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A Complimentary Publication

“Never Events” and Denied Payments Institute Change

Ever since the 1999 Institute of Medicine Report was published that publicized that 98,000 deaths per year were attributed to medical errors at an annual cost of \$29 billion, there has been a push to increase patient safety and decrease these staggering costs. In 2000, the CDC estimated that hospital acquired infections added nearly \$5 billion to hospital costs. In an effort to improve in-patient care in hospitals and help institute change, the Center for Medicare & Medicaid Services [CMS] has decided to deny payment for hospital acquired conditions [HAC] that are largely preventable.

In October 2008, CMS began denying payment for 10 conditions that it calls “never events”. A “never event” is defined as an occurrence that is largely preventable and can result in death, loss of a body part or cause serious disability.

If these conditions, or complications, are acquired while in an acute care hospital, the facility will not be reimbursed for the higher DRG [diagnosis related group] that would normally be billed as a result. This limit on payments only applies to the facility, not to physicians or other providers that may be providing care for the “never event” complication.

The 10 “never events” that will not be reimbursed include:

- ◆ object left in patient during surgery
- ◆ air embolism
- ◆ blood incompatibility
- ◆ catheter-associated urinary tract infection
- ◆ stage III or IV pressure ulcer
- ◆ vascular- catheter- associated infection
- ◆ surgical site infections after bariatric surgery, certain orthopedic surgery and mediastinitis [infected chest wound after coronary bypass surgery]
- ◆ hospital acquired injury due to external causes,

- ◆ such as falls resulting in fractures, dislocations, head injury and crushing injury or burns
- ◆ manifestations of poor blood sugar control, such as diabetic ketoacidosis [very high blood sugar] and hypoglycemic coma [very low blood sugar]
- ◆ deep vein thrombosis or pulmonary embolism associated with total knee or hip replacement procedures.

These events are just a start. CMS will be adding more “never events” in the future. Many insurance companies are following CMS’s lead and also denying payment for these events.

In order to limit these non-reimbursable complications, hospitals have instituted evidenced based practices and protocols, changed their policies and procedures, and educated nurses and physicians about ways to prevent these “never events”. This CMS regulation has only been in force since October 2008, so it’s effect on patient care practices and outcomes cannot yet be measured. *Source: www.cms.hhs.gov and www.ecri.org.*

Medical Record Retrieval

Are you wasting a lot of time trying to obtain medical records? Keais can take this tedious and time consuming task away from you allowing you and your staff to focus on the legal aspects of your cases.

Ordering the records is only half the battle. Do you have the time necessary to follow up? Keais orders your records from the custodian and has a follow-up process in place so that once you send your provider list and a HIPAA compliant medical records release, you can forget about the medical records.

You start by filling out a client profile to help communicate with you in a timely manner. Next you are assigned a case manager so you have one point of contact. Your case manager will provide you with frequent status updates. If you prefer they also have an easy to use online system, so with the click of a mouse you can see the date of the initial

request, dates and detailed call logs of conversations with records custodians and see the estimated date of delivery. You can also download your records 24/7.

If the records are downloaded, optical character recognition technology can be used to search text within the record and copy the text into your own documents. Keais also offers its client's access to online tracking and invoicing data for all transactions and retrieved records related to a particular client. This will save time when approving fees and reconciling fees with the law firms accounting system.

Keais checks every page of the record to ensure it is complete, legible and without margin cut offs. The records are then organized, indexed and bates stamped so that it is immediately usable. You can also specify how you want the records delivered- hard bound, CD, or online for downloading.

Another service that is offered by Keais is called a Physician Finder Report, a 5 year history of all prescription information, including the prescribing physician's name and address. Within 48 hours you can determine what usually take months to detect.

- ◆ Is the patient "physician hopping"?
- ◆ Identify pre-existing conditions
- ◆ Did the patient fill/not fill a prescription?
- ◆ Locate undisclosed treating physicians
- ◆ Prove or disprove drug ingestion

This report will also tell you what the medications are usually prescribed for and potential side effects. For more information go to www.keais.com or call 800-467-9181.

Drugs in the News...

Britain has removed **Darvocette, Darvon and it's generics** from their market several years ago due to accidental overdoses and suicides. The European Union has recently recommended removal from their market as well. Instead of following Europe's lead, the FDA has decided to add a black box warning to the labeling.

Propoxyphene, the generic version of these drugs, has been around for 50 years and is widely used even though doctors consider it a weak pain killer.

Public Citizen, a consumer watchdog group, petitioned the FDA in January 2009, saying the small benefit did not justify the risk of death, that amounts to several hundred patients a year. The FDA's scientific advisors narrowly agreed, but the FDA decided to only change the label at this time. *Source: news.yahoo.com.*

A black box warning has also been added for **Chantix and Zyban**, drugs used to aid in smoking cessation. These medications have been associated with serious neuropsychiatric problems. Symptoms exhibited include changes in behavior, hostility, agitation, depression, suicidality and suicide attempts. If patients develop these symptoms, they should be advised to stop taking the drugs immediately. You can find more information on this at the FDA Medwatch website @ www.fda.gov/medwatch.

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