

[<Back](#) [Print](#)

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Hello!

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IN THIS ISSUE OF...

- NURSING HOME NEWS
- HOME HEALTH NEWS
- HOSPITAL NEWS
- PHYSICIAN OFFICE NEWS
- DOQ-IT RELATED NEWS
- MEDICARE NEWS

NURSING HOME NEWS**CMS Clarifies Guidelines for NPI Deadline Implementation**

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It's Not Too Late to Register for the "Advancing Excellence in America's Nursing Homes" Campaign!

There are approximately 3,915 nursing homes participating in "Advancing Excellence in America's Nursing Homes," a new coalition-based campaign focused on improving the quality of care and quality of life for those living in America's nursing homes. Click [here](#) to learn more about the campaign and register.

Surveyor Training Webcast May 14

The Centers for Medicare & Medicaid Services (CMS) is hosting a series of Webcasts to train surveyors on new topics. These Webcasts give nursing homes the opportunity to learn the same

**The Spring 2007 Issue of Quality Source Available Soon**

In this issue, we will share culture change success stories in both nursing home and home health settings, and the Institute for Healthcare Improvement's "5 Million Lives" campaign.

We also discuss the National Provider Identifier (NPI) and how it affects Medicare providers, and lessons learned from physicians who have implemented an electronic health record.

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information survey agencies receive training on.

On May 14, CMS is hosting "From Institutional to Individual Care Part III: Clinical Case Studies in Culture Change." The Webcast provides information to survey agencies about innovative changes in medical and nursing care policies and practices in nursing homes in relation to culture change. To view the free Webcast, click [here](#) (registration required). You may also view the session live or archived and watch at your convenience.

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HOME HEALTH NEWS

ACH Campaign Intervention Package Available Now!



The third [Best Practice Intervention Package - Medication Management](#) - is now available. This is one of 12 intervention packages that will be provided electronically to home health agencies (HHAs) registered for the National Home Health Quality Improvement Campaign. More than 4,990 HHAs have now signed up to participate in the campaign.

The intervention package includes educational tools and resources, information sharing, best practice education and individual agency reports with data not available through Outcome Based Quality Improvement (OBQI) reports. These resources will assist agencies with reducing avoidable hospitalizations. Click [here](#) to learn more about the campaign and register if you have not already done so. Click [here](#) for Hospitalization Risk Assessment Poster.

2007 STAR Targets

QSource is asking all agencies to set goals for 2007 on the [Setting Targets-Achieving Results \(STAR\)](#) site. In addition to acute care hospitalization and improvement in management of oral meds, agencies are encouraged to set targets for any or all of the other publicly reported measures. Putting your targets into STAR is not a contractual commitment; there are no penalties for not reaching your targets. This site also provides access to valuable information on OASIS.

You will need your user name and password to access your STAR account. To acquire an agency password, contact the QSource Home Health team: [Betty DeBlasio](#) 615.574.7200 and [Barbara Meadows](#) 615.574.7402. Agencies can also contact [Marian Boxer](#) at 800.528.2655 ext. 2638.

National Nurses Week May 6-12

QSource would like to extend a special "Thank you!" to our Tennessee home care nurses. Your dedication and passion have an immeasurable impact on the lives of those entrusted to your care. Your skills and caring allow these patients to recuperate in the

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best place on earth...the patients' own homes. We honor and salute you, during National Nurses Week and during every other week as well. Thank you for making a difference!

The work of America's 2.9 million registered nurses to save lives and to maintain the health of millions of individuals is the focus of this year's National Nurses Week, celebrated annually May 6-12 throughout the United States. This year, the American Nurses Association has selected "Nursing: A Profession and a Passion" as the theme for 2007. Click [here](#) to learn more about National Nurses Week.

Are You Ready for Pay for Performance?

A March 2007 report to Congress by the Medicare Payment Advisory Commission (MedPAC), an independent federal body that advises the U.S. Congress on issues affecting the Medicare program, echoed recommendations made by the Institute of Medicine (IOM) for pay-for-performance (P4P) incentives for U.S. health care.

Both MedPAC and the IOM recommend that high quality levels and improvement toward better quality should be rewarded as bonuses, which should come from existing Medicare funds.

MedPAC recommends the following performance measures for P4P initiatives: incidence of acute care hospitalization*, incidence of any emergent care*, improvement in bathing, improvement in ambulation/locomotion, improvement in transferring, improvement in urinary incontinence, improvement in management of oral medications, and improvement in status of surgical wounds. *(Note: Greater weight is recommended for these measures.)

The IOM has written three reports on P4P, which present "a sense of urgency to implement P4P tempered by concerns about the limitations of current quality measures and the challenges of designing and coordinating this fundamental change in the Medicare program," according to the March 2007 MedPAC report to Congress. The IOM recommends an evolving system that continually incorporates new measures, especially those that reach across care settings and span episodes of care. The IOM also recommends a phased approach to implementation that includes a restricted number of conditions, a restricted number of provider types and some initial payments for reporting.

Home Health QIOSC e-Bulletin

The Home Health Quality Improvement Organization Support Center (QIOSC) monthly e-Bulletin contains the latest updates on home health quality improvement resources that are posted to MedQIC. Click [here](#) to browse the newsletter.

Tools and Resources

Home health agencies can use the [Mobility in Action Cards \(PDF\)](#)

to educate staff, patients and caregivers on interventions to improve mobility.

To help the elderly stay healthier longer, the Integrated Healthcare Association has identified the [Top 10 Healthcare Mistakes Made By the Elderly](#).

The [Home Health Medications Management Toolkit](#) contains materials agencies need to implement the Medications Management Model. The toolkit includes an algorithm, model flowchart, protocols, guidelines and other useful tools.

HOSPITAL NEWS



Tennessee Uses Hospital Price Web Site To Push Transparency

The Tennessee Hospital Association recently began posting on a new Web site the prices for common procedures at most of the state's 136 acute care

hospitals, iHealthBeat reports.

The site, called [Tennessee Hospitals INFORM](#), lists the average prices for most common procedures using hospitals' annual reports to the state from October 2003 through September 2004. Price information will be updated this summer. Read [more](#).

Proposed Rule Gives Hospitals More Incentive for QI

The Centers for Medicare & Medicaid Services (CMS) recently issued a proposed rule meant to improve the accuracy of Medicare's payment under the acute care hospital inpatient perspective payment system and provides additional incentives for involvement in quality improvement efforts. The final rule will affect discharges on or after Oct. 1, 2007. Click [here](#) to read the proposed rule.

Reminder: New BDS CDAC Mailing Address

QSource, in collaboration with the Centers for Medicare & Medicaid Services (CMS) and Buccaneer Data Systems Clinical Data Abstraction Center (BDS CDAC), would like to remind all providers of the BDS CDAC new mailing address for medical records.

The new BDS CDAC contract began operation on Dec. 4, 2006, at which time BDS assumed full CDAC operations. All medical record requests are being made in the name of BDS CDAC and all medical record should be submitted to the new facility address:

BDS CDAC
1246 Greensprings Drive
York, PA 17402

Please ensure that your mailing databases and/or medical records department has this updated mailing address, as medical records are due to this location within 30 calendar days of the request

date. BDS CDAC will not be able to offer any extensions for those records sent to the wrong location and/or received past the set deadline.

Click [here](#) to view the Dec. 6 announcement, which includes proper mailing instructions for medical records. If you have any other questions, contact [Richard Bender](#), QSource Medicare beneficiary protection program manager, at 901.273.2630.

PHYSICIAN OFFICE NEWS

CMS Clarifies Guidelines for NPI Deadline Implementation



The Centers for Medicare & Medicaid Services (CMS) recently announced that through May 23, 2008, CMS will not impose penalties on covered entities that deploy contingency plans to facilitate the compliance of their trading partners (e.g. those healthcare providers who bill them). The posted guidance document can be used by covered entities to design and implement a contingency plan. Read [more](#).

CMS Establishes 1.5 Percent Bonus Payment through PQRI

On Dec. 20, 2006, the President signed the Tax Relief and Health Care Act of 2006 (TRHCA). Section 101 under Title I authorizes the establishment of a physician quality reporting system by the Centers for Medicare & Medicaid Services (CMS). CMS has titled the statutory program the Physician Quality Reporting Initiative (PQRI).

PQRI establishes a financial incentive for eligible professionals to participate in a voluntary quality reporting program. Eligible professionals who successfully report a designated set of quality measures on claims for dates of service from July 1 to Dec. 31, 2007, may earn a bonus payment, subject to a cap, of 1.5 percent of total allowed charges for covered Medicare physician fee schedule services. You must have an National Provider Identifier (NPI) to participate in the 2007 PQRI.

CMS is hosting a series of provider conference calls for PQRI. For more information on PQRI or the conference calls, visit [PQRI](#) or [Medicare Learning Network](#).

ESRD Workshop May 12

Network 8 is hosting a workshop to educate healthcare professionals on the diagnosis, evaluation and treatment of chronic kidney disease, including vascular access management.

"Chronic Kidney Disease: From Evaluation to Access" will take place May 12 at Hilton Jackson Hotel in Jackson, Miss. The workshop will take place from 8:30 a.m. to 5 p.m., and registration is \$100/physician and \$50/other profession. Providers

can earn continuing education credits for attending the workshop. The registration deadline is May 7. Pre-registration is required.

Featured speakers include Michael Flessner, MD, PhD, FACP; John Lucas III, MD; and Vo Nguyen, MD. Click [here](#) for more information and to register. For further assistance, contact Network 8 at 601.936.9260.

"Clinical Snapshot: End-Stage Renal Disease" Article Available on MedQIC

"Clinical Snapshot: End-Stage Renal Disease" provides an overview of this disease in the physician office setting. Click [here](#) to access the article.

"Welcome to Medicare" Exam Available

The Medicare Prescription Drug, Improvement and Modernization Act of 2003 (MMA) expanded Medicare's menu of preventive benefits by covering an initial preventive physical examination. This benefit, also referred to as the "Welcome to Medicare" visit, is an excellent way for new Medicare beneficiaries to get up-to-date on important screenings and vaccinations, as well as to talk with their healthcare provider about their medical history and how to stay healthy. Read [more](#).

Spanish Diabetes Road Maps Now Available!

The Spanish version of the Diabetes Road Map is now available. The Road Map is a pocket-size booklet in which patients can keep track of daily blood sugar readings and readings performed during doctor's visits. The Diabetes Road Map is also available in English.

The "EHR Under Construction" brochure is available for practices implementing an electronic health record (EHR).

To place an order for the Diabetes Road Map or "EHR Under Construction" brochure, click [here](#) or call 800.528.2655 ext. 2664.

EHR Resources & Tools Available Online

In the process of looking for an electronic health record (EHR)? Don't know where to begin? QSource offers a variety of online resources and FAQs for physician offices wanting to understand an EHR. You can find it [here](#)!

DOQ-IT RELATED NEWS **CMS Launches DOQ-IT University Web Site**

The Centers for Medicare & Medicaid Services (CMS) recently launched Doctor's Office Quality Information Technology (DOQ-IT) University Web site to support health information technology in physician offices. Read [more](#).

Reducing Errors Top Reason for Adopting IT, Survey Finds

Enhancing patient safety is the top reason for adopting health information technology (IT), while cost continues to be the No. 1 adoption barrier, according to the 18th annual Health Information Management Systems Society leadership survey, iHealthBeat reports. Read [more](#).

House Bill to Help Small Practices Adopt Health IT

Reps. Charles Gonzalez (D-Texas) and Phil Gingrey (R-Ga.) recently introduced a bill that would give grants, loans and tax incentives to small physician practices to help offset the costs of health information technology systems, iHealthBeat reports. Read [more](#).

HHS Names National Coordinator for Health IT

The Department of Health & Human Services (HHS) Secretary Mike Leavitt recently announced the appointment of Robert M. Kolodner, MD, to head the Office of the National Coordinator for Health Information Technology at HHS. Kolodner has been serving as the Interim National Coordinator for Health IT since Sept. 20. Read [more](#).

MEDICARE NEWS

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Medicare Observation Tip Sheet: Physician Guidelines *Utilization of the Observation Setting-"What Physicians Need to Know"*

- The correct use of the observation setting is the best way to avoid medically unnecessary admissions.
- The decision to admit to the observation or inpatient setting is the responsibility of the treating physician.

Read [more](#).

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This material was prepared by QSource, the Medicare Quality Improvement Organization for Tennessee, under contract with the Centers for Medicare & Medicaid Services, an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy.

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