

Health Care Quality Watch

MONTHLY NEWS BRIEFS FOR MANAGERS AND OPINION LEADERS

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One of a series of Web-based learning programs offered by IPRO, *Targeted Utilization Issues and Your Data*, will be held May 11, 2005 from 8 am to 9:30 am.

This two-part program is directed towards physicians, administrators, analytic staff, compliance officers, and utilization directors. Part One of the presentation will provide utilization management/admission necessity information to clinicians in regard to DRGs 243 (medical back problems) and 253 (fracture, sprain, strain and dislocation of upper arm, lower leg except foot age >17 with complication or comorbidity). Case examples and review determinations will be presented. Part Two will examine the Program for Evaluating Payment Patterns Electronic Report (PEPPER) as it relates to this CMS target area. Specifically, payment and length of stay data will be discussed. As in the past, this Collaborative Learning Session will be recorded and available via the virtual library on JENY (<http://jeny.ipro.org> under Payment Error and Case Review Initiatives). Hospitals must register to participate in each Collaborative Learning Session; online registration is available at <https://ifmcevents.webex.com>. Access to both the Internet and a telephone line is required for participation in all training. For additional information, contact Dr. Kathy Terry, Sr. Director, Medicare/Federal Health Care Assessment at 516-326-7767, extension 226.

Director of the Department of Veterans Affairs' (VA's) National Center for Patient Safety James P. Bagian, MD, PE, will keynote IPRO's 21st Annual Membership Meeting, to be held June 7 at the LaGuardia Marriott Hotel in East Elmhurst, NY. Dr. Bagian, a NASA astronaut for 15 years, was a crew member on two Space Shuttle missions (*Discovery*, 1989 and *Columbia*, 1991). Following the 1986 *Challenger* space shuttle explosion, he supervised the capsule's recovery from the ocean. A member of the National Academy of Engineering and the Institute of Medicine, he was chosen as the VA's first Director of the National Center for Patient Safety in 1999. In addition to Dr. Bagian's presentation, the Annual Membership Meeting includes Outstanding Service to the Health Care Community Awards, IPRO Board of Directors Election Results and a complimentary buffet luncheon. To register online, visit www.ipro.org. To register via phone, contact Claudette Steele at 516-326-7767, extension 588.

New York hospitals perform well in most measures of care for heart and pneumonia patients, according to data on a unique consumer Web site unveiled this month by the U.S. Centers for Medicare & Medicaid Services (CMS) and the Hospital Quality Alliance (HQA), a public-private collaboration. The *Hospital Compare*

site provides easy-to-use, free information about the quality of hospital care in New York and nationwide. Consumers can access this resource by visiting www.HospitalCompare.hhs.gov; by selecting "Compare Hospitals in Your Area" on the www.Medicare.gov site; or by calling 1-800-MEDICARE (1-800-633-4227). "CMS's new Web resource marks a milestone in public accountability and is the outcome of a landmark public-private partnership between hospitals, government and other organizations," says Theodore O. Will, Chief Executive Officer, IPRO. "We encourage consumers to use this tool and to talk with their physician about available health care options." As the Medicare Quality Improvement Organization in New York State, IPRO offers hands-on resources, one-on-one training and staff education to hospitals in the state to help in improving the quality of care. "We are working closely with New York's health care providers and IPRO to improve the quality of care available in hospitals, nursing homes, home health agencies and dialysis centers," says CMS Regional Administrator James Kerr. "That is just one step we are taking to make sure that Medicare fits beneficiaries' health care needs by modernizing the program to include a new prescription drug benefit." *Hospital Compare* includes 17 quality measures. The number of cases reported in New York for two heart attack measures – thrombolytic agent within 30 minutes and PTCA

within 90 minutes – were too small to provide useful comparisons. New York hospitals performed as well as or better than the national average on 11 of the remaining 15 measures. However, the state's hospitals performed below the national average in four measures: providing an antibiotic within four hours for patients suffering from pneumonia; discharge planning for patients with heart failure; providing smoking cessation advice to heart attack patients; and smoking cessation advice for pneumonia patients. A number of measures showed significant variation among the state's regions. "These measurements of quality provide a clear roadmap to improving care in the state," says Clare B. Bradley, MD, MPH, Chief Medical Officer, IPRO. "We look forward to continuing to work collaboratively with the state's hospitals to do so."

Medicare beneficiaries have a voice at the top. In response to the MMA Medicare Ombudsman Provision, CMS has appointed Dan Schreiner to become Medicare's first ombudsman effective April 1, 2005. Mr. Schreiner will be the single point of contact with CMS to oversee all beneficiary concerns. He will focus on appeals, complaints, grievances and requests for assistance. Mr. Schreiner's position will be incorporated into the Center for Beneficiary Choices. He will be reporting directly to CMS Administrator, Mark B. McClellan, MD.

Medicare Covers America, a cable television series produced by the U.S. Centers for Medicare & Medicaid Services (CMS), addresses consumer health topics culled from the Medicare consumer calendar now available at www.medicare.gov. The series airs locally on Access Channel 5, Brooklyn Community Access Television, Penfield Community TV, Public Access TV Corporation, Rochester Community Television, Rye

Community Television, Tuckahoe Government Access, Webster Cable Access Television and WHoH-TV. Topics include self-care, treatment options and prevention. Partners include the American Cancer Society, the American Diabetes Association, the American Heart Association and the U.S. Centers for Disease Control and Prevention. Links are provided to all partner agencies, and to an on-line service called Healthfinder, provided by the National Health Information Center (located at www.healthfinder.gov). Visitors can go to www.cms.hhs.gov/cable to access a Medicare calendar or a broadcast transcript. Comments on the broadcast can be sent by e-mail to cable@cms.hhs.gov.

The New York State Health Accountability Foundation (NYSHAF) is preparing its 7th annual HMO Report Card, which looks at the performance of all 19 managed care plans with commercial enrollment operating across the state. Under a special arrangement with the New York State Department of Health, the NYSHAF isolates and highlights commercial plan performance on key measures including immunization for children, appropriate medications for asthma, control of cholesterol levels and follow-up after hospitalization for mental illness. Other measures included in the document address plan members' perception of care in such areas as satisfaction with service, ratings of plan performance and ratings of personal doctors or nurses. Funded by grants from the New York State Legislature, NYSHAF was co-founded by IPRO and the New York Business Group on Health and has a Steering Committee composed of major employer representatives. For more information regarding NYSHAF activities, contact Barbara Schwartz at 516-326-7767, extension 262.

The Centers for Medicare & Medicaid Services (CMS) has launched a two-year demonstration project to evaluate the expansion of Medicare coverage of chiropractic services. Beginning April 1, 2005, chiropractors practicing in five regions — anywhere in Maine and New Mexico; in 23 counties in northern Illinois; in 17 Virginia counties; and in Scott County, Iowa — may offer additional services to Medicare Part B patients. Currently, Medicare limits coverage for chiropractic care to manual manipulation of the spine to correct a subluxation of the spine; medical, diagnostic, and therapy services to treat neuromusculoskeletal conditions are not covered. The demonstration project permits chiropractors to provide extraspinal manipulation or adjustment of a body part other than the spine, x-rays, EMG and nerve conduction studies, clinical lab tests, electrotherapy, ultrasound therapy, and evaluation and management services. They may also order MRIs, CT scans, x-rays, and clinical lab services, and refer patients for physical therapy. The project was mandated under section 651 of the 2003 Medicare Prescription Drug, Improvement, and Modernization Act (MMA); an independent evaluator will assess cost impact, utilization and beneficiary satisfaction. More information is available at <http://www.cms.hhs.gov/researchers/demos/eccs/default.asp>.

Health Care Quality Watch is published monthly by IPRO's **Department of Communications & Corporate Development**. IPRO is a not-for-profit organization that works with public and private sector clients to analyze and improve the quality of health care. For further information, contact:

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