

Thank you for joining “MO HealthNet Webinar”

The presentation will start shortly.

Dial: 888-822-3280

Participant code: 0832293#

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Please do not put your phone on “Hold.”
While on “Hold” other participants will
hear your background music/message

Hospital Inpatient Certification and Concurrent Review

Missouri Hospital Association

October 20, 2009

George L. Oestreich, PharmD, MPA

Deputy Division Director, Clinical Services



Single Certification Form



Head Office Box 105110
Jefferson City, Missouri 64119-5110
Phone: (800) 766-0686
Fax: (573) 634-4262



Care and Quality
Solutions

MO HealthNet Utilization Review (UR) Program Inpatient Certification Request Form

Date ____/____/____ (mm/dd/yyyy)

- Prospective (Pre-admission): Date of scheduled admission ____/____/____
Date of scheduled surgery ____/____/____
 - Admission (Initial request prior to discharge): Date of admission ____/____/____
 - Retrospective (Post Discharge): Date of admission ____/____/____ Date of discharge ____/____/____
 - Participant with exhausted Part A Medicare: Date of Part A exhaustion ____/____/____
- For the following options (choose all applicable options), please provide the certification #: [____/____/____]
- Change in dates on a previous Certification (provide correct dates): ____/____/____ through ____/____/____
 - Concurrent (Continued Stay) – discharged or still inpatient and requires additional days added to certification
 - Request for Reconsideration – certification denied and still inpatient
 - Request for Reconsideration – certification denied and already discharged

Requestor's name: _____
Requestor's phone number/extension: (____) _____ Fax #: (____) _____
Participant name: _____ D.O.B. ____/____/____
MO HealthNet ID # (DCN): [____/____/____] If DCN is unknown, provide SSN: [____] - [____] - [____]
Facility: _____ Facility NPI number [____/____/____]
Attending Physician: _____ Physician NPI number [____/____/____]

Requested number of days: _____ Requested date range: from ____/____/____ through ____/____/____
Anticipated discharge date: ____/____/____ Anticipated discharge plan: _____
Primary Diagnosis: _____ Diagnosis code: _____
Admitting Diagnosis: _____ Diagnosis code: _____

Please attach a face sheet for additional demographic info, and supporting notes and/or medical record documentation. Fax to ACS at (573)634-4262.

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December 09

<http://dss.mo.gov/mhd/cs/index.htm>

ACS
P.O. Box 105110
Jefferson City, MO
65110-5110

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Current Tools for Clinical Use

- Smart PA
- Decision Support Tools
 - CyberFormance
 - Paid Claim Tool
- CyberAccess
- Care Connection

CyberAccess™

● Current Features

- Patient demographics
- Electronic Health Record
 - Record of all participant prescriptions
 - All procedures codes
 - All diagnosis codes
- E prescribing
- Preferred Drug List support
 - Access to preferred medication list
 - Precertification of medications via clinical algorithms
 - Implementation of step therapy
 - Prior authorization of medications)
- Medication possession ratio
- DirectCare Pro

CyberAccess™ (current, con't)

- General Medical Uses
 - Integrated call center support
 - Availability of laboratory values (and references)
 - Precertification of imaging
 - Precertification of durable medical equipment (DME)

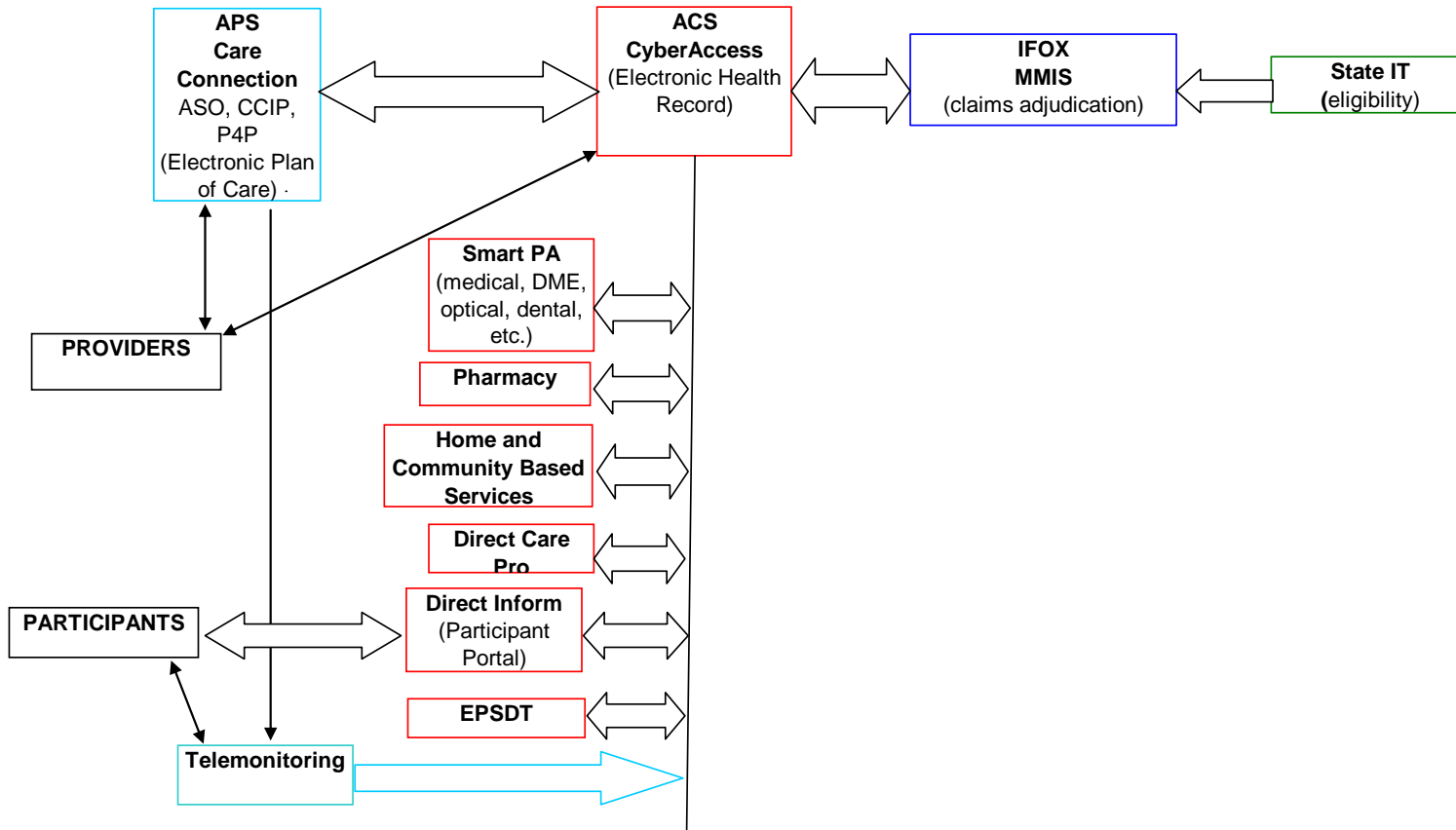
CyberAccess™ (con't, future)

- Near Term Additions (SF 2009)
 - Determination of level of care and precertification of home and community based services
 - Electronic capture and storage of EPSDT forms
 - Precertification of optical (as covered)
 - Patient level editing
 - Electronic medical record lite (EMR)
 - Patient case management tools
 - Risk assessment
 - Stratification
 - Gaps in therapy
 - Episodes of care
 - Concurrent case management
 - Eligibility determination reporting
 - Incorporation of diabetic patient care management information

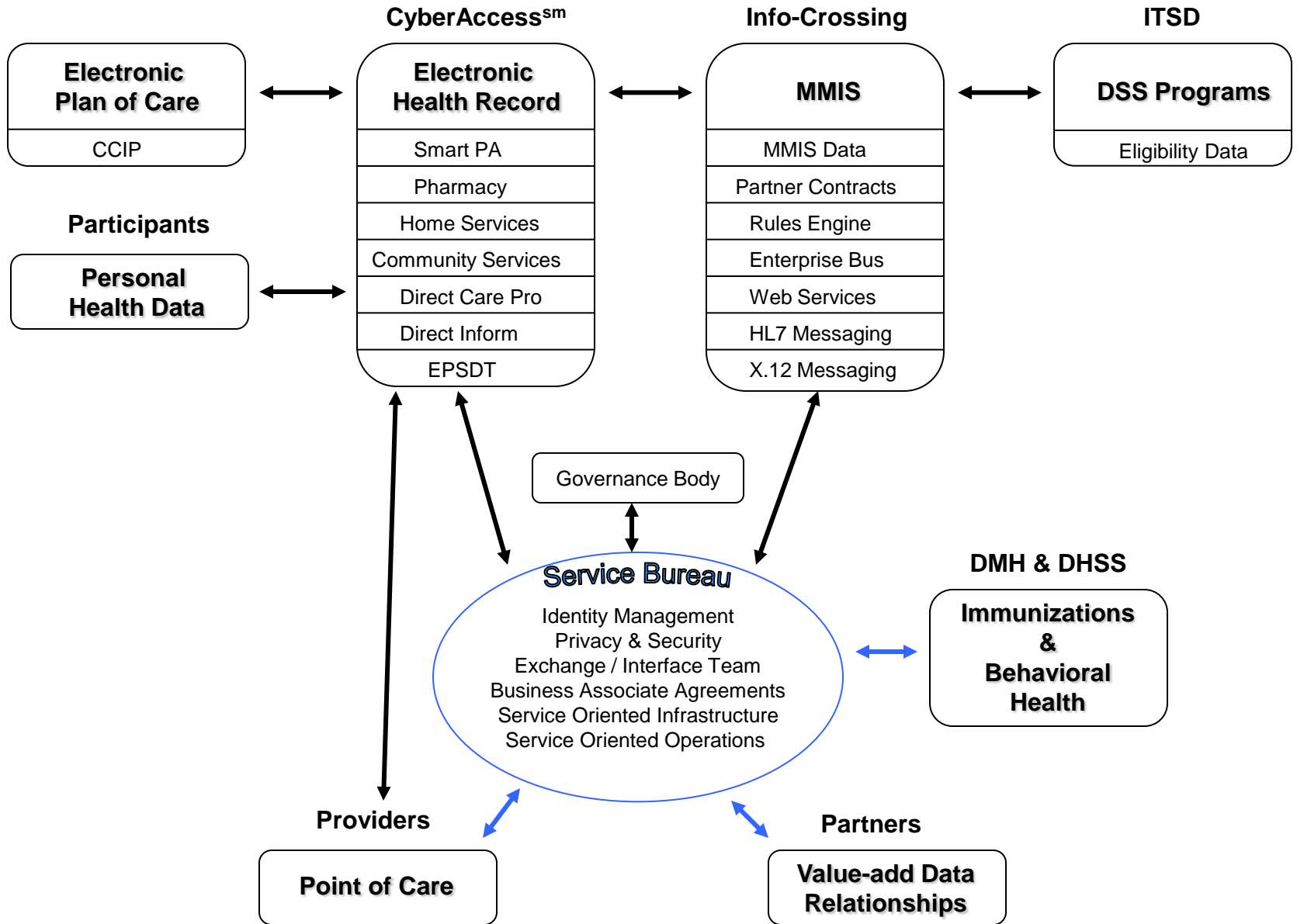
CyberAccess™ (con't, 2nd quarter 2009 and beyond)

- Later term additions
 - Interoperability with other services (EMRs, hospital records)
 - “Plug-ins” for EMR
 - Scheduling
 - Billing
 - Integrated billing for service
 - Integration of discharge summary and medication reconciliation
 - Integration of home monitoring data/information
 - Integration of immunization registry

Today's HIT, How it Fits Together



Missouri – Statewide Health Information Exchange



– Overview of Differentiators

- Clinical Accreditations and QIO Designation
- CyberAccess Gateway as a Provider Portal
- Technology combined with Clinical Expertise
- Coordinated Care
- Transparency through Online Reporting Application

ACS Health Management Snapshot

Service Base

- Provide care management services to over 5,000,000 people
- Evidence Based Medicine Benchmark Data 55,000,000 people



National Accreditation – *Nationally, we are 1 of 2 Companies who are:*

- **Official Quality, Peer & Independent Review Organization** (Medicare certified Quality Improvement Organization “Like Status”)
- **Four (4) URAC Accreditations:** Case, disease, group health and workers’ compensation utilization management.



High Professional Standards

- Physicians – 30 physician advisors representing 20 board certifications; 6 FT Physicians. Medical and Psych; 157 specialties as consultants
- Nurses – Certified Case Managers and/or Certified Chronic Health Professionals; over 200
- Analysts, Actuaries and Engineers
- Pharmacists: over 100



Inpatient Certification

Major Implementation Milestones

<u>Milestone</u>	<u>Go Live</u>
<ul style="list-style-type: none"> • Phase I <ul style="list-style-type: none"> • Development and deployment of ICMS Lite 12/1/2009 • Manual prior approval determination functions12/28/2009 	
<ul style="list-style-type: none"> • Phase II2/10/2010 <ul style="list-style-type: none"> • MO ICMS stand-alone deployment 	
<ul style="list-style-type: none"> • Phase III3/20/2010 <ul style="list-style-type: none"> • ICMS/SmartPA/SmartMedPA integrated 	
<ul style="list-style-type: none"> • Phase IV3/31/2010 <ul style="list-style-type: none"> • Discharge Summary/Medication Reconciliation Deployment 	
<ul style="list-style-type: none"> • Phase V5/31/2010 <ul style="list-style-type: none"> • Concurrent Utilization Review 	

Inpatient Certification

Nurses review for medical necessity of services according to nationally-accepted Milliman Care Guidelines:

- Precertification - Preadmission certifications
- Concurrent review - Continued stay certification
- Retrospective review – Post-discharge certification

Hospitalization

[Return to top of Heart Failure - ISC](#)

Optimal Recovery Course

[Return to top of Heart Failure - ISC](#)

Day	Level of Care	Clinical Status	Activity	Routes	Interventions	Medications
1	<ul style="list-style-type: none"> • ICU[F] or intermediate care[F] after emergency treatment • Discharge planning [G] 	<ul style="list-style-type: none"> • Clinical Indications met [H] • Tachypnea, edema, and weakness • Possible hypoxia and hypertension 	<ul style="list-style-type: none"> • Initial bed rest 	<ul style="list-style-type: none"> • Parenteral medications • Oral hydration • Low-salt diet • Possible fluid restriction 	<ul style="list-style-type: none"> • Involve care management team • ECG, CXR, ABG • Cardiac biomarkers, BNP[I] • Evaluation for other severe complicating illnesses[D] • Possible pulmonary artery catheter[L] • Oxygen[M] 	<ul style="list-style-type: none"> • Intravenous diuretics [O] • ACE inhibitor or ARB OM[P] • Probable beta-blocker • Possible nitrates, digoxin, hydralazine, morphine sulfate • Possible aldosterone antagonist • Possible nesiritide

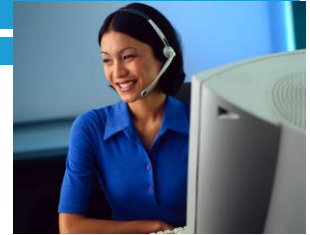
Dx Select Diagnosis for SHERI LYNN HEADROOM - CaseID 235125

The following Diagnoses have been selected for this Case:

Primary	Dx Code	Dx Description	Benchmark Origin	Protected	HC	RedFlag
☒	410.10	Acute Myocardial Infarction of Other Anterior Wall, Episode	3		☒	
	427.1	Paroxysmal Ventricular Tachycardia	1			
	786.50	Unspecified Chest Pain	A/1			

041.NYSEIU

Inpatient Certification Goal–Oriented Interventions



- Inpatient days – admission, continued stay, discharge
- Negotiate level of care – ICU, med/surg, rehab, LTAC
- Discuss alternative levels of care – SNF, home care, behavioral health alternatives
- Coordinate and refer for post-discharge services
- Screen and refer into other interventional programs - Case Management and/or Condition Management

CyberAccess – Medical Pre-Certifications Requested

Cyber Access - Pre Certifications - Microsoft Internet Explorer provided by ACS Heritage

Address: https://www.cyberaccessonline.net/CyberAccessTest/PreCertifications.aspx

Logout

Cyber Access

Home > Medical History > Pre Certifications

Patient Info For - Doe, Kathryn A

Print Patient Profile | Check Drug/e-Prescribe Drug | Pre-Certify Service

Home | Patient Info | Drug History | Medical History | Interventions

Procedures | Diagnoses | Pre Certifications

Dr. Super User Practice

Pre-Certifications

Shows the patients pre certifications on file.

Pre Cert #	PA Type	Requesting Provider	Servicing Provider	Modifier	Procedure	Status	Start Date	End Date	Approved Units	Used Units
20081300000514	Imaging CT-Head or Brain				70450	Approved	05/09/2008	05/22/2008	1	0
				26	70450	Approved	05/09/2008	05/22/2008	1	0
				TC	70450	Approved	05/09/2008	05/22/2008	1	0
20080590000323	DME Hospital Bed - Semi-Electric	STRELZOW, VICTOR V MD	BARNES-JEWISH ST PETERS HOSP	RR	E0261	Approved	02/28/2008	08/25/2008	6	0
20080300002823	DME Small Volume Nebulizer		name not available		TBD	Pending	01/30/2008	01/30/2008	1	0
20080150001323	DME Hospital Bed - Semi-Electric	STRELZOW, VICTOR V MD	name not available		TBD	Pending	01/15/2008	01/15/2008	1	0
20080150001114	Imaging MRI-Chest	STRELZOW, VICTOR V MD			71551	Approved	01/15/2008	01/28/2008	1	0
				26	71551	Approved	01/15/2008	01/28/2008	1	0
				TC	71551	Approved	01/15/2008	01/28/2008	1	0
20073600000223	DME Hospital Bed - Manual		name not available		TBD	Pending	12/26/2007	12/26/2007	1	0
20073190000320		WAL-MART PHARMACY 10-156			0116T	Approved	11/14/2007	11/14/2007	1	0
					0117T	Approved	11/14/2007	11/14/2007	1	0
20073190000220		WAL-MART PHARMACY 10-156			0116T	Approved	11/14/2007	11/14/2007	1	0
					0117T	Approved	11/14/2007	11/14/2007	1	0
20073100001014	Imaging MRI-Chest	STRELZOW, VICTOR V MD			71550	Approved	11/06/2007	11/19/2007	1	0
				26	71550	Approved	11/06/2007	11/19/2007	1	0
				TC	71550	Approved	11/06/2007	11/19/2007	1	0
20073100000914	Imaging CT-Chest				71260	Voided	11/06/2007	11/06/2007	1	0
				26	71260	Voided	11/06/2007	11/06/2007	1	0
				TC	71260	Voided	11/06/2007	11/06/2007	1	0
20072530000214	Imaging CT-Chest	SMITH MD, SALLY J.			71250	Approved	09/10/2007	09/23/2007	1	0
				26	71250	Approved	09/10/2007	09/23/2007	1	0
				TC	71250	Approved	09/10/2007	09/23/2007	1	0
20072400000720		WAL-MART PHARMACY			0115T	Approved	08/27/2007	08/27/2007	1	0

https://www.cyberaccessonline.net/CyberAccessTest/PreCertifications.aspx

Discussion

- Questions

Thank you

George.L.Oestreich@dss.mo.gov

573.751.6961

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Attending Physician: _____ Physician NPI number [____][____][____][____][____][____]
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