



Updates!

e-Newsletter from Iatric Systems, Inc.

September, 2006

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1. Message from Senior Management

Making Mistakes

Joel Berman, President



Everybody makes mistakes. We all want to make as few as possible, but they happen. When a vendor makes a mistake (like we do sometimes) you find out how much integrity a company truly has. Did the vendor refuse to own up to the mistake and perhaps try to blame someone else? Or, did the vendor take responsibility for the mistake, roll up their company's sleeves and do what they could to fix the problem?

I tell everyone on my staff that when we make a mistake, it's an opportunity to shine. By that I mean, if we own up to our mistakes and work with the client (even if it's at our own expense) to resolve the problem in a fair way, the customer will respect us for it.

Over the past 16 years, we have made mistakes. Some of the more notable ones include deleting an inappropriate data file, copying an incorrect parameter into a live system and a couple of rogue NPR Reports. I am proud that we have been able to reduce the frequency of our mistakes by hiring quality employees and constantly improving our processes. However, I am more proud of the fact that when we make a mistake, our employees take ownership of the error and work hard to correct it.

So, what should vendors do when they make a mistake? Own up to it, fix it, and do the right thing. I hope you agree.

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2. Iatric v. Care Fusion – Parties Settle



JOINT PRESS RELEASE - Boxford, MASS (September 12, 2006)

The Plaintiffs, Iatric Systems, Inc. and Kenneth Hoffman, filed a multi-count Complaint in the U.S. District Court for the District of Massachusetts on August 25, 2006, bearing Civil Action No. 1:06-CV-11518, alleging federal copyright infringement against the Defendants, Care Fusion Incorporated, Vincent Swisher, Stephen Olmsted and Dennis Nolan. The Defendants have denied liability.

Following a hearing before Chief Judge William Young, and in advance of a trial on the merits scheduled for September 11, 2006, the parties have agreed to a settlement, which terms provide that:

- The Defendants are no longer permitted to sell or bring live the disputed software;
- The Defendants remove the disputed software from all existing sites and replace it with a non-MAGIC scripting solution within 60 days; and,
- Further, that the Defendants pay an undisclosed settlement sum.

Both sides have agreed that this release is the extent to which they are permitted to disclose the terms of their settlement.

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3. VFS Spotlight – ECHN Implements Online NICU Tri-Fold



Ah, the NICU tri-fold! How can it be effectively reproduced on the computer? [Eastern Connecticut Health Network \(ECHN\)](#), a not-for-profit health system consisting of two hospitals, a nursing home, two wellness centers and many other healthcare partners, found a way using VFS Suite.

Clinicians at ECHN were having trouble viewing online patient information and large amounts of NICU documentation clearly and concisely during rounds and during patient chart reviews. The organization needed a system that would enable users to view patient data and documentation efficiently, preferably in a way that mimicked their paper NICU tri-fold flowsheet.

The flexibility VFS Suite provides enabled ECHN to achieve their goals. “The ability to customize how we group patient data in VFS benefits practitioners during daily rounds, and it provides a complete clinical assessment tool that’s useful in making decisions about each patient’s plan of care,” reports Sue Kirch, RN at ECHN.

Sue and Carol Bucknavage, Clinical Systems Supervisor at ECHN, helped develop a computerized flowsheet using VFS Suite that is now used daily by all clinical staff on every baby in the NICU. Among other views, the NICU computerized flowsheet includes a summary view, a tab with information on feedings, a cardiovascular assessment tab, tabs that display labs together with all pertinent information, an online eMAR, and a Bilirubin graph. To view sample screenshots of ECHN’s NICU flowsheet, download a copy of [ECHN’s NICU Success Story](#).

In addition to providing a complete picture that assists clinicians in making patient care decisions, when doing chart review VFS also highlights areas that may be deficient in documentation. Carol indicated, “VFS has been received very favorably at ECHN, and use of VFS won’t end in the NICU.” Sue added, “I feel we have only scratched the surface of what the Iatric Systems flowsheet can do!”

To learn more, attend one of our upcoming VFS webcasts:

VFS Webcast Date	Day	Time	MAGIC or C/S
09/20/06	Wednesday	2:00pm Eastern	MAGIC
09/21/06	Thursday	2:00pm Eastern	C/S
09/26/06	Tuesday	2:00pm Eastern	C/S
10/04/06	Wednesday	2:00pm Eastern	MAGIC

To register, simply click the session date, and please be sure to include your **name, phone number and hospital name**. We’ll promptly send you registration confirmation and instructions on how to participate. Our webcasts are online, real-time interactive sessions you can attend from the comfort of your own office. They are open to any hospital operating the Meditech HCIS, and they are provided at no charge.

VFS Suite is available in [MAGIC](#) and [Client/Server](#) versions.

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4. Elk Regional Improves Revenue Cycle with IatriScan and VSB



When many health systems consider a scanning product for their organization, the benefits of converting piles of paper charts into images is frequently foremost in their plans. Hospitals consider this application of scanning technology as a primary source of reducing costs and improving clinical patient care.

Scanning technology can also be utilized, however, to improve the revenue cycle within organizations – by lowering AR days, getting bills out the door faster, and reducing costly back-end work required to obtain reimbursements.

Point in fact is [Elk Regional Health Center](#), a not-for-profit acute care institution and extended care facility that serves the health care needs of PA residents in and around Elk and Cameron Counties. The organization scans documents such as insurance cards, EOB's, physician orders, patient correspondence, ED documentation, etc., into their system via LSS and Meditech customer defined screens using [IatriScan](#). These documents are then able to be viewed instantly by the appropriate staff in the Health Information Management Department, the Revenue Management Cycle Department and Billing in order to help improve the revenue cycle.

The most recent revenue cycle enhancement Elk Regional implemented – using a combination of IatriScan and Visual SmartBoard (VSB) – has improved ER, Clinic and Outpatient coding turnaround times significantly. According to Beth Slaughenaupt, IT Specialist, and Mary Ann Schwabenbauer, CIO, coding for these areas lagged behind anywhere between 2 weeks to a month, resulting in high AR days for those patient account types. Using IatriScan to scan documents and VSB to manage the process, clinical documentation hand written by outpatient providers is scanned into the system quickly and easily. Abstracters then have immediate access to the information they need to code the accounts, and coding is now complete within 24-48 hours!

“We’ve experienced process improvements in clinical areas with IatriScan and VSB as well,” added Beth. IatriScan and VSB are being used at Elk Regional to accomplish a “Paperless Pharmacy” system between floors and the pharmacy, and to improve processes related to EKGs.

Congratulations to Elk Regional on their current revenue cycle improvements!

If you would like to learn more about the benefits IatriScan has to offer, or if you would like to learn more about VSB, please reply to this newsletter and we will have someone contact you.

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5. Medicare Payment Delay: Are You Ready for CR4349?



If your hospital looks forward to twice weekly Medicare Checks and EOB's- be aware that from September 22 to September 30, this expected form of reimbursement will not arrive. This loss of revenue affects not just hospitals but also physicians, and it is mandated by section 5203 of the Deficit Reduction Act of 2006, with no provision for interest payments due to the delays.

How will this affect your bottom line? Many hospitals' fiscal year start on October 1st, and this lack of payment can adversely impact end of year receipts. This CMS payment hold will not only influence your bank account balance but will also create additional work when the delayed payments arrive on October 2nd. If your Medicare patient population exceeds 25%, the delay may create serious consequences. Hopefully, senior management at your organization is already aware.

While this notification was issued on May 10, 2006, we were surprised at the number of hospitals that we polled at Regional MUSE that were unaware of the delay. Based upon our conversations with customers, it appeared that only 1 in 5 were aware of this CR Transmittal and had made an action plan to prepare for the event and loss of revenue. This particular payment transmittal notification can be viewed at:

<http://www.cms.hhs.gov/MLN MattersArticles/downloads/MM5047.pdf>.

CMS uses transmittals to communicate new information or changes in policies or procedures. Your facility can view all 2006 transmittals on the web at: <http://www.cms.hhs.gov/Transmittals/2006Trans/list.asp>. If your hospital does not currently have someone monitoring transmittals, you might consider including the review process in your

organization's Revenue Cycle Team responsibilities. In addition to important information such as the September 22-30 Medicare payment delay, the transmittals often provide advice about coding and billing changes that can directly impact how your hospital is reimbursed.

This article was contributed by Kay Jackson, who recently joined Iatric Systems in August. Kay's past experience encompasses Medical Claims Payment from the payor side (including various third party administrators and payors such as Aetna and Mutual of Omaha), as well as hospital claims submission, and Kay has experience in Patient Access, the Business Office and Case Management. She has applied her knowledge of payor payment delay and denial tactics to help numerous hospitals improve their revenue cycle, and has taught countless workshops and educational sessions on the topic since 1998. If you would like to contact Kay directly, you may reach her at KayJ@iatric.com.

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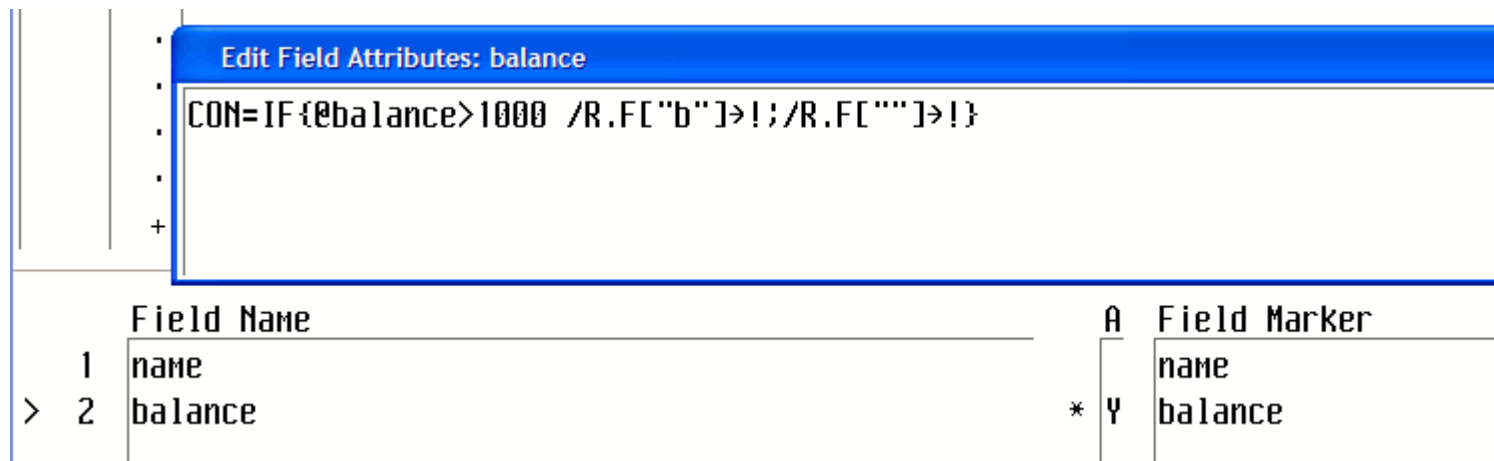
6. NPR Report Writing Tips

NPR Tip, Conditional Field Formatting with the CON attribute (Magic or C/S)

The CON= attribute is designed to be used to control printing of a field, if the expression is true, the field prints, if it is false the field does not print.

Another use for the attribute is to send formatting commands on a conditional basis:

Here we bold balances over \$1,000



The screenshot shows a software interface with a blue header bar that reads "Edit Field Attributes: balance". Below the header, a text box contains the following code: `CON= IF{@balance>1000 /R.FC["b"]>!;/R.FC[""]>!}`. Below the text box is a table with two columns: "Field Name" and "Field Marker". The table has two rows: the first row has "1" in the first column and "name" in the second; the second row has "> 2" in the first column and "balance" in the second. To the right of the table, there are two vertical columns: the first has "A" and the second has "Y".

	Field Name	A	Field Marker
1	name		name
> 2	balance	*	Y balance

```

RUN TIME: 1859                               Conditional Bolding
RUN USER: IATRIC
ZZGROVER,DOROTHY
ZZPHA,LMH ONC                               581.12
ZZTUFTS,PROF                               283.00
ZZPHA,LMH ONC                               14459.09
ZZHIGH,GERTRUDE                             16.00
ZZHIGH,GERTRUDE                             16.00
ZZHIGH,GERTRUDE                             16.00
ZZHIGH,GERTRUDE                             88.00
ZZHIGH,GERTRUDE                             16.00
ZZBLUE,CROSS                                65.00
ZZHIGH,GERTRUDE                             16.00
ZZHIGH,GERTRUDE                             16.00
ZZVAUGHAN,STEPHEN                           3385.00
ZZHIGH,GERTRUDE                             74.00
ZZLAB,FEMALE MWH                           664.00
ZZRAD,FEMALE LMH                             5125.00
ZZPCI,ERICA                                 56797.00
ZZPRORATE,TEST                             153.00
ZZLAB,FEMALE LMH                           298.00
ZZLAB,BABY GIRL                            513.00
ZZLAB,ELDERLY MALE                         942.00
-----

```

Use the same codes you would use with the FONT= attribute.

It is not too hard to use a LC= and two fields to accomplish the same thing, but if you want to bold certain entries of an /MV array, using the CON= technique is very handy.

In the MV array, flag the field you want to bold by storing a flag:

```

Enter/Edit Macro Logic: BAR.PAT.zcus.is.conditional.bolding.mv.M.detail (AA: )
@name>/MVC" T",CNT+1>CNT,1],
1>/MVC" T",CNT,"B"], ← Flag for name in
                        MV array
@addr1>/MVC" T",CNT+1>CNT,1],
@addr2>/MVC" T",CNT+1>CNT,1],
@city_", "_estate_" "_zip>/MVC" T",CNT+1>CNT,1]

```

Then test for the flag in the MV array field:

```

Edit Field Attributes: xx.mv
CON=IF{/MVC" T",R.MR,"B"] /R.FC"b">!;/R.FC"">!}
DAT=FREE
JFY=L
LEN=30

```

Bold if flag exists **Otherwise, normal font**

RUN DATE: 09/18/06
RUN TIME: 1920
RUN USER: IATRIC
ZZGROVER, DOROTHY
585 LEBANON STREET
MELROSE, MA 02176

B/AR *TEST*
Conditional Bolding

ZZPHA, LMH ONC
170 GOVERNORS AVE
MEDFORD, MA 02155

ZZTUFTS, PROF
10 ELM STREET
MALDEN, MA 02415

The code for Client Server is identical, except that the /MV should be replaced with /R.MV.

You can find additional NPR Tips on our website at <http://www.iatric.com/information/npr-tips.asp>, as well as information about our [on-site NPR Report Writer Training](#) and [NPR Report Writing Services](#).

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7. Newsletter Sign-Up/Contacting Us

[Sign up for our Updates! newsletter](#), or do so by visiting the lower right section of our website's [homepage](#).

You may also request to discontinue receiving our newsletter by sending an e-mail at info@iatric.com.

If you've received this newsletter via e-mail, you may give us feedback by simply replying to the e-mail. However, if you would like to reach someone directly, please feel free to contact one of the individuals listed below.

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