SPECIAL POINT OF INTEREST

5 New ACO Service Lines

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ABOUT MHMD

MHMD, Memorial Hermann Physician Network, is a clinically integrated physician organization comprising more than 3,600 doctors across Southeast Texas. MHMD is one of the largest independent physician organizations of its kind in Texas. Visit our website at www.mhmd.com

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ISSUE VII • SUMMER 2015

News ink

MHMD Becomes the Nation's Top-Performing ACO

MHMD continues to make great strides as a catalyst for change in healthcare delivery. Looking back at 2014, the year brought rapid growth to MHMD. Our relationship with Memorial Hermann Health System, one of the most advanced fully integrated health systems in the nation, allowed us to build and strengthen the Memorial Hermann Accountable Care Organization (MHACO). With 2,000 physicians in the MHACO serving both commercial and Medicare contracts, we have become one of the largest ACOs in the country.

The MHACO continues to allow us to align our clinically integrated physicians under a single-signature contracting structure and take our brand of high-touch, high-tech medicine to the nation's top payors. As we expand our capabilities as an innovator in care delivery, it has resulted in our emergence as the nation's top-performing ACO in regard to quality and cost savings.

When we were first chosen to join the Medicare Shared Savings Program (MSSP), Medicare attributed 24,000 of its covered beneficiaries to us, which has grown to 30,000. We rapidly processed the underlying metrics to identify opportunities to reduce cost in this population and achieved 100 percent compliance with Year 1 quality requirements. For the first 18 months, MHACO earned the distinction of being one of the top-performing ACOs in the country, saving Medicare more than \$58 million as part of its Shared Savings Program. Continued success in the MSSP will require us to conform to even higher standards of quality and efficiency.

By harnessing the latest IT tools, we're able to facilitate data collection about the quality of care our physicians deliver. By reporting codes that reflect nationally established,



evidence-based performance guidelines for improving quality of patient care, we glean information unavailable from claims data that we use to continuously improve our care delivery and clinical outcomes. The success has led to additional contracts with commercial payors that reward our physicians for quality, efficiency and coordination of care. These payors recognize the value of reimbursing our physicians for improvement of the health of the populations we serve, allowing us to strengthen our focus on wellness and prevention.

Today, our ACO is stronger than ever. Other health systems and physician organizations are looking to us for ideas on population health management and strategies that work. We're branching out into service line agreements tied to continued improvement of patient outcomes. The progress we're making allows us to deliver a brand of health care that brings benefits not only to our organization, its facilities and physicians, but also reflects that we are doing right by our patients and the community we serve.



Christopher Lloyd MHMD CEO

MHMD Announces Newly Elected Board Members





James Guo, M.D. ANESTHESIOLOGY

Brian Heaps. M.D. **OBSTETRICS & GYNECOLOGY**

I would like to take this opportunity to welcome new board members James Guo, Brian Heaps, Christophe Salcedo and Pete Turcinovic. They, along with the rest of the board, are committed to providing evidencebased clinical care and governance, to be transparent, to collaborate, to demonstrate compassion and respect, to be accountable and to maintain professionalism. These are the tenets of our compact by which we interact with our members.

MHMD members should be proud. Our Medicare ACO was the most successful in the country. Many of you have worked hard to provide for this and have seen some rewards. We are developing three new ACOs for hospital medicine, orthopedics and cardiovascular services. Through these organizations, we will be better able to coordinate patient care and optimize quality and service. This will require more physician-to-physician communication and attention to the entire spectrum of the patient's experience. We are now responsible for appropriate patient selection, ensuring that the patient is being managed optimally before and during hospitalization as well as after discharge. It is critical that communication between caregivers and patients is timely, appropriately informative and in a language that the patient understands.

Communication will be essential as we focus on quality metrics, such as glucose control, which will need teamwork between the surgeons, anesthesiologists, hospitalists and primary care doctors to manage throughout



Christophe Salcedo, M.D.

GENERAL SURGERY

Pete Turcinovic. M.D. GENERAL SURGERY

the patient's episode. This population management can help us ensure that our future ACO efforts continue to be successful.

We are marketing directly to businesses wanting local and readily available physician services. We have promoted primary care patient homes geographically but will need to develop an aligned specialist network to complete their care. The primary care physicians have been working by region to measure and report quality results. We anticipate expanding this model to include key specialist programs to allow closer integration of the physician network and more effective coordination of care.

The National Academy of Medicine (formerly the Institute of Medicine) states that quality

care is safe, effective, efficient and equitable. Though Length of Stay (LOS) was initially a hospital financial problem, it is now considered a quality metric. For this reason our ACO reimbursement will be partially based on equaling or improving on the national norms. This will



require looking at all aspects of hospital stays. Currently we are about a half day over the Geometric Mean Length of Stay (GMLOS). It is important that we begin appropriate care in a timely fashion to prevent patient harm. Increased staffing and use of physician extenders can decrease the burden on the individual physician. Memorial Hermann has committed to providing the tools needed to make this possible. We will be modeling some programs and ask for your input and participation.

Our organization of independent practitioners working together to provide the best quality care is unique. Partnership with Memorial Hermann has placed us in a strategic position in our marketplace to navigate our evolving healthcare system and with your participation to continue to be the premier ACO in the country.



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Charlotte Alexander, M.D. MHMD Board Chair

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MHMD Expands Leadership Team

Chief Operating Officer: LeTesha Montgomery

LeTesha Montgomery, RN, FACHE, joined MHMD as chief operating officer last fall. As a registered nurse as well as an executive with a master's degree in health administration, Montgomery brings proven



clinical and administrative skills to her leadership role at MHMD. She has a keen understanding of physician concerns and brings a wealth of experience gained by

LeTesha Montgomery, RN, FACHE Chief Operating Officer

managing and directing a variety of physician practice operations, mostly within the prestigious Mayo Clinic in Minnesota.

In her 11 years at Mayo, she spent six years as administrator of Clinic Operations and was awarded the Department of Medicine Administrator of the Year award. Her efforts there resulted in substantially improved scheduling processes, patient access, financial performance, operating efficiency, patient satisfaction and physician productivity, among many other accomplishments.

In her role as COO, Montgomery will play an integral part in the future success and continued growth of MHMD. "I am excited to be joining MHMD at such a critical juncture in the organization's evolution," says Montgomery. "I greatly appreciate the warm welcome I have received from our physician members. I look forward to working with our members to optimize the efficiency and functioning of their practices, with the ultimate goal of yielding satisfaction for our physicians and their patients."

Network Management Director: Susan Garcia

Susan Garcia

has served as

the director

of network

for MHMD

management

since August

2014. A Texas

native, Garcia

than 20 years

of experience

brings more



Susan Garcia, Director of Network Management

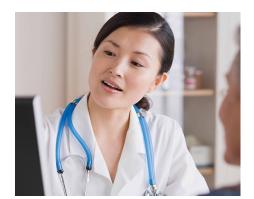
in health care to her role at MHMD.

For the past seven years, she has worked within Memorial Hermann in the capacity of managed care contract administrator, responsible for negotiations and oversight of performance metrics in both managed care contracts and ACO agreements. She has exhibited effectiveness in addressing challenges and adding critical value in negotiations with payors on behalf of both the Memorial Hermann ACO and MHMD.

Prior to her time with Memorial Hermann, she worked for eight years as the Director of Network Relations for Humana in Texas, Nebraska, Oklahoma and New Mexico. In both positions she held supervisory responsibilities in marketing, provider relations and managed care.

As MHMD continues to unite physicians within Clinical Integration and the ACO, it is increasingly crucial that the MHMD network of physicians is managed properly. The organization is committed to ensuring MHMD remains comprised of excellent physicians who are committed to advancing MHMD strategies and positioning the organization for success in managing the health of the people being served.

PQRS Quality Reporting



As part of the Clinical Integration program, MHMD uses compliance with CMS PQRS requirements as one of our gateway criteria for bonus eligibility. Physicians are encouraged to continue participation in the PQRS program to avoid reimbursement penalties being initiated this year by CMS for PQRS nonparticipation.

Physicians are reminded that CMS has

deleted several reporting codes from the program. If physicians continue to add the deleted codes to their claim forms, the claims may be rejected by payors.

The 2015 CMS-approved PQRS measures along with the Specifications Manual providing detailed information about how to report the measures can be found on the CMS website: (cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ PQRS/MeasuresCodes.html).



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Shawn Griffin, M.D. Chief Quality & Informatics Officer

MHMD CPCs Continue to Advance Health

The Clinical Programs Committees (CPCs) continue to expand in terms of committees, meetings, physician participation and, most significantly, their impact on the practice of medicine throughout our organization. Currently, the CPCs include 57 specialty-based subcommittees, joint operating councils and task forces. More than 450 physicians participate in these committees along with nurses, pharmacists, care managers and executives from each Memorial Hermann hospital.

As a result, the CPCs are streamlining processes and developing standards of care that improve safety as well as the quality and cost effectiveness of the care being delivered.

Adoption of numerous clinical management guidelines by many of the CPCs ensures compliance with scientific evidence and best practices throughout the organization. The work done by the CPCs forms the backbone of Memorial Hermann ACO activities and care delivery innovations.

CPC multidisciplinary task forces are addressing:

- · Ethics and supportive medicine
- Informatics
- Inpatient medicine
- · Deep vein thrombosis prevention
- · Timely assessment of admitted patients
- Perioperative management
- · Pain management
- Physician documentation CPC members have recommended over

530 process improvements adopted by hospitals in the Memorial Hermann Health System in 2014. Some notable examples include:

- Development of a standardized peer review process and reporting form
- Implementation of the Surgical Home model through the work of the Perioperative

CPC and its Joint Operating Council

- Launching a multidisciplinary Blood Management Council to help standardize perioperative blood management and transfusion guidelines
- Launching an Informatics Committee entirely focused on informatics in the ambulatory setting
- Adoption and standardization of credentialing and privileging criteria for robotic surgery
- Standardization of nomenclature related to orthopedic and sports-related injuries



DKeth Jernardy MD

Keith Fernandez, M.D. President & Physician-in-Chief

MyMemorialHermann Patient Portal Expands Functionality

In January 2014, the MyMemorialHermann patient portal was launched to provide patients secure and timely electronic access to their health information such as lab results, problem lists, medications, allergies and immunizations from Memorial Hermann's electronic medical record system powered by Cerner. Meaningful Use and the Electronic Health Record Incentive Program, of the Healthcare Information Technology for Economic and Clinical Health Act (HITECH), have been key drivers in the portal's implementation.

MyMemorialHermann empowers patients to be more involved in their health by being more informed and facilitates useful dialogue between a clinician and a patient. In addition, expanding data access provides a level of convenience that translates to operational efficiencies and longer term cost savings for patients, practices and hospitals.

While many of the elements that must be made available to patients are specified within the government's Meaningful Use objectives, new features and functionality of the portal are routinely made available. Memorial Hermann created a steering committee to evaluate options and make recommendations to the System's Ambulatory Medical Informatics Committee, Medical Informatics Committee, and the Health Information Technology Executive Committee, comprised of key leaders and affiliated physicians throughout the System.

MyMemorialHermann's My Health Record allows patients to:

- · See a health record summary
- View clinic, ER or hospital discharge information per visit



- View lab results
- View radiology reports (coming soon)
- Schedule appointments online with ScheduleNow
- Send messages to providers
- Request medication refills
- Access online bill pay

Patient empowerment programs such as MyMemorialHermann are critical to achieving the System's goal of Advancing Health. To learn more about MyMemorialHermann, visit mymemorialhermann.org.

ACO Expanding into New Service Lines

With 2,000 physicians serving both commercial members and Medicare beneficiaries, the Memorial Hermann Accountable Care Organization (ACO) has become one of the largest in the country.

As we continue further along our journey toward value-based health care, MHMD is partnering with Memorial Hermann hospitals and affiliated physicians to implement service line projects in Orthopedics, Heart and Vascular, and Hospital Medicine.

Central to the objectives of the Accountable Care Organization Service Line (ACOSL) Projects is a focused effort on increasing coordination of care for Medicare beneficiaries. This includes ensuring high quality and safe care, for every patient, every time. Through effective population management, we strive to prepare our members for future reimbursement models focused on value-based care, which is defined as high-quality, cost-efficient care.

Beginning in FY15, Memorial Hermann ACOSL Projects will span FY15 and FY16 and include participation at all nine Memorial Hermann acute-care hospitals. Each Memorial Hermann Campus has its own dedicated physician, administrative and quality leader per service line. The ACOSL Projects are focused on five key hospital measures:

- 1. Length of stay
- 2. Observation hours
- 3. Patient satisfaction
- 4. Patient safety and quality
- 5. Supply cost

To date, 234 eligible physicians are participating in these initiatives. Meetings are occurring regularly at each Memorial Hermann Campus and the first Steering Committee Meeting was held in March 2015. I am extremely excited about this work and the opportunity we have to positively impact the care provided to our patients.



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Emily Allinder Scott, M.H.A. VP, MHMD Executive Administrator, MHACO

MHMD University at the Rice University School of Management

February 27-28 was the inaugural weekend of MHMD University at the Rice University School of Management. The entire program is being conducted on weekends spanning a five month period.

Twenty-seven Memorial Hermann executives and MHMD physicians are taking part in the program. The first module focused on the underpinnings of successful leadership across all levels of healthcare organizations.

Topics included:

- Understanding levels of leadership
- The role that personality plays in leadership style and effectiveness
- How the changing landscape of the healthcare industry impacts its leaders
- Risks to leadership success

The entire two-day session was highly interactive and included formation of four teams that will work on projects directed at improving the quality, safety and efficiency of health care.

Specific projects will address Medicare



Professor Brent Smith of Rice University discussed the importance of successful leadership across all levels of healthcare organizations.

profitability, the challenges of coordinating the efforts of a large multidisciplinary and often matrixed leadership group, IT improvement opportunities and optimization of patient satisfaction. A Rice faculty member was assigned to coach each team as they assembled for some introductory work.

Participants found the module very engaging

and helpful. Many cited the value of the case studies being discussed and found areas to make specific changes to leadership tasks based on what they learned.

The second module was held on April 24-25 and focused on the healthcare industry, the current climate and finances.

Supportive Medicine Program Continues to Grow

The MHMD Supportive Medicine Program supports the patient through the journey of his or her illness. The interdisciplinary care team also assists the family that cares for the patient and serves as an advocate. In Supportive Medicine, we're not necessarily trying to fix what is wrong with the patient, but to walk the journey with that individual and make a negative situation more tolerable.

Supportive medicine is a specialized medical discipline which provides patients with relief from symptoms, pain and the stress of a serious illness, no matter the diagnosis or prognosis. Supportive medicine also assists patients and their families by reducing the physical, social, emotional and spiritual burdens of illness in order to improve quality of life.

A patient can benefit from supportive medicine at any stage of the illness, regardless of the prognosis. By providing additional support and resources and aggressively managing a patient's symptom burden, the quality of life of both patients and their families improves and some patients actually live longer.

Our Supportive Medicine Program provides care for patients in a variety of settings. Patients can be consulted in the hospital or seen in one of our Supportive Medicine clinics. We also offer home-based services for patients who benefit from care at home. Supportive Medicine averages 350 new patient consults a month and is the only palliative care program in Houston to offer the full spectrum of services: Inpatient consultations, clinic appointments and homebased services.



The first Supportive Medicine Symposium held in April attracted hundreds of clinicians.

The overall objective of Supportive Medicine is to aggressively manage the symptoms patients experience, while empowering them to be able to deal with a chronic illness. The program utilizes a robust interdisciplinary care team to address the myriad of clinical and psychosocial issues faced by patients with chronic disease. The Supportive Medicine care team includes physicians, nurses, nurse practitioners, social workers, chaplains and licensed clinical therapists.

Currently, eight Memorial Hermann hospitals offer Supportive Medicine programs: Memorial City, Northeast, Northwest, Southeast, Southwest, Texas Medical Center, The Woodlands and Children's Memorial Hermann Hospital.

WAYS TO REFER A PATIENT TO THE MHMD SUPPORTIVE MEDICINE PROGRAM

- Inpatients can request a consult from their attending physicians.
- Patients or physicians can call 832.644.6496.
- ACO members can contact their MHMD care manager for a patient evaluation and referral.
- Patients who qualify for home health can request Supportive Care services and be evaluated for the service by Memorial Hermann Home Health with an order from their physician.

Each hospital team has a dedicated, boardcertified palliative care physician, a nurse coordinator and in most cases a nurse practitioner, who work closely with a chaplain and social worker to develop a personalized care plan for each patient.

Patients can receive outpatient care at Supportive Medicine community clinic locations: Memorial City, Southeast, Texas Medical Center and The Woodlands.

In April, MHMD hosted its first Supportive Medicine Symposium at Memorial City. Our goal was to increase understanding among clinicians and administrators about how Supportive Medicine fits into the care continuum to improve patient care delivery and positively impact the Memorial Hermann Health System for all involved stakeholders.



Sandra Some

Sandra Gomez, M.D. System Director of MHMD Supportive Medicine Program

New Enterprise Credentialing Process Benefits Physicians and Hospitals

Enterprise Credentialing

Membership in MHMD is renewed every two years through a recredentialing process that requires our physicians to fill out application forms and submit them to us. This is a requirement of the Texas Department of Insurance. Similarly, The Joint Commission requires that hospital medical staff membership be renewed every two years. This too carries the burden of filling out and submitting medical staff application forms to every hospital where the physician has privileges. Because this recredentialing process has not been synchronized within Memorial Hermann, physicians and their office staff members have had to go through the application process over and over during each two-year period.

This is about to change. Beginning January 1, 2016, all credentialing dates for MHMD and all MH hospitals will be consolidated to a single date for each physician. That means the reapplication process will only need to be undertaken one time every two years for all applicable Memorial Hermann facilities and MHMD. Not only will this greatly reduce the burden on physicians, but it will also eliminate inconsistencies in procedures and ensure that when the Memorial Hermann and MHMD boards consider applications for membership renewal, they do so with consistent information and consistent granting of privileges. This is important: under the current non-synchronized process,

the Memorial Hermann Board has received inconsistent information relating to reappointment recommendations for the same physician from the Medical Executive Committee from each campus.

The new process will include will include electronic standardization, improved service to our physicians, increased transparency so that physicians will be able to track easily the progress of their application and reduction of duplicated efforts. The concept of a single reappointment

date has already been widely presented to physicians and endorsed throughout our health system.

With the advent of Accountable Care, a strong, standardized physician credentialing process is essential to delivering safe, high-quality patient care. Not only will standardization help to improve quality and consistency across the health system, it should greatly improve patient and physician satisfaction.

Enterprise physician credentialing in ACO networks improves:

- Physician/customer/employee satisfaction
- Patient health and satisfaction
- **Ouality and safety**
- Regulatory compliance
- Single-signature contracting opportunities

January 2016

ENTERPRISE CREDENTIALING PROJECT KEY DATES

- Paper renewal application packets will be mailed to all practitioners June-October 2015 with renewal dates in January - May 2016. November 2015
- · Electronic application for hospital privileges and network memberships
- All reappointments starting in January 2016 move to earliest reappointment date
- Campus committees can electronically review and approve applications January 2016

With the advent of Accountable Care, a strong, standardized physician credentialing process is essential to delivering safe, high-quality patient care. Not only will standardization help to to improve quality and consistency across the health system, it should greatly improve patient and physician satisfaction.

The reduction of duplicate credentialing efforts will result in improved operational and staff efficiencies. This new process will NOT impact the authority of each facility's MEC to make approval recommendations for credentialing and privileging at their respective locations.

Eventually, the new Enterprise Credentialing Process will involve a single electronic application that the physician will only need to fill out once at the time of appointment or reappointment - regardless of the number of Memorial Hermann hospitals involved. A single, primary source

verification process will be used by all parties.

The MSO/Apogee (MSOW) credentialing database will serve as the single source of information throughout Memorial Hermann and MHMD. Physicians will be able to track the status of their appointment/reappointment applications online.

As a result, almost half of the total reappointments will be eliminated, which will greatly improve the efficiency of the credentialing process and the medical staff offices.

The single reappointment date for each physician will be the first date that each physician is due for reappointment at any Memorial Hermann facility or within MHMD. Thus, the entire process will be taking place through a two-year period, achieving completion at the end of 2017.



Andaghuno

Jon Gogola, M.D.

System Hosts Third Annual Robust Process Improvement **Quality & Safety Expo**

The Memorial City Westin was the site of Memorial Hermann's third Annual Robust Process Improvement Quality & Safety Expo. The event featured 70 Robust Process Improvement projects from all around the System: inpatient, ambulatory, outpatient and more. Newslink caught up with System Chief Clinical Officer M. Michael Shabot, M.D., to discuss the growth of this year's event and its record number of physician-led projects.

Q. How are the RPI projects featured at the System's annual Quality & Safety Expo helping Memorial Hermann become a high reliability organization?

Dr. Shabot: These projects drive improvement across our System that is making us one of the highest reliability health systems in the country, if not the highest reliability health system in the United States and maybe even the world. We're going to become recognized as the first healthcare provider to operate high reliability hospitals, clinics and ambulatory centers.

"There is probably

no other system in the

country that's doing

process work to the

extent that Memorial

Hermann is. To work

Memorial Hermann has

been a great value and

organizations across

– Coleen Smith

The Joint Commission

Center for Transforming

the country."

Healthcare

it's helping us help other

very closely with

Q. What part of healthcare delivery are we focusing on improving?

Dr. Shabot: The projects focus on areas in care delivery where there may be an opportunity for error. Robust Process Improvement involves a systematic evaluation of causes of error, methods of preventing error and making systematic changes to ensure that the right thing is not only the easiest thing to do, it's what's done all the time. It allows us to eliminate errors before they start. We're putting in multiple safety mechanisms, sometimes at great expense to the System, but they make surgery, our medication

Q. What kinds of results are we achieving due to process improvement? Dr. Shabot: Since 2007 we've administered over a million units of blood with zero hemolytic transfusion reactions, which is amazing. Our hospitals are now going five years plus without a single retained foreign body in surgery. Our hospitals are going years without infections from central catheters in

RPI Quality & Safety Expo. the blood stream of patients on the ventilator.

We're now going long periods of time without urinary tract infections in our hospitals, which is absolutely remarkable.

Q. What is the significance in the increase in physician-led projects at this year's **RPI event?**

Dr. Shabot: Physicians take great ownership in these projects, they get other physicians on board and we know the hospitals and our clinics can't do it alone. Physicians have to be engaged. We've got nearly 500 of them now engaged in quality improvement. That engagement is absolutely essential because physicians can more rapidly to improve other physicians' actions and behaviors. In our System they're doing it, and that is what sets Memorial Hermann apart from other healthcare systems locally and nationally.

Q. How are we sharing what we learn with other organizations?

Dr. Shabot: We advise and give of our time



Coleen Smith of The Joint Commission (center) poses with Anne-Claire France, Dr. Michael Shabot and Juan Inurria (I to r) at the 2015 System

very freely because we actually want high reliability to go all across the country, so we present to state hospital associations, The Joint Commission, the American Hospital Association, the VHA and now even the Department of Defense.

Q. What are we doing with the Department of Defense?

Dr. Shabot: Memorial Hermann is advising the Department of Defense and the U.S. Army to help improve health care for all of their facilities. We want our Army hospitals to be the very best they can possibly be for those who are in service to our country. So we are happy to teach and to lead.

Q. How do we partner with The Joint **Commission to improve care?**

Dr. Shabot: We've co-developed projects with The Joint Commission Center for Transforming Healthcare in high reliability for hand hygiene, eliminating infections and preventing falls. We're a pilot for The Joint Commission's assessment of high reliability hospital readiness, which they would like to bring to all the hospitals in the country. They also have introduced many of our ideas, like the Certified Zero Awards, to other hospitals systems.

procedures, and our blood transfusion procedures absolutely safe.

Preventing Surgical Site Infections

Memorial Hermann's Enterprise Quality, Patient Safety and Infection Control (QPSIC) team has launched a systemwide initiative to reduce the number of preventable surgical site infections. Multiple factors contribute to patients acquiring surgical site infections, including patient preparedness, equipment and personnel. With patient outcomes as top priority, the QPSIC team is focused on reducing variation with these contributing factors to achieve the long-term goal of zero infections.

While obtaining zero surgical site infections is challenging, Memorial Hermann employed Robust Process Improvement to determine a solution. The QPSIC team has identified elements that contribute to surgical site infections and began rolling out preoperative chlorhexidine gluconate (CHG) bathing wipes and kits for all patients undergoing a surgical procedure, effective March 9, 2015. An educational video and fact sheets about the CHG bathing process have been produced to help educate patients.

This particular element of performance in surgical site infection prevention is endorsed by the Association of periOperative Registered Nurses and the Healthcare Infection Control Practices Advisory Committee.

To further ensure quality assurance, Memorial Hermann has designated an executive sponsor and process owner at each hospital to lead a surgical site infection task force that meets regularly on change management.

"Since preventing surgical site infections is multi-factorial, we have launched a methodical and multi-stakeholder approach to standardize processes and thereby reduce variation," said Juan Inurria, vice president, Enterprise Quality, Patient Safety and Infection Control. We are very appreciative of the support we have across the System to address this complex initiative."

To view the new CHG bathing video or educational materials, go to **memorialhermann.org/before.**

e-Quality Check Update

e-Quality Check Advancing Quality Outcomes

The e-Quality Check program at Memorial Hermann is a component of the Meaningful Use Electronic Health Record Incentive Program.

e-Quality Check focuses on electronic reporting of quality metrics directly from the electronic health record (Care⁴) to the Centers for Medicare & Medicaid Services (CMS).

e-Quality Check supports the transition from manual chart review of Core Measures to electronic reporting of electronic Clinical Quality Measures (eCQMs), the electronic version of Core Measures.

The new e-Quality measures are captured in Care⁴ as care is provided, while the patient is in the hospital. The measures must be met prior to discharge and cannot be corrected after discharge. Memorial Hermann is working to educate healthcare providers on the use of e-Quality Check tools and any workflow adjustments necessary to accurately and effectively capture eCQM data.

The Official MU Eligible Hospital (EH) Stage 2, Year 2 reporting period began October 1, 2014.

Physicians are asked to focus on the following:

- Use appropriate ED Stroke and IP Ischemic Stroke Medical Power Plans (MPPs), and document date and time the patient was last known well or last seen normal in the Last Known Well PowerForm.
- 2. Complete documentation requested by **Reason for No Antithrombotic at**

Advancing Quality Outcomes e-Quality Check Meaningful Use Patient Safety Documentation ICD-10 Credentialing





Memorial Hermann e-Quality Check Manager Michael Mickan (r) discussed ways to improve electronic Clinical Quality Measures with Clinical Quality Review Manager Rhonda Ransom and Director Joseph Kunisch at the System's Third Annual Robust Process Improvement Quality & Safety Expo held in February.

Discharge and **Reason for No Statin at Discharge Discern Alerts,** which are triggered by the Discharge Order for ischemic stroke patients if an antithrombotic or statin has not been prescribed (implemented February 2015).

- Reconcile Home Medication before entering discharge orders. If an antithrombotic or statin is prescribed, the Discern Alerts will not fire.
- Complete the Reason for No Thrombolytic PowerForm when initiating the following MPPs (Implemented Feb. 2015):
 - NEURO Stroke Acute Ischemic/TIA Non-Thrombolytic Admission MPP
 - NEURO Stroke Acute Ischemic/TIA Non-Thrombolytic Add On MPP
- 5. Use appropriate MPPs for DVTs and PEs.
- Visit Advancing Quality Outcomes e-Quality Check section on InSite and PhysicianLINK for new updates and educational videos.

For questions, email eQC@ memorialhermann.org or visit the Advancing Quality Outcomes e-Quality Check section on PhysicianLINK or InSite.

System Names New Chief Medical Information Officers



CMIO, Inpatient Services

CMIO for Inpatient Services, Nnaemeka G. Okafor, M.D., will provide primary physician leadership for electronic health record (EHR) systems for Memorial Hermann hospitals.

Board certified in emergency medicine and medical informatics, Dr. Okafor also received a master's degree in biomedical informatics from the UTHealth School of Biomedical Informatics and has been serving as Memorial Hermann's director of medical informatics for Acute Care Services. He previously served as director of medical informatics for the Harris Health System and as medical director of informatics for the UTHealth Emergency Medicine department.



As CMIO for Ambulatory Services, Alan Weiss, M.D., will provide primary physician leadership for electronic health record (EHR) systems for Memorial Hermann outpatient offices.

Alan Weiss, M.D. CMIO, Ambulatory Services

Board certified in internal medicine, Dr. Weiss received his medical degree from Case Western Reserve University School of Medicine and completed a residency in internal medicine at the Johns Hopkins Bayview Medical Center. Since 2013, Dr. Weiss has served as director of medical informatics for the Memorial Hermann Medical Group. He previously served as associate medical director, inpatient clinical systems for the Cedars-Sinai Health System and senior analyst in information technology at the Cleveland Clinic.

MHMD Receives Honorable Mention at 2015 Case in Point Platinum Awards



Care Management Team with Mary Folladori, System Director of Care Management

I am pleased to report that MHMD received Honorable Mention at the Case in Point Platinum Awards, for our submission on care management. The Case in Point Platinum Awards Program, sponsored by Dorland Health, sets the standard for recognizing professionals and organizations who demonstrate sustained success across a variety of models and settings in continuum of care coordination.

The submission, entitled Care Management Operations and Clinical Integration: A Foundation for Success in Accountable Care, provides an in-depth look into how the Care Management strategy for the Memorial Hermann Accountable Care Organization was designed and put into operation.

Healthcare systems across the country are racing to develop sustainable models of care that will produce high-quality care, while still ensuring survival in today's constricted financial marketplace. Memorial Hermann's leadership theorized that by providing physicians with an integrated ambulatory care management service, the right information technology tools and actionable data, physicians would be more equipped to provide high-quality, costeffective care. The success of this strategy was validated when the Centers for Medicare & Medicaid Services (CMS) named the Memorial Hermann Accountable Care Organization among the top three Shared Savings Plan programs in the country.

We know that physician engagement and support is crucial to the success of any ambulatory Care Management department. It is only through the dedication of the MHACO practices and the care teams involved that we have been able to achieve such recognition for our population management efforts.

At the recent Case in Point Conference and award ceremony in May, Mary Folladori, RN, M.S.N., ACM, CMAC, System director of case management, and I gave a presentation on the key steps needed to generate the organizational synergy that has enabled us to improve population health outcomes. Thank you for doing your part for our patients.



Michael Davidson, M.D. Chief Medical Officer, Care Management

MHMD's Health Innovation Program Gets New Name and New Leadership

Earlier this year, Natalia Reed, M.S., M.B.A., took the helm as director of Life In Balance. MHMD's evidence-based worksite wellness program. Formerly called HIP, Life in Balance will benefit greatly from Reed's extensive background in the health and wellness profession as a consultant, health and wellness education manager and leader. Not only has she gained experience in leading the development of innovative



Natalia Reed, M.S., M.B.A. Life in Balance Director

"We help individuals explore and evaluate areas in their lives that may have prevented them from making lasting health changes."

worksite wellness programs for large health insurance companies, she has also created award-winning worksite wellness programs. The Life

in Balance program focuses on changing behaviors that lead to poor health by using techniques designed to empower and motivate individuals to take charge of

their health. It is designed to help employees find value in changing their beliefs, attitudes and behaviors toward developing and maintaining a healthier lifestyle.

"We help individuals explore and evaluate areas in their lives that may have prevented them from making lasting health changes," explains Reed. "Participants receive tools and support designed to help them be effective in making lasting changes."



also directed the development of a childhood obesity project targeted for local school districts to eradicate childhood obesity and improve health outcomes for families.

In addition to her leadership role at Life in Balance. Reed serves on the board of the American Lung Association where she strives to increase public awareness of lung disease caused by smoking, environmental pollutants and hereditary factors. Her leadership and passion for health and wellness promise to provide the necessary insight, experience and skills to promote innovation and long-term health improvements for Memorial Hermann employees.



Life in Balance provides a personal health status inventory and health improvement plan. Participants attend supportive group sessions that help

facilitate changes in areas such as nutrition, exercise, stress management and coping skills. One-on-one and telephonic private consultations are also available with a personal health coach or counselor.

The 24-week program is currently open to Memorial Hermann employees and offers a weight management program and a smoking cessation program. Participants can register by calling 713.338.5700.



ICD-10 Update

Healthcare providers transition to the new ICD-10 classification system on Oct. 1, 2015. ICD-10 will accommodate more detailed medical descriptions of varying symptoms and levels of severity. It allows for information to be captured in a systematic manner and can be readily expanded to incorporate emerging discoveries and treatments.

As part of its Clinical Documentation Initiative, Memorial Hermann is increasing the number of coders and clinical documentation specialists on staff and has offered physician training and support with the new codes, including a new online CME-approved course available on PhysicianLINK and InSite.

How To Take the Free Online CME – "The Physician's Role in ICD-10 and CDI (Clinical Documentation Improvement)" Select ICD-10 tab, then CME, then CME -ICD-10 Online Introduction.

Log in using your 6-digit physician ID with all preceding zeros. Use "Welcome" for your initial password. Change your password, make note of it, and enter a correct email address, if needed.

Select MY PLAN to access: "How to Use" instructions; a MHHS CME Statement; and finally, your CME Online course: "The Physicians Role in ICD-10 and CDI".

If you have any technical questions about the online ICD-10 CME, please contact Skillsoft 24/7 for Technical Support at 1.866.754.5435.

The Online ICD-10 CME is approved for 1 CME Ethics credit.

Any attending, consulting or diagnosing physician who documents in a Memorial Hermann medical record should take the Online CME. It also is highly recommended for residents, fellows, PAs and NPs.

For ICD-10 questions, call 713.338.5088 or email ICD-10Questions@ memorialhermann.org.

PMI Offers Local Training Opportunities for Medical Office Staff

Since 2003, MHMD, the Memorial Hermann Physician Network, and Practice Management Institute (PMI) have worked together to provide local access to practice management training for providers and their staff as a value-added member benefit. PMI continues today with regular programs held in the Houston area covering aspects of the business of running a successful medical office. On a national level, PMI also conducts webinars, conferences, certifications and internal training.

UPCOMING CLASSES FROM PRACTICE MANAGEMENT INSTITUTE

ICD-10 CM Coding Workshop

Overview of implementation steps along with code characteristics, guidelines and practice coding exercises.

Memorial City	July 14
Southwest	July 15
Southeast	July 16

Coding ICD-10: The Next Level

Intermediate training with hands-on coding exercises.

Memorial City	August 18
Southwest	August 19
Southeast	August 20

All sessions are held from 9 a.m. to 4 p.m. To register, visit pmiMD.com. MHMD members use code MHH1050 to receive a 20 percent discount when registering for PMI webinars and local programs. Earlier this year, PMI contracted with Memorial Hermann Medical Group (MHMG) to provide office management training and certification for managers within the physician group. The Certified Medical Office Manager (CMOM)[®] certification helps protect providers from risks, provides guidance on employee management and improves the practice's financial outlook. This certification also demonstrates to providers, auditors, compliance officers, employers and business associates the achievement of advanced knowledge and skills to excel in a practice management role.



This summer on three Memorial Hermann Campuses, PMI is offering its ICD-10 Readiness Series for medical office staff.

- ICD-10 CM Coding Workshop

- Coding ICD-10: The Next Level

All sessions are held from 9 a.m. to 4 p.m. See the schedule at left.

To view upcoming Houston area topics, visit pmiMD.com or contact PMI's Houston Learning Center coordinator, Donna Alwais at **donna.alwais@memorialhermann.org.**

CONTINUING MEDICAL EDUCATION

Congress Passes, President Signs SGR Repeal



Congress passed by large, bipartisan margins, and President Obama signed into law, HR 2, the Medicare Access and CHIP Reauthorization Act of 2015, permanently repealing the Medicare Sustainable Growth Rate (SGR) payment adjustment mechanism for physician reimbursement, which had been in place since 1997. Passage of the legislation averted a scheduled 21.2 percent reduction in the Medicare reimbursement rate, which would have been implemented for claims beginning April 1, had Congress and the president not taken action. Physicians, hospitals and healthcare providers welcomed passage of this long-term measure, since those treating Medicare patients have had to rely on Congress to implement 17 short-term payment adjustments, commonly referred to as the "doc fix," since 2003. Prospects of reimbursement rate reductions of 20 to 30 percent, had Congress failed to provide these temporary "patches," had created great uncertainty in the healthcare marketplace.

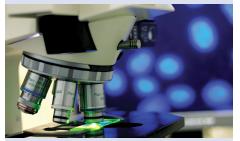
HR 2 replaces the SGR with a *merit*based incentive payment system (MIPS); and incentives for physicians choosing to participate in *alternative payment models* (APMs), gradually transitioning from a fee-forservice to a value-based model. Physicians will be able to choose between participation in one of the two proposed new payment adjustment mechanisms. The MIPS payment methodology will sunset and replace the current incentives for meaningful use of electronic health records (EHRs); the Physician Quality Reporting Initiative (PQRI); and value-based modifier payments. A merit-based incentive payment system (MIPS) performance assessment methodology, upon which physician payment adjustments will be determined, will be based on four factors: quality, resource use, clinical practice improvement and meaningful use of EHRs. Thresholds will be established by the HHS secretary. Physicians choosing to participate in the alternative payment model (APM) adjustment mechanism will have to provide services to Medicare beneficiaries in any model in which the physician bears financial risk for the care provided, use certified electronic health records, and agree to be subject to similar quality metrics as will be established for the MIPS program.

According to the Congressional Budget Office (CBO) permanent SGR repeal will cost \$214 billion over 10 years, with \$73 billion of that cost anticipated to be paid for by provider cuts and new revenue. Representing the largest components of the offsets for the measure, inpatient hospital payments will be reduced by 0.2 percent over a five-year period, and means testing for Medicare beneficiaries making more than \$133,000 a year will result in their paying higher premiums.

Another significant provision of the bill extended funding for CHIP, the Children's Health Insurance Program, for two more years.







New State Mandate for Radiation Safety Training Delayed

In January, the Texas Department of State Health Services delayed the implementation of the Radiation Safety Awareness Training requirement for physicians.

As safety remains a high priority for our organization, Memorial Hermann supports the continuation of the one-hour hands-on Radiation Safety-Fluoro Training Course and encourages physicians who perform or supervise the performance of fluoroscopic procedures to participate in this class session. This includes:

- All orthopedic surgeons performing fluoroscopy in the OR or hospital
- General surgeons and other surgeons
 performing fluoroscopy in the OR or hospital
- Cardiologists working in Cath labs
- ED physicians who operate mini-C arms or any form of fluoroscopic equipment
- Pain management physicians
- Any other physician who uses fluoroscopy

Each hospital Imaging department will continue to offer this one-hour hands-on class.

Memorial Hermann Health System is accredited by the Texas Medical Association to provide continuing medical education for physicians.

Memorial Hermann Health System designates this live activity for a maximum of *1 AMA PRA Category 1 Credit*[™]. Physicians should only claim credit commensurate with the extent of their participation in the activity.

To learn more about the new mandate or available courses, contact your Campus Imaging department director.

Contact Us

Email: cmesupport@memorialhermann.org Phone: 713.338.5101 or 713.338.5914

System Expands Orthopedic & Spine Network

In April 2015, Memorial Hermann acquired the Houston Orthopedic and Spine Hospital (HOSH) located in Bellaire, strengthening the System's orthopedic and spine services in the Greater Houston area.

Renamed Memorial Hermann Orthopedic & Spine Hospital, it becomes the System's 13th hospital and joins a wide-reaching network of orthopedic, spine and joint replacement facilities and services, including three Memorial Hermann IRONMAN Sports Medicine Institutes and seven Memorial Hermann Joint Centers. The Joint Center that previously operated out of Memorial Hermann-Texas Medical Center



Memorial Hermann Orthopedic and Spine Hospital located in Bellaire.

will move to Memorial Hermann Orthopedic & Spine Hospital.

"This acquisition underscores our dedication to our renowned orthopedic services," says Walter Lowe, M.D., medical director,, Memorial Hermann IRONMAN Sports Medicine Institute and chair of the department of Orthopaedic



Memorial Hermann Joint Centers

Seven Memorial Hermann Joint Centers around Houston have board-certified physicians treating hips and knees using evidence-based protocols and practices. To be considered a Center of Excellence Joint Program, the Joint Centers must have fully dedicated healthcare teams treating in

fully dedicated healthcare teams treating joint replacement patients.

"The Joint Centers are a result of a team of experts coming together to create a program that improves not only the outcomes of our patients but also the patient experience," says Wayne Fraleigh, Memorial Hermann Ambulatory Services COO. "Physicians who are part of the team must meet stringent standards to be considered a Joint Center physician, which includes meeting a minimum volume threshold as well as meeting the quality and outcomes criteria demonstrated through key metrics reviewed weekly at each Campus."

Joint Center patients are educated and undergo rehab together under team supervision on dedicated hospital floors. "Each Joint Center is a dedicated center that's only for joint replacement patients. All the nurses that are taking care of these patients are specifically trained for joint replacement," says Brian Chimenti, M.D., chairman of the department of Orthopedics at Memorial Hermann The Woodlands Hospital.

"There's a bit of camaraderie that develops and some friendly competition which I think is helpful," says Joint Center surgeon Lin Jones, M.D., orthopedic surgeon affiliated with Memorial Hermann Southwest Hospital. "The patient satisfaction scores have been astronomically good."

Before patients are discharged, members of the care team ensure patients receive written instructions from the surgeon, their medications are ordered and their appointments for physical therapy and follow-up are made. Joint Center physicians perform more than 2,500 hip and knee joint replacement procedures each year, more than are performed at any other hospital system in the Greater Houston area. Memorial Hermann Joint Centers are located at these Memorial Hermann hospitals: Memorial City, Northwest, Southwest, Texas Medical Center, The Woodlands, Katy and Sugar Land. To learn more, call 713.272.1888 or visit jointpain.memorialhermann.org.

Surgery at UTHealth Medical School. "We're fully committed to providing world-class, orthopedic and spine services to the communities we serve and investments like these are testaments to the future of orthopedic care in our region."

Memorial Hermann Orthopedic & Spine Hospital offers an extensive range of orthopedic specialties, such as inpatient and outpatient orthopedic and spine care, sports medicine, orthopedic and neurological spine surgery, as well as total joint replacement and pain management. Operating since 2006, the surgical hospital has 64 beds and 10 operating rooms, all of which will be licensed under Memorial Hermann-Texas Medical Center.

Children's Memorial Hermann Hospital First in Texas to Offer 3-D Laparoscopy for Kids with Urologic Conditions

Children's Memorial Hermann Hospital offers minimally invasive, 3-D flexible-tip laparoscopy, a virtually scar-less surgery for pediatric patients with urologic problems who are not candidates for robotic-assisted laparoscopy. According to Dung Pham, M.D., chief of pediatric urology at Children's Memorial Hermann Hospital and assistant professor in the division of Pediatric Urology at UTHealth Medical School, there are numerous benefits to the 3-D minimally invasive surgery, including: real-time, 3-D anatomical delineation; the magnification of organs and blood vessels; increased accuracy and precision; and quicker recovery times.

Because it uses tiny incisions, the 3-D laparoscopic surgery is virtually scar-less and can be less painful than a typical surgery. In addition, the 3-D imaging provides increased magnification with depth perception that is not possible with typical open surgery. Now, using 3-D flexible-tip laparoscopy, babies as young as two weeks can be treated, allowing issues discovered at birth to be handled almost immediately. Children's Memorial Hermann Hospital is also the only pediatric hospital in Houston to offer both 3-D roboticassisted and 3-D flexible-tip laparoscopic surgeries. **To learn more or refer a patient, contact 713.366.7800.**

A R O U N D T H E S Y S T E M

Life Flight: Trauma Center Houston Docudrama on the Lifetime Network



In March, Life Flight[®]: Trauma Center Houston aired on the Lifetime Network, providing viewers with a glimpse into the lives of the employees and affiliated physicians at Texas Trauma Institute at Memorial Hermann-Texas Medical Center who work relentlessly to save the lives of critically ill and injured patients. Four years in the making, the series attracted comments from viewers who were supportive of Memorial Hermann's mission. Media supported the series with stories by KHOU-Channel 11, Houston Chronicle, Yahoo News and TMC News. You can watch all six episodes of Life Flight: Trauma Center Houston online at mylifetime.com

System's Certified Zero Awards Catching On Around the Country

Memorial Hermann initiated the Certified Zero Award in 2011 to recognize hospitals going long periods of time without adverse events such as infections, falls, pressure ulcers and other results certified every month for the federal government. The results are used for value-based purchasing and other reimbursement mechanisms and they're audited by the federal government as part of the move to transparency of clinical performance and outcomes. The Joint Commission was so impressed with the concept of the Certified Zero Awards that the organization presented it to other hospitals. Other hospitals are now creating their own Certified Zero Award programs to document the absence of adverse events.

Sugar Land Wins State's Highest Quality Award

Memorial Hermann Sugar Land Hospital became the first hospital in the Houston area to receive the prestigious Texas Award for Performance Excellence (TAPE) from the Quality Texas Foundation. The award recognizes strong dedication to quality and high performance and brings the hospital one step closer on its journey to achieve the Malcolm



Baldrige National Quality Award. The Quality Texas Foundation, known as a national leader in its field, was chartered to recognize the best organizations in Texas. The group uses an extensive evaluation process that includes hundreds of hours spent through onsite visits to evaluate and score applicants in several criteria. Only three Texas hospitals have received it.

"Sugar Land should be seen as a bright, shining light and a role model for other health care facilities in the state and nation," says Mac McGuire, M.D., CEO of Quality Texas Foundation. "I hope patients, families, and employees truly understand the importance of this award and the required dedication to achieve it." The award will be presented at the Quality Texas Foundation annual conference June 22 at the Crown Plaza, in Addison, Texas.

"Since we created the certified Zero Award in April 2011, we have awarded 160 high-reliability awards for Memorial Hermann hospitals that have gone a year or longer without an adverse type of event," says Michael Shabot, M.D. "Eight of our hospitals have gone over 18 months without a high level safety event of any kind and received the System's Impact Award for Care Delivery at the 2014 System Annual Meeting. We're tickled that this is going nationwide."

SCI Patients Benefit from Unique Collaboration

TIRR Memorial Hermann and Memorial Hermann Southwest Hospital have created a unique collaboration to help spinal cord injury patients at TIRR Memorial Hermann with wounds on their seating surfaces. These wounds prevent them from fully participating in intensive therapy and activities of daily living. David Altamira, M.D., a plastic surgeon affiliated with Memorial Hermann Southwest, teamed up with a group of physicians affiliated with TIRR Memorial Hermann to provide restorative plastic surgery. The procedure involves using perforator flap technology for soft tissue reconstruction of sacral pressure ulcers. Thanks to the surgery, patients can accomplish their therapeutic goals. Dr. Altamira performs the surgical procedures at Memorial Hermann Southwest.

TIRR is a registered trademark of TIRR Foundation.

Hybrid OR Unveiled at Northeast

Memorial Hermann Northeast Hospital

unveiled a new hybrid OR that combines the capabilities of a cardiac catheterization lab and OR, giving surgeons the ability to perform endovascular procedures, minimally invasive or



traditional open surgery on the same patient at the same time in the same room. "The hybrid OR eliminates the need to move patients to another location in the hospital once a procedure has started," says Christopher Langan, M.D., regional CMO for Northeast and The Woodlands. Memorial Hermann Health System



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NEWSFLASH

Dr. Kevin Giglio Honored with System Physician Leadership Award

J. Kevin Giglio, M.D., was presented with the Memorial Hermann Physician Leadership Award at the System's 2015 Spring Leadership Meeting. Established in 2013, the award recognizes a Memorial Hermann-affiliated physician who demonstrates significant leadership responsibilities and actions in the advancement of the System Vision and Brand Promise of "We Advance Health."

Growing up in The Heights, Dr. Giglio played baseball for St. Thomas High School. He completed his medical degree at The University of Texas Health Science Center in San Antonio and a residency in family medicine at Memorial Hermann Southwest Hospital, before returning to The Heights to practice family medicine.

Affiliated with Memorial Hermann Northwest Hospital since 1990, Dr. Giglio was instrumental in bringing the Hospitalist Program to that Campus. A former chief of staff, Dr. Giglio serves as chief of the Family Medicine section in addition to being a member of the Medical Records and Performance Improvement committees.

An active MHMD executive board member and treasurer, he has served at the forefront of numerous System patient care and quality initiatives, including as chair of the PCP Clinical Programs Committee. His leadership and dedication have been instrumental in the success of the Memorial Hermann ACO and Advanced Primary Care Practices. Previous honorees include Charlotte Alexander, M.D., William Riley, M.D., and Ankur Doshi, M.D.



J. Kevin Giglio, M.D.