives Roy and Kirkley-Bey running against one of their House colleagues.
State Work Group Formed to Integrate Care for Dual-Eligible Individuals

The Connecticut Department of Social Services has established a special work group to provide input and advice on the state’s demonstration project to develop new ways to meet the often complex and costly medical needs of the individuals who are eligible for both the Medicare and Medicaid programs, known as “dual-eligibles.” Connecticut was one of 15 states selected by the Center for Medicare and Medicaid Innovation to test approaches for eliminating duplication of services for these patients, expanding access to needed care, and improving the lives of dual-eligible individuals, while lowering costs.

The first meeting, scheduled for December 15, will focus on two model options, with subsequent agendas expected to examine the pros and cons of the two options and identify questions or clarifications needed from the federal Innovation Center. Stephen Frayne, CHA Senior Vice President of Health Policy, is representing the Association on the work group.

“On the CUSP: Stop CAUTI” Holds Second Call on CAUTI Prevention and Reporting Guidelines

Connecticut hospitals in the third cohort of “On the CUSP: Stop CAUTI,” a national patient safety program, participated in a second call with national faculty this week. Russell Olmsted, MPH, CIC, Epidemiologist, Infection Control Services, Saint Joseph Mercy Health System, and Shelby Lassiter, RN, BSN, CPHQ, CIC, Performance Improvement Specialist, North Carolina Center for Hospital Quality and Patient Safety reviewed and answered questions about critical data definitions, process and outcome measures, NHSN definitions, and HICPAC guidelines that will the project interventions were designed to meet. Mandatory reporting to the Centers for Medicare and Medicaid Services of hospital CAUTI rates begins in January 2012.

The “On the CUSP: Stop CAUTI” program is aimed at reducing catheter-associated urinary tract infections (CAUTI) by standardizing the use, maintenance, and removal of urinary catheters, and implementing the Comprehensive Unit-based Safety Program (CUSP). Developed at Johns Hopkins Hospital by Peter Pronovost, MD, CUSP has transformed care in hospitals throughout the country by improving the safety culture and practices on the participating units. An extension of the national Stop BSI project, which took aim at eliminating central line-associated infections so successfully, the Stop CAUTI project now addresses the most prevalent hospital-associated infection: catheter-associated urinary tract infections.

To learn more about the Stop CAUTI initiative, please contact Alison Hong MD at Hong@chime.org.

Education Updates

HIPAA Privacy Basics: A Bridge to New Rules of the Road:
Tuesday, December 13, 2011, 8:30 a.m. - 12:00 p.m.

HIPAA Privacy rules changes outlined in Health Information Technology for Economic and Clinical Health Act (HITECH) are expected soon, and there will be very limited time to comply with what promises to be a difficult operational shift for HIPAA compliance. Covered entities and business associates need to ensure that their existing HIPAA operations and platforms are fully functioning, and all policies and procedures are already up-to-date; otherwise the goal of managing the HITECH changes by the compliance dates will be extremely difficult to achieve.

This comprehensive refresher course will examine all aspects of the HIPAA Privacy Rule, with a particular emphasis on areas that create the greatest challenges, including case examples and review of the enforcement focus of the Office of Civil Rights since the implementation of the Breach Rule. This program will also examine the likely outcome of the upcoming HITECH Final Rule changes to HIPAA Privacy, and detail the overlap areas of meaningful use incentives and HIPAA Privacy planning.

The session will be presented by Jennifer Cox of Cox & Osowiecki, LLC, a Hartford law firm representing healthcare institutions and providers in regulatory, litigation, licensing, and business matters.

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 (3.25 contact hours).

For additional information, click here. To register, click here.

Volunteers, Employees, and Labor Law Issues:
Wednesday, December 14, 2011, 9:00 a.m. - 11:45 a.m.

As hospitals expand the use of volunteers, several legal concerns and questions have surfaced. Properly classifying staff as “employees” or “volunteers” is the first step to ensure compliance with federal and Connecticut wage and hour laws. The session format will provide a forum for participants to raise questions and concerns surrounding the expanded use of volunteers, discuss ways to communicate appropriately in both nonunion and union environments, offer clarification and guidance on how the determination to categorize an individual as a volunteer is made, and discuss other legal issues that
arise—including how to ensure individuals remain volunteers.

This session is presented by John G. Zandy, a partner at Wiggin and Dana and chair of its Labor, Employment and Benefits Department, representing employers in all aspects of labor and employment law. John worked previously for the National Labor Relations Board, the Solicitor’s Office of the U.S. Department of Labor, and is included in Best Lawyers in America for Labor and Employment Law.

For more information, click here. To register, click here.

The ICD-10 Impact on Hospitals and Transition Strategies to Meet the Deadline—Webinar Series:
December 14, 2011, January 18, 2012, and February 15, 2012, 1:00 p.m. - 2:00 p.m.

Two years and counting... is your hospital on its way to ICD-10-CM/PCS implementation by the October 1, 2013 deadline? Are you planning for the significant financial and clinical impact this will have on your organization? Do you have a strong inter-functional team and timeline in place to achieve “ICD-10 readiness?”

This webinar series, begun in November, focuses on helping hospital leaders and their ICD-10 implementation leaders and teams. The next program in the series is:

Understanding Reimbursement Changes and the Financial Impact of the ICD-10 Transition:
Wednesday, December 14, 2011

Notwithstanding the operational issues surrounding the ICD-10 transition, the reimbursement impact could be as significant as APCs were in 2000. Even though not all the facts and figures are now known, there are ways to predict the impact in your facility. This session will focus on what steps your hospital should be taking now, before October 2012, before October 2013, and beyond, to minimize what could otherwise be significant financial impact to your hospital’s revenue stream.

Speakers for this webinar series include Andrea Clark, RHIA, CCS, CPC-H, President and Founder of Health Revenue Assurance Associates (HRAA) and a past presenter at CHA, and Keith Siddel, MBA, PhD(c), Chief Marketing Officer at Health Revenue Assurance Associates, Inc. Ms. Clark, a nationally prominent health information management expert, will focus specifically on revenue integrity of outpatient coding and billing systems; charge capture; coding and billing; data transference, and outpatient compliance training services. Mr. Siddel has more than 25 years of experience in healthcare finance, information systems, operational, and compliance training expertise, which includes hospital-based and free standing day surgery sites, emergency room, hospital-based clinics, and ancillary diagnostic services areas.

For more information, click here. To register, email educationservices@chime.org.