Care management redesign and appointment of medical directors

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Redesign of the UTMB Health Inpatient Case Management program began as a concerted effort to manage the assessment, planning, facilitation, care coordination, evaluation and advocacy for options and services to meet the comprehensive health needs of patients and their families through communication and available resources to promote quality cost-effective outcomes.

Jennifer Zirkle, RN, MSN, CCRN, NE-BC, director of patient care and assistant chief nursing officer, was appointed in November 2010 to the role of interim director of Care Management, and has led a team of nearly 25 individuals, including RN case managers, social workers, team leaders and support staff in developing and streamlining this collaborative process.

The Case Management Society of America defines care managers as “advocates who help patients understand their current health status, what they can do about it and why those treatments are important. In this way, care managers are catalysts by guiding patients and providing cohesion to other professionals in the health care delivery team, enabling their clients to achieve goals more effectively and efficiently.”

One of the first steps of the redesign was shifting the assignment of case managers from service-based to unit-based. Specific objectives of the redesign included a focused approach to discharge planning, an emphasis on metrics, decreasing Length of Stay (LOS), and improving capacity and flow management.

Guided by best practices and recommended guidelines, part of this effort focuses on the number of days a patient should typically remain on inpatient status according to specific procedure(s), always with the best interest of the patient in mind. Standardized, detailed documentation of the patient’s care are also emphasized, enabling the team to carefully evaluate the patient’s progress and make adjustments of the care plan, if necessary.

The team was presented the goal of decreasing the average LOS reduction by 0.5 days by the end of FY12, for a savings of $5.5M annually. They have already achieved a reduction of 0.3 days! A couple of initiatives that have directly contributed to the LOS reduction to-date include rounding twice per week along with careful monitoring of patient progress to prevent the likelihood of readmission.

The ultimate goal of Care Management is a safe, smooth and sustainable discharge. Educating the patient and their family about post-discharge care and ensuring they have the resources they need to ensure this recovery are of the utmost importance. Some examples of these resources include post-acute care, mobility aids, oxygen and other equipment.
The quality of the patient's recovery throughout the continuum of care is essential to preventing readmissions. As a result, it is necessary for the Care Management team to develop relationships within the community, identify various resources and foster partnerships to this end—an ongoing challenge. Care transition options are available locally to meet a patient’s needs. The Care Management team collaborates with the interdisciplinary team to match needs with services like long-term acute-care hospitals, inpatient rehabilitation, skilled nursing facilities and home health.

The team continues to work hard each and every day to enhance the process and find new and innovative solutions—they deserve a round of applause for their progress! The most recent milestone in this journey has been the appointment of two new Medical Directors of Care Management and Utilization Review, Drs. Marilyn Marx and Catalin Jurnalov. They will serve as physician peers, working in collaboration with Care Management and Health System Administration to coordinate between care providers and Care Management while assisting when necessary to promote consistent, high quality clinical care that is efficient in the use of resources.

**Dr. Catalin Jurnalov** is a Clinical Associate Professor of Obstetrics and Gynecology and a member of the Division of Gynecology and Urogynecology. Dr. Jurnalov joined the faculty in the Department of Obstetrics and Gynecology at UTMB in July of 2000. He has held numerous departmental and University positions. In 2009, Dr. Jurnalov completed his Certificate in Medical Management from the joint Baylor College of Medicine / Rice University program in the Jones School of Management and Executive Education.

**Dr. Marilyn Marx** is a General Surgeon board certified by the American Board of General Surgery and certified by the American Board of Quality Assurance and Utilization Review Physicians, Inc. (ABQAURP), with a subspecialty in Risk Management. She completed her general surgery residency at UTMB, furthering her education during her residency by receiving a Master of Medical Science Degree. Dr. Marx has practiced in Galveston County for over 20 years in both private and academic practice settings.

For more details on the new Directors of Care Management, please read the recent announcement from Steve Quach, MD, Chief Medical Officer.
Health System Executive Leadership: Rounds Abound!

UTMB Health System Executive Leadership visited several units throughout John Sealy Hospital on January 23. Leadership Rounds are an opportunity to engage in face-to-face communication with staff throughout the hospital, as well as a chance to share news and important Health System initiatives. Team members are encouraged to voice any concerns or issues they might have, whether positive or negative. Most importantly, it’s a chance for leadership to personally thank each staff member for the wonderful job they are doing at UTMB Health!

Donna Sollenberger, EVP & CEO, with Dr. George Carayannopoulos, director of the Heart Rhythm Center and assistant professor, Division of Cardiology

Mark Kirschbaum, chief quality & information officer, discussing the Patient Call Manager System with callers

David Marshall, chief nursing officer, sharing a Friday Focus Newsletter with Felicia Marcel, health unit coordinator, in family medicine

Dr. Steve Quach, chief medical officer, visited the Infection Control and Hospital Epidemiology team (left to right: Lisa Hinson, medical tech; Shirley Shores, director of Healthcare Epidemiology; Mischelle Rios, epidemiology technician; Dr. C. Glen Mayhill, professor & director, Infection Control and Hospital Epidemiology; and Dr. Quach)

Felicia Marcel, health unit coordinator; Donna Britton, NC 4; Marie Feliciano, NC 3; Fatima Fajardo, NC 4; Chelita Thomas, nurse manager; David Marshall, CNO; and Tam Pham, PCT 2 – Family Medicine / Cardiology
Three UTMB departments near top in survey of NIH grants

A survey of National Institutes of Health grant funding received by medical school departments in 2011 ranked three University of Texas Medical Branch at Galveston departments in the top 10 in their respective fields, and placed UTMB’s microbiology and immunology department sixth in the nation.

The report, produced by the Blue Ridge Institute for Medical Research, found that UTMB’s obstetrics and gynecology and pathology departments both came in eighth nationally in NIH awards in their respective categories. Two UTMB scientists received more total NIH funding in their areas than any other individual researcher in the nation: in microbiology, Galveston National Laboratory director James LeDuc; and in pathology, Dr. David Walker, principal investigator of the Western Regional Center of Excellence for Biodefense and Emerging Infectious Diseases.

Dr. Gary Hankins ranked 12th in NIH funding in obstetrics and gynecology. Seven other UTMB faculty members received grants that placed them in the top 50 of their respective disciplines for NIH awards.

Overall, the study ranks UTMB 53rd in NIH grant funding among medical schools, which totaled $11.7 billion last year.

“Congratulations to the departments and investigators on this remarkable feat. This is affirmation of the strength of our research program, and a credit to our productive faculty and their pioneering work,” said Dr. Donald Prough, interim vice president and dean of the UTMB School of Medicine.

The Blue Ridge Institute for Medical Research is a nonprofit organization that investigates basic biological science, clinical science and clinical care.

Dr. Mark Kirschbaum appointed to AHA appointment committee

Mark S. Kirschbaum, RN, PhD, UTMB’s chief quality, safety and clinical information officer, has been appointed to the Texas Hospital Association’s quality and patient safety committee.

The committee’s charge is to monitor, assess and develop policy recommendations regarding: initiatives related to quality of care, disease management and patient safety; quantifiable standards for clinical quality and outcomes; principles for the collection and reporting of data related to patient safety and quality of care; and public and private hospital data collection and reporting activities and programs.

Congratulations, Dr. Kirschbaum!

Congratulations, Dr. Joan Richardson and Dr. George Saade!

Congratulations to UTMB physicians, Drs. Joan Richardson and George Saade, who have been appointed to the newly created Health and Human Services Commission (HHSC) Medicaid Neonatal Intensive Care Unit Council. This HHSC advisory committee was one of three authorized by the 2011 Texas Legislature, and will advise the HHSC on standards for neonatal intensive care units and on the development of an accreditation process for a neonatal intensive care unit to receive Medicaid payments.

Dr. Richardson is an effective leader and renowned advocate for better newborn health care. She has made significant contributions to address the needs of both current and future patients. Dr. Richardson serves as Professor and Chair of the Department of Pediatrics. Among her many roles, she is Director of the Division of Neonatology and Medical Director of the Infant Special Care Unit and Newborn Nursery.

Dr. Saade is well respected in the Obstetrics and Gynecology community. He has been steadfast in his work to provide a better insight into preterm delivery, preeclampsia and other pregnancy complications. A noted maternal and fetal medicine expert, Dr. Saade serves as Editor in Chief of the American Journal of Perinatology. He is a Professor in the Department of Obstetrics and Gynecology and Chief of Obstetrics and Maternal-Fetal Medicine.
**What is ICD-10 PCS?**

ICD-10-PCS is the procedure classification system developed by the Centers for Medicare & Medicaid Services (CMS) for use in the U.S. for inpatient hospital settings only. The new procedure coding system uses seven alpha or numeric digits and each digit is either alpha or numeric (alpha digits are not case sensitive and letters 0 and 1 are not used to avoid confusion with numbers 0 and 1).

**Examples:**

- 0FB03ZX – Excision of liver, percutaneous approach, diagnostic; and
- 0DQ10ZZ – Repair upper esophagus, open approach.

**ICD-10 PCS Coding Tip - Medical Staff/Inpatient Coders:**

Certain procedures will require additional detailed documentation to ensure proper coding in the ICD-10 PCS (Procedure Classification System). One example is the procedure Thoracentesis.

Physician dictation will need to state laterality (right or left). In addition, it will also need to specify if the procedure was done in the pleura or pleural cavity.

There are no unspecified procedures codes in the ICD-10 PCS system. Therefore, if these two pieces of information are lacking, the procedure cannot be assigned an ICD-10 PCS code.

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**SHOUT OUTS!**

A patient admitted to J9C, contacted the Patient Services Department to express her thanks for the care and service provided to her during her inpatient admission. According to the patient, the staff on J9C, “made my stay feel like I was at the Ritz Carlton Hotel instead of the hospital.” She stated that she “felt like a queen” and was treated with care and respect by everyone. The patient stated that Dr. Patterson and his group were “extremely professional, attentive and informative” and added, “I owe them dearly!! I know I had the best care imaginable.” She said that each group of individuals she encountered was “professional, knowledgeable, efficient and compassionate.” The patient requested that the following individuals be recognized for their exceptional care and service: Dr. Joel Patterson, Barbara Robinson, RN; Becky Russell, RN; Darryl Perry, PCT; Jackie Saha, RN; William Jones, Catering Associate; Gloria Decker, Environmental Services. She asked that Patient Services ensure that these employees know how much she appreciates them and said, “UTMB is lucky to have them all.”

**“To the ISCU family: Seven years ago my world forever changed. Tristan was given a twenty percent chance that he would survive. Today he is a wonderful little boy filled with love. He is an absolute miracle! I want to say thank you for your time and the love that you put into each one of these babies. Without you and God I know that Tristan would not have made it. I am truly blessed to have had such caring people in my life for nine months. So today, and every day, remember that what you do means so much and that parents of these babies are so grateful for all you do. Tristan is in the first grade this year. He is one of the top students in his class. He is also very advanced in his reading skills. He is still on the small side but with me being only 4’11”. Thank you again for doing what you do! I will be forever grateful for all the time you gave to my little man! God bless each and every one of you!”**

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**Congratulations to Alison Glendenning, RN-BC on her recent certification in Nursing Case Management by the ANCC**

“Margarita Pinion (Environmental Services – ED), the housekeeper was the happiest person I have ever seen. She continued to come into my room to make sure that I was ok.”

**Other positive mentions:**

- 5C – Gyn/Onc
  - Jacqueline Stout
  - Crystal Marshall
- 6D – Pedi-ICU
  - Morgan
  - Carmen
- 8C – Surgery
  - Steven Carrio
- 5D – Medicine
  - Linda Chua
  - Myia Johnson
  - Rosa Perry
- 7A – Medicine/FMC
  - Dr. Sylvia Martinez
- 4P – Post Partum
  - Latha Joy
- 6C – Pedi
  - Judith Rowen
  - Monica Huff
  - Poojah Desai
  - Denise Turner
- 7C – Ortho/Trauma
  - Stephanie
  - Dr. Kelly Stephenson

There were many others mentions, but specific individuals could not be identified based on the information provided in the patients’ comments. Thank you all taking such excellent care of our patients!