

# PHYSICIAN NEWSLETTER

AUGUST 2010



## JOINT COMMISSION SURVEY

We recently underwent a Joint Commission (JC) survey that ended July 19<sup>th</sup>. The final results of the 5-day survey have been published for us to review and a formal response is due both 45 and 60 days (depending on the level of finding) from the final report date. In our response, we must demonstrate that we have implemented changes that address and correct all findings found.

Our hospital received 2 direct and 10 indirect impacts. In rela-

tive terms, this is a good score that meets our accreditation requirements.

It is extremely important that we correct our findings and maintain our efforts to be JC ready at all times – sustainability will be key. For those who had an active part in the survey (staff, directors, physicians, volunteers, administrators, governing board members), congratulations on a job very well done!

## CHANGE IN TRANSCRIPTION VENDOR

Effective August 3, 2010, LRMC is changing transcription vendors to Nuance Communications. New dictation cards were mailed to your office, and will also be available in the doctors' dining room and in the Health Information Management Department. New dictation instruction signs are posted at the nursing units. There are also voice prompts as you access the system to guide you through the dictation process.

**There are only 2 major**

**changes** you will notice in this conversion.

The toll free telephone number is now **877.236.5140**.

There is not a separate work type for "stat" dictations. Instead, you can make any dictation a stat dictation, at any time during the dictation, by pressing the number "6" on the telephone keypad. This will give you more options to designate your dictation as a priority.

**All other functionality remains the same.**

## AUTHENTICATION OF VERBAL ORDERS

A regulatory requirement is that all entries into the medical record must be authenticated within 48 hours (timed, signed and dated). This is not only a legal requirement, but also a patient safety issue. Authentication of a verbal order represents an opportunity to identify a transcription error and potential risks to patient safety. All orders, especially telephone orders, need to be reviewed and authenticated by the prescribing physician. In the absence of the prescribing physician, the physician providing care for the patient may authenticate the order.

## INFORMATIONAL:

**Sincere thanks to all physicians who continue to trust LRMC with patient care needs. On behalf of the hospital staff and administration, we thank you for your support.**

Please let us know how we are doing by giving us your feedback.

- **Nursing/Quality:**  
Jodi Hein, CNO  
(562) 602-6781
- **Ancillary/Support/Operational:**  
Steve Cornejo, COO  
(562) 602-6739
- **Admitting/Finance/Medical Records:**  
Mary Beth Formby, CFO  
(562) 272-6420
- **Business Development/Marketing:**  
Dianne Pfau, DBD  
(562) 602-6709
- **MD Relations/General & Other Concerns:**  
Joe Badalian, CEO  
(562) 602-5055

- Your physician ID #
- The hospital extension (6866) or local phone number (562.602.6866)
- The work types
- The keypad functionality for replay, fast forward, etc.

If you have any questions or need assistance, please call the HIM Department at 562.602.6788. They will be pleased to help you!

## SOI - SEVERITY OF ILLNESS

Why have healthcare providers, physicians and hospitals alike, been blasted with 'medical necessity' questions such as - is this patient an "inpatient" or "observation?" What is **severity of illness (SOI)**? Why is it important for your practice, your profile, and public perception? In its simplest definition, SOI describes the seriousness of your patients' illnesses and the risk of adverse outcome to treatment choices.

### Risk stratification

While risk stratification is one tool for determining which antibiotics to prescribe under certain circumstances or whether a patient is a candidate for surgery versus another type of treatment, numerous specialty associations have developed methodologies for developing an SOI database so that its members can level the playing field and compare mortality data. The Society of Thoracic Surgeons (STS), the National Surgical Quality Improvement Project (NSQIP), American College of Cardiology (ACC), American College of Obstetrics & Gynecology (ACOG) are among the specialties that have

developed methods of tracking SOI standards to determine best practice patterns for their patients.

### Understanding SOI reimbursement methodology in a competitive market

Physician reimbursement for services rendered—be it medical or surgical, interventional or non-interventional, inpatient or observation or outpatient surgery—is becoming an SOI-dependent entity. Failure to understand the effects of SOI may decrease physician revenue in the future. Physician practices—single-specialty or mixed—that demonstrate 'better' documentation than those of nearby competitors can advertise this information to gain a business advantage. These physicians can then negotiate more attractive rates with insurers that aim to attract physicians who will help them sell more policies.

Hospitals that are able to publicly demonstrate to the community that they have the best performance level in certain areas will survive in competitive markets. Hospitals are able to do this only if

their physicians can demonstrate that their practices are best. For example, one hospital recently lost its heart transplant accreditation because it could not attract sufficient volume to maintain its practice when a competitor advertised its own five-star rating in cardiovascular surgery. This partnership is best summarized by the business adage, "If you don't look good, we don't look good!"

### Increasing awareness

Consider the following in an internal medicine practice:

An internist sees patients in the hospital, nursing home, or office and bills regularly for patient visits - admissions, subsequent visits, discharges, and consultations - to various insurance companies as well as Medicare. An internist who submits bills with diagnostic codes that are either obsolete or do not accurately reflect patient's SOI minimizes potential reimbursement and value for those visits.

As an example, when internists are not aware of the various fourth-digit subcategories for

diabetes (retinopathy, nephropathy, neuropathy, vascular disease, and diabetic ulcers) nor the fifth-digit subclassification that signifies uncontrolled diabetes, billed codes will improperly reflect that your type 2 diabetic patients are all seemingly healthy. Internists who report incorrect or non-specific diagnosis codes minimize the SOI of the diabetes population.

### Thorough legible documentation is key

In 2016, when physicians and hospitals are scheduled to begin sharing "bundled" payments for Medicare inpatient hospitalizations, the key to proper reimbursement for all providers will be thorough, legible, and complete documentation that reflects patients' severity of illness, justify necessity of inpatient admission and thus ensure proper code assignments.

**"THE GOOD  
PHYSICIAN  
TREATS THE  
DISEASE, THE  
GREAT PHYSICIAN  
TREATS THE  
PATIENT WHO  
HAS THE DISEASE"**

~WILLIAM  
OSLER~

## COMMUNITY LECTURES

We are planning for our Summer/Fall community lecture and screening series. The series is a key component to the hospital's marketing strategy and a successful community outreach tool bring awareness to the surrounding communities regarding the physicians and services available at Lakewood Regional Medical

Center. Our lectures take place at various senior center locations in the community. They are usually scheduled during regular business hours for one hour. A question and answer session also follow the presentation. The average attendance is approximately 30 people. We will be promoting our lecture series in the local newspa-

pers, our hospital newsletter and website. If you are interested in presenting at one of the upcoming scheduled events, please contact Patrick Houston, Marketing Manager at 562-602-6709 to discuss your availability and the speaking topic.