Nebraska Hospital Association

The influential voice of Nebraska's hospitals

Increasing our influence

2012 member value report

LETTER from the PRESIDENT

Dear members and colleagues,

During the past year, Nebraska's hospitals began the process of implementing a comprehensive delivery system transformation that has been unleashed with the historic passage of health care reform legislation. From establishing ACOs to investing in quality improvement activities, hospitals want what is best for their communities and are committed to begin the process of aligning themselves to improve care.

The Nebraska Hospital Association also focused on health care reform implementation, health information technology, quality improvement initiatives, provider reimbursement solutions, federal deficit reduction proposals and the increased utilization of cost-containment strategies.

The NHA's advocacy and policy development teams have been actively engaged in educating members about the laws enacted, as well as weighing in on proposed rules and regulations at the state and federal levels.

As hospitals focus on continued changes in Medicaid, adjust to lower Medicare reimbursement and fight even more cuts discussed in the federal deficit reduction debate, a strong, unified voice is essential. **The NHA is the only association that represents the collective interests of Nebraska hospitals.** The strength of our numbers means that lawmakers and regulators listen when we speak. This annual report provides highlights of the 2012 fiscal year activities.

The NHA has been influential in advocating for fair payment and access to care. In the last legislative session, the NHA successfully restored 1.5 percent to Medicaid rates, as well as access to prenatal care for all women. Despite Gov. Heineman's veto of enabling legislation, Nebraska state senators were ultimately convinced to override the veto and expand access to essential prenatal care. The NHA also influenced lawmakers to protect health care workers, establishing a law that makes assaulting a health care worker a felony.

On the federal level, the NHA assisted its members in meeting the requirements of meaningful use; in providing hospitals with useful marketing and resource data; and in establishing quality measure to ensure a higher standard of care. The NHA also worked closely with the AHA to limit unnecessary and duplicative administrative burdens.

The NHA Foundation continued to provide quality educational programs, webinars, e-learning courses, leadership development and scholastic financial aid to meet the educational needs of members and others who share the Association's mission, vision and values.

Just as hospitals will adapt to changes in the delivery and payment system, the NHA will continue to provide value to our membership. We are advancing and embracing new ways to help you weather the challenges ahead. Your involvement is essential in maintaining a strong, effective Association.

Thank you for your continued membership. The NHA strives to make the most of your membership investment, and we hope that you will become even more involved with the NHA during 2013. I am always available to address any questions or comments you may have.

Sincerely,

Laura

Laura J. Redoutey, FACHE
NHA President

STRATEGIC FRAMEWORK

The Nebraska Hospital Association has been the guiding force of its members since 1927. The NHA serves as the influential voice of its members in the health care legislative and public policy arenas, promoting delivery of quality health care and influencing public opinion of hospitals and health networks. Members depend on the NHA for information, advice, education and changes in health care regulations, legislation, trends and other issues.

To accomplish its mission and serve its members, the NHA has developed a strategic framework that consists of four pillars: advocacy & policy, financial stewardship, strategic partnerships and quality & safety.

To uphold these pillars, the NHA builds on a secure, values-based foundation comprised of knowledge, communication and member engagement.

Everything the NHA does is designed to assist our members in their quest to provide quality care to Nebraska's patients, families and communities.

MISSION

The Nebraska Hospital Association is the unified voice for Nebraska's hospitals and health systems. NHA will provide collaborative leadership, assisting its members to provide comprehensive care to their communities, improving the health status of those communities.

VISION

The Nebraska Hospital Association is the influential voice of Nebraska's hospitals and health systems. By 2015, we will:

- Increase our influence with key leaders in our state.
- Deliver expertise to our members on cost reduction strategies.
- Be at the table with the State of Nebraska to create the Medicaid solution.

VALUES

The foundation for achieving results are our values of knowledge, Communication and Member Engagement.

LIVING the MISSION

Nebraska hospitals do much more than care for the sick and injured. Safe havens in times of pain, trouble and hardship, hospitals are always there when needed—for emergencies, lifesaving and life-enhancing education and treatments, welcoming new lives into the world and helping patients and families at the end of life. Nebraska's hospitals contribute to the quality of life and health, going well beyond the walls of the hospital. This is evident in the nearly $843 million in community benefits reported in the *2011 Nebraska Hospitals Community Benefits Report* from the 67% of member hospitals completing the benefits survey. With 100% survey participation, the community benefit of Nebraska's hospitals is estimated to reach $1 billion.

It is the mission of the Nebraska Hospital Association to be the unified and influential voice for Nebraska's hospitals and health systems. The NHA supports and encourages its members in developing various health care delivery systems geared toward improving the health and well-being of Nebraska's communities.

The NHA is governed by a 17-member board of directors and works closely with its membership to provide them with state and federal legislative advocacy, health care trend and regulatory information, educational programming, communication, data reports and special services.

Members rely on the NHA for information, education, advice and collaborative leadership to advance Nebraska hospitals' ability to provide exceptional health care.

Hospitals are the stewards of good health. Through our partnerships with representatives in the health care industry, legislators, government and citizens, NHA is able to assist in the development of strong, healthy communities.

This report is a compilation of the accomplishments of the past 12 months as led by the efforts of the Nebraska Hospital Association to achieve its mission of being the influential voice of Nebraska's hospitals.

BEYOND the NUMBERS

In 2012, the Nebraska Hospital Association represented 89 community hospitals and health systems in Nebraska, serving 76 communities throughout the state.

- **64** Critical Access Hospitals (CAHs)
- **8** rural hospitals
- **15** urban hospitals
- **2** long-term acute care hospitals*
- **1** rehabilitation hospital*

**One hospital has both a rehabilitation and long-term acute care license.*

The contribution of Nebraska hospitals to their communities extends far beyond their role as cornerstones of health care. They are economic engines, providing stability and growth in the state—even when the economic recession is affecting their own financial stability.

$843+ million in community benefits

42,000 employees

29,000 additional jobs

$3.4 billion total labor income

$8.5 billion total output in Nebraska's economy

INFLUENTIAL VOICE of NEBRASKA'S HOSPITALS

The 2012 legislative **session proved to be very successful** for Nebraska's hospitals due to the NHA's coordination of the **efforts of numerous hospital representatives, collaborative partners and many "champions"** in the Unicameral. Of the 467 legislative bills introduced, 89 of them were "of interest" to the NHA's members. The NHA supported 21, opposed eight, monitored 54 and testified in a neutral capacity on six bills. NHA members and staff testified 31 times before seven of the 14 standing committees. When the Legislature adjourned, **30 of those bills of interest had been signed into law.** In addition, 120 legislative interim study resolutions were introduced with 19 identified as "of interest" to the NHA.

Some of the more notable bills signed into law include:

- **LB 40** clarifies a sales and use tax exemption for non-profit health clinics owned by non-profit.
- **LB 541** requires the DHHS to contract with one or more recovery audit contractors to promote the integrity of Medicaid.
- **LB 599** mandates that the DHHS provide prenatal services under the targeted low-income child health option of the CHIP.
- **LB 677** increases penalties for assaulting a health care provider while engages in the performance of his or her official duties.
- **LB 968** restores 1.5 percent of 2.5 percent Medicaid provider rate cut imposed in 2011 and prohibited other drastic Medicaid changes proposed by DHHS.
- **LB 788** allows nurse practitioners and physician assistants to order respiratory services.
- **LB 825** requires DHHS to provide "storefronts" for ACCESS Nebraska, staffed by caseworkers, to assist in filing applications for public assistance benefits.
- **LB 831** requires licensure of genetic counselors.
- **LB 834** revises the Regulation of Health Professions Act that governs reviews of a health profession's proposal for licensure or expansions of scopes of practice.
- **LB 871** requires each regional behavioral health authority to adopt a policy for determining the financial eligibility of all consumers to pay fees and copays.
- **LB 970** phases in an estimated tax cut of $95 million over three years.
- **LB 995** produces many needed updates to statutes pertaining to county hospitals.
- **LB 1042** permits nurse practitioners to pronounce death and to complete and sign death certificates.
- **LB 1063** clarifies the meaning of "medically necessary" for purposes of Medicaid for children less than 19 years of age.
- **LB 1077** requires hospitals, intermediate care facilities, nursing facilities and skilled nursing facilities to offer on site vaccinations for influenza and pneumococcal disease to all residents and to all patients prior to discharge.
- **LB 1097** provides a sales and use tax exemption for purchases by nonprofit mental health centers.
- **LB 1158** creates a framework to be utilized by DHHS in negotiating future at-risk Medicaid managed care contracts that deliver behavioral health services.

The substance of some legislation that was not signed into law, coupled with the subject matter of interim studies that may become legislative proposals in 2013 include, but are not limited to, the following:

- Essential health benefits
- Insurance exchanges
- Medicaid expansion
- Medicaid provider rates
- Elimination of inheritance and individual income taxes
- Increase tax on cigarettes and tobacco products
- Freedom of conscience
- Certification of cardiovascular techs
- Require use of certified surgical techs
- Implementation of ACA
- Health Care Cash Fund
- Payment for EPC services
- LTC bed moratorium
- Workers' compensation treatment guidelines
- Truth in advertising and credentials
- Require safe injection practices
- All payer claims database
- Obesity prevention
- Electronic prescriptions
- Pulse oximetry

Throughout this summer and fall, the NHA's advocacy and policy initiatives continued to gain momentum as more members became involved in the policy development process; including greater participation on the NHA's Policy Development Committee, the NHA PAC and through more member-to-policymaker meetings and conversations. The NHA's success in the last legislative session served as a great catalyst for more member participation this year and in 2013. The NHA continues to channel as much member energy toward its advocacy agenda as possible in order to be successful again in the upcoming legislative session.

INFLUENTIAL VOICE of NEBRASKA'S HOSPITALS

As one legislative session ended, the efforts to prepare for the next immediately began. During the summer months, the NHA surveyed its members about state and federal priorities. As determined by our members, the NHA's federal priorities include: physician payment, supervision of outpatient therapeutic services, federal budget, deficit reduction, reimbursement, rural health, drug shortages, bundled payments, information technology and clinical integration. At the state level, the NHA's priorities are: redesigning the state's health care delivery system, strengthening Medicaid and ensuring responsible implementation of statewide managed care, forming a state-based health insurance exchange and workforce development.

Since the legislature adjourned, the NHA has been actively involved in matters related to legislative interim studies. Most of the focus has been aimed at implementation of health care reform and its impact on the state. Insurance exchanges, essential health benefits, qualified health plans, Medicaid expansion, the long-term sustainability for Nebraska's Health Care Cash Fund, ACCESS Nebraska and workers' compensation utilization review have been the subjects in numerous legislative and stakeholder meetings and will continue to be issues of major interest for the 2013 Legislature.

NHA PAC

In only its third year, the NHA Political Action Committee (NHA PAC) continues to be a success, making a significant impact in the 2012 legislative races. For 2012, the NHA PAC Steering Committee increased its annual fundraising goal by more than $10,000. To date, nearly 90 percent of the new goal of $51,250 has been raised from more contributors than in the years past. During this election cycle, the **NHA PAC has contributed nearly $40,000 to 15 legislative candidates and has sent more than $17,000 to the AHAPAC** to be used in support of champions of health care at the federal level.

Rural Floor Budget Neutrality Adjustment Appeal

For several years, the Centers for Medicare and Medicaid Services (CMS) incorrectly calculated the rural floor budget neutrality adjustment (RFBNA), which resulted in reduced IPPS payments for hospitals around the country. The issue was discovered in 2006. In 2007, the NHA, along with five member hospitals, engaged in an appeal effort with a national consultant, Baker Healthcare Consulting. In April 2012, CMS entered into a settlement agreement to resolve the issue, which **resulted in approximately $7.2 million being received** by the Nebraska hospitals that participated in the appeal.

Five NHA member hospitals participated in the appeal effort:

- Bryan Health, Lincoln
- Faith Regional Health Services, Norfolk
- Fremont Area Medical Center, Fremont
- Great Plains Regional Medical Center, North Platte
- Mary Lanning Healthcare, Hastings

> *"Bryan Health is grateful for NHA's work in appealing the Rural Floor Budget Neutrality Adjustment, which had resulted in reduced IPPS payments to Nebraska hospitals. The NHA's persistence over five years in organizing this effort and bringing in the appropriate expertise resulted in several million dollars back to Bryan Health that can be used to further our Mission."*
>
> Russ Gronewold, Vice President, Finance
> Bryan Health, Lincoln

Federal Regulations

On behalf of the membership, the NHA has submitted comment letters to federal agencies including CMS and the Internal Revenue Service (IRS) regarding proposed rules including the:

- Inpatient Prospective Payment System (IPPS) proposed rule for fiscal year FY 2013.
- Outpatient Prospective Payment System (OPPS) proposed rule for FY 2013.
- Additional requirements for charitable hospitals as mandated by the Patient Protection and Affordable Care Act (ACA) (section 501(r) requirements).

INFLUENTIAL VOICE of NEBRASKA'S HOSPITALS

Federal Advocacy

NHA staff has provided member hospitals with summaries and analyses regarding the impact of various federal legislation and regulations including the Middle Class Tax Relief and Job Creation Act of 2012, the president's proposed budget for fiscal year 2013 and CMS' proposed rule for the FY 2013 Inpatient Prospective Payment System. The NHA communicates with Nebraska's congressional delegation regularly regarding health care provisions being considered and how they would impact the hospitals in Nebraska.

The NHA is engaged with a coalition of other state hospital associations that is attempting to resolve a manipulation of the wage index in Massachusetts that has resulted in hospitals in that state receiving significant increases in Medicare reimbursement at the expense of hospitals across the country, including Nebraska. The coalition has communicated with the president, CMS and Congress in an attempt to resolve the situation.

In May 2012, the **NHA and 13 member hospitals conducted congressional visits** in conjunction with the AHA Annual Meeting in Washington D.C. Key messages that were discussed include the uncertainty related to the ACA, provisions being considered as part of reducing the federal deficit, efforts underway in Nebraska to improve the value of care being provided to patients and specific legislative bills.

In July 2012, the NHA held a webinar to provide members with important information related to the U.S. Supreme Court's ruling in regard to the constitutionality of the ACA. Webinar speakers included Kelly Clarke from Baird Holm LLP Attorneys at Law, Sen. Mike Johanns and Jay Angoff from the U.S. Department of Health & Human Services. Eighty-one members, with a total of 291 individuals, participated in the webinar.

Guest speakers at NHA board meetings in 2012:

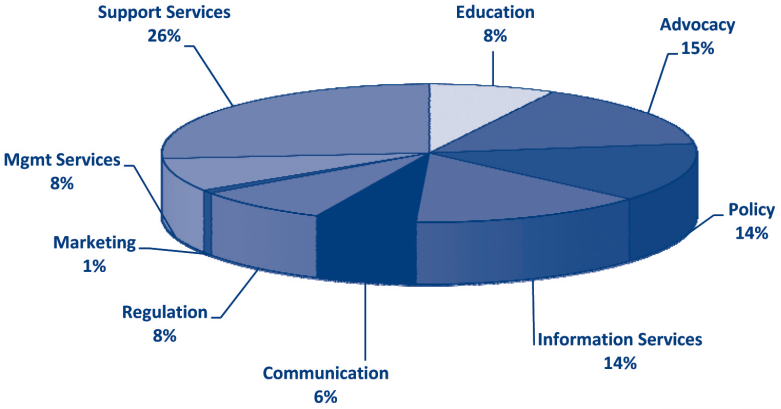
- Bob Kerrey, Democratic candidate for senate
- Deb Fischer, Republican candidate for senate
- Adrian Smith, Nebraska U.S. Congressman
- Herb Kuhn, President, Missouri Hospital Association

Expansion of Medicaid Managed Care

Effective July 1, 2012, Nebraska Medicaid expanded physical health managed care statewide. Contracts were signed with Coventry and AmeriHealth to service the additional 83 counties that were not previously included in Medicaid managed care. The NHA worked with Nebraska Medicaid, Coventry and AmeriHealth to assist members with the transition. On April 17, the NHA hosted a conference call with member hospitals, Medicaid and the plans to address questions and concerns that had been raised. More than 40 NHA members participated on the call, many of them involving multiple staff.

Stewardship

The graph depicts the NHA 2011 operating expenses. The total hospital **membership dues budgeted for 2013 represents a zero percent increase** as compared to the forecasted dues amount for 2012.



The NHA welcomed the Nebraska Heart Hospital (Lincoln) into membership this year. We were also pleased to welcome back Brodstone Memorial Hospital (Superior), growing our membership to include 89 hospitals and health systems.

HIGH-CALIBER EDUCATIONAL PROGRAMS

During 2012, the NHA Research & Educational Foundation, the educational arm of the Association, identified new opportunities for growth. The Foundation provided an unprecedented number of learning opportunities that enabled NHA members to remain current and respond to advances in health care.

The NHA Foundation reconvened its Education Advisory Group. This group of individuals, consisting of staff from various managerial positions within NHA member hospitals, assisted NHA staff in efforts to identify the most relevant and high-quality educational offerings and the most appropriate method of delivery. The group identified 16 specialized individual educational breakout sessions for both the NHA Mid-Year Meeting and the Annual Convention, and five face-to-face educational offerings they felt would be most beneficial to member hospitals in 2013.

Events

In addition to the NHA core educational events—Annual Convention, Mid-Year Meeting and Advocacy Day—the NHA Foundation offered and assisted with other live education events at locations across the state. With these live events and webinars, the **Foundation offered 130 individual programs for member hospitals in 2012.** Programs with particularly strong attendance included:

- Embracing Your Hospital PR Crisis: Tips and Tactics Learned During the Best and Worst of Times
- Positioning Hospitals and Physicians for Success Understanding How Providers and Payers are Responding to Health Care Reform
- Is Your Hospital in Compliance or Are You Just Complacent?
- The Power of Stay Interviews for Engagement and Retention
- When Community Benefit and Finance Meet and How to Make It Successful
- Writing Policies, Making Sense
- Baldrige on a Budget: A Performance Excellence Road Map for Small Hospitals
- The Well-Managed OR

Leadership Institute

Class IX of the NHA Leadership Institute held their opening retreat on January 27, 2012, and the **33 participants of this class completed their final session** during the NHA Annual Convention on October 19, 2012. This **brings the total number of alumni to 191.** This initiative continues to be the Foundation's premiere leadership development program to serve the unique needs of health care employees in the state. Leadership Institute participants benefit from interactive learning with guidance from faculty in various departments from Bellevue University, including business, management and health care administration. Participants gain a great deal from continuous learning and networking due to the strong bonds they develop throughout the 10-month program. The Institute is not only a gateway to career-long professional development, but also provides a solid base of knowledge to help individuals position themselves as health care leaders.

Western Regional Trustee Symposium

Thirty-five Nebraska hospital trustees attended the 16th Annual Western Regional Trustee Symposium. Hospital board members from Arizona, Colorado, Idaho, Montana, Nebraska, Nevada, New Mexico, North Dakota, Utah and Wyoming gathered June 13-15, 2012, in Big Sky, Mont. for this event, which **boasted record attendance.** This event is geared primarily to trustees of smaller, rural hospitals and provides tools and strategies they need to navigate the increasingly complex health care environment. The content of this year's symposium included developing a high-performing board, talent management and leadership continuity, quality improvement and cost reduction. There was also a diverse selection of breakout sessions on topics including board development strategies, physician issues, enhancing patient experience, performance improvement, affiliation strategies and capital finance. Nebraska welcomed a new trustee representative to the WRTS committee in 2012: Galen Wiser, board chair of Providence Medical Center in Wayne.

HIGH-CALIBER EDUCATIONAL PROGRAMS

*care*Learning

*care*Learning, the e-learning company co-owned by the NHA Foundation and 41 other state hospital associations, experienced tremendous growth in 2012. For a second year, the company was a *Learning! 100* award winner. This award recognizes top learning organizations and *care*Learning was acknowledged for their learning culture, innovation and organizational performance. Through *care*Learning, the Foundation added new online courses in 2012 for members, bringing the total number of online courses available to more than 1,300. New courses in 2012 included Hazard Communications, ECG and Chest Pain Competency, Workplace Violence Prevention, Pain Management and ICD-10 Training for Anatomy and Physiology.

> *"careLearning has definitely made the delivery of our required education and safety courses easier and more efficient. We love the badge scanning feature for tracking attendance at live events and the ability to have employees register for live events within the system. The report options are user friendly. We are just into our second year of using careLearning, so we continue to discover new features within the system. The Annual User's Group meeting held in Kansas City is very customer oriented and we are looking forward to attending our second User's Group conference later this month."*
>
> Sharon Hayek, MS, RN
> Organizational Development Services
> Mary Lanning Healthcare, Hastings

Health Care Career Scholarship Program

During the past 14 years, the Foundation has **awarded $434,000 in scholarships through the NHA Health Career Care Scholarship Program, supporting more than 200 students** in their efforts to earn a high-quality education in the health care industry. The Foundation remains a strong and viable entity and will continue to offer quality educational offerings and services to our membership.

Emergency Preparedness

NHA began participation with a group of key stakeholders and subject experts to explore the development of a statewide and regional disaster MOU/MOA (Memorandum of Agreement/ Memorandum of Understanding). While Nebraska hospitals have longstanding agreements to help citizens, visitors and providers during times of crisis, the process is not as extensively formalized as it is in border states including Iowa, Missouri, Kansas and Colorado. The establishment of a statewide MOU/MOA will ensure that any faulty presumptions are clarified, ensure that these understandings will continue in-force even if personnel or other institutional processes change and provide documentation for accreditation agencies, standards organizations and the community at large regarding the high level of commitment Nebraska hospitals have regarding preparedness.

The NHA participated in the Nebraska Infrastructure Protection conference. This provided the association interaction with other key preparedness stakeholders in the state an opportunity to review best practices and planning for the protection of key infrastructure within the state.

Nine states across the central U.S., including Nebraska, participated in the Great Central U.S. ShakeOut. This annual event is a public earthquake drill organized and coordinated by the Central U.S. Earthquake Consortium and its member and associate states, the Federal Emergency Management Agency (FEMA), the U.S. Geological Survey and dozens of other partners. Hospitals were encouraged to have their staff members participate in the event.

Member hospitals were encouraged to evaluate their HVAC systems to maintain a safe operating room (OR) environment. Tips were offered related to relative humidity, recommended temperature and air exchanges specifically for OR areas. NHA member hospitals were also given the opportunity to become a host site for the EMSC symposium. For many years, the Kansas Department of Health & Environment has partnered with the EMS-C Program related to pediatric disaster issues. This year, they extended the invitation to Nebraska hospitals to participate.

Finally, NHA member hospitals were informed of an assessment of respiratory personal protective equipment inventories in the nation's acute care hospitals. NHA member hospitals were assured that the assessment was in no way intended to interfere with or replace data collection via the HAvBED system administrated by Nebraska DHHS, and the data collected would remain confidential. No individual facility will be identified or referenced in any report summarizing the findings.

QUALITY CARE for EVERY PATIENT, EVERY TIME

The NHA facilitates an environment in which NHA members provide care that is free from medical error, utilizes evidence-based best practices, is customized to meet patient-specific expectations and values and sets the standard in Nebraska for service excellence.

Central Line-Associated Blood Stream Infection (CLABSI)

Nine Nebraska hospitals and 14 intensive care units participated in the national CLABSI/CUSP initiative. This initiative saves lives. In September 2012, AHRQ announced the preliminary program results. Data coming out of the program show an **impressive 40 percent reduction in CLABSI rates** in participating intensive care units. The research literature indicates that this translates into approximately **2,000 CLABSIs prevented, $34 million in health care cost savings and more than 500 lives saved.** During the course of the CLABSI/CUSP project, the Nebraska PPS hospitals began participating in the separately funded hospital-acquired infection (HAI) reduction initiative. Eighteen Nebraska PPS hospitals reported information into the National Healthcare Safety Network (NHSN). Using the Nebraska data, our statewide **efforts to reduce CLABSI resulted in 11 fewer CLABSI, 88 fewer hospital days and at a cost savings of $583,000.**

Leaders in Quality

This NHA activity highlights the myriad of quality initiatives ongoing in Nebraska's hospitals. During 2012, the NHA joined the YouTube generation and began to generating videos showcasing the exemplary work done by Nebraska hospitals. View reproducible models of health care quality in a wide range of areas such as reducing mortality due to sepsis, the use of the latest in technology to provide interpretive services, the medical home model and the journey to implement a culture of quality by visiting www.youtube.com/nebhospitals.

Hospital Engagement Network (HEN)

Thirty-five Nebraska hospitals are actively participating in the HRET/NHA Hospital Engagement Network project. A national initiative, our goal is to reduce the incidence of selected hospital acquired conditions by 40 percent and readmissions by 20 percent, by December 31, 2013, from baseline 2011. Thirty-one state hospital associations are participating with HRET in this effort. Our first areas of focus are reducing readmissions and early elective deliveries. Other areas of focus include catheter-associated urinary tract infections, surgical site infections, ventilator associated pneumonia, adverse drug events, falls, pressure ulcers, central line-associated blood stream infections and venous thromboembolism. Participation in projects such as these are one way Nebraska hospitals demonstrate the value provided for the patient's health care dollar.

"Participating in the HRET/NHA/HEN raised awareness and provided tips and tools to enhance patient safety. We began including safety concerns/ events at daily hospital staffing huddles and initiated a review of the past 7 days patient safety/adverse events at our weekly senior leadership review, and included patient adverse events at our Hospital Performance Improvement meetings."

Bev Johnson, MS, RN
Nebraska Methodist Hospital, Omaha

Critical Access Hospitals Conference on Quality

This year marks the 10th annual Critical Access Hospitals Conference on Quality. Held annually in Kearney, this conference brings Nebraska's 65 Critical Access Hospitals together for a day and a half of sharing best practices and learning what works. Keynote speakers include national experts on rural health care and updates from the American Hospital Association and leaders in quality from right here in Nebraska.

Quality and Safety Top Performers

Seven Nebraska hospitals were recognized in The Joint Commission's 2012 Annual Report on Quality and Safety as part of the Top Performers on Key Quality Measures™ introduced last year. The **announcement of Top Performers is highly anticipated by hospitals across the country,** recognizing their hard work in attaining excellence in accountability measure performance. These include:

- Beatrice Community Hospital & Health Center, Beatrice
- Bellevue Medical Center, Bellevue
- Columbus Community Hospital, Inc., Columbus
- Faith Regional Health Services, Norfolk
- North Platte Nebraska Hospital Corporation, North Platte
- Creighton University Medical Center, Omaha
- Regional West Medical Center, Scottsbluff

COST-EFFECTIVE BUSINESS SOLUTIONS

NHA Services, Inc., the Nebraska Hospital Association's wholly-owned subsidiary, continues to explore potential services for Nebraska Hospital Association member hospitals that will address, through a vendor agreement, their needs and provide a non-dues revenue source for the NHA.

NHA Services, Inc., currently has agreements with the following vendors to **provide services to 65 NHA member hospitals:**

- Alert Now – Rapid communications service
- Anthelio Healthcare Solutions – Coding and transcription services
- Delta Physician Placement – Physician recruitment
- FocusOne Solutions – Staff Management and recruitment
- Goldfish Partners, LLC – Physician recruitment
- HirEase, Inc. – Pre-employment screenings
- IT PAC, Inc. – HIPAA & HI trust gap assessments
- LaMair-Mulock-Condon, Co. – Hospital Insurance and risk services
- LMC/Farm Bureau Financial Services – Workers' compensation coverage
- Lutz & Company – Chargemaster reviews
- Medsphere Systems Corporation – Technology solutions
- Nesbitt & Associates – Security and protection services
- Seminole High Plains – Purchase of natural gas
- Stericycle – Pharmaceutical waste disposal
- Universal Asset Lending Information System – Revenue cycle management
- Wheaton Van Lines, Inc. – Relocation and storage

An agreement was finalized with Lutz & Company on April 1, 2012, to provide services for Chargemaster reviews for NHA member hospitals. To date, approximately eight Chargemaster reviews were completed or in the process of being completed.

On September 1, 2012, the agreement with Seminole Energy Services was renegotiated, due to the termination of the agreement with Public Alliance for Community Energy (ACE).

The following services are currently being reviewed by the NHA Services, Inc. board of directors:

- eTransX – Integration applications
- Medefense Plus – Insurance coverage for actual or alleged billing errors
- McGladrey ICD-10 – Rapid assessment of the hospital's readiness for ICD-10
- Agility Recovery – ReadySuite disaster recovery service

COST-EFFECTIVE EQUIPMENT MAINTENANCE

Bio-Electronics, the Nebraska Hospital Association's second wholly-owned for-profit subsidiary, is dedicated to providing preventive maintenance, repair and equipment management of medical equipment to health care facilities in Nebraska and surrounding states. Bio-Electronics is backed by more than 35 years of bio-medical staff experience to address the repair, service and equipment management needs of a single department or an entire facility.

Bio-Electronics currently has service agreements with more than 200 health care facilities, including 58 hospitals and numerous clinics, laboratories, ambulance services, physical therapy and rehabilitation facilities, veterinary clinics, colleges and other health care organizations.

In 2012, Bio-Electronics expanded its coverage in the southeast and northeast Nebraska regions by adding two additional bio-medical technicians for the Lincoln and Norfolk service areas.

Bio-Electronics once again responded to individual requests from Nebraska hospitals and clinics in providing services to meet their quality needs. As a result, several facilities contracted with Bio-Electronics to complete periodic maintenance on a one-time basis in order to meet accreditation requirements.

Bio-Electronics' maintenance programs continue to assure compliance with The Joint Commission, Centers for Medicare and Medicaid Services certifications, Det Norske Veritas (DNV), as well as state and federal radiological health inspections, by providing high levels of regulatory compliance.

Enhancements are continually being made to the Bio-Electronics' equipment database. Most recently, customers using the program are now able to manage their own in-house maintenance responsibilities by accessing the program to enter equipment changes, completed maintenance and document equipment repairs to equipment.

More than 200 facilities served:

- 58 hospitals
- health clinics
- laboratories
- ambulance services
- physical therapy & rehab facilities
- veterinary clinics
- colleges

RELIABLE and COMPREHENSIVE HEALTH DATA

Health Data and Information

The NHA continues to provide reliable and comprehensive health data and information about health care services, health care trends, clinical outcomes and their impacts and implications on Nebraska health care providers and the communities they serve.

The Nebraska Hospital Information System (NHIS) provides value to member hospitals with information and revenue to offset member dues. Through October, 46 orders were completed for $103,405 in revenue. Of this revenue, 78 percent is from non-member orders.

The Nebraska Hospital Information System (NHIS) provides value to member hospitals with information and revenue to offset member dues.

46 orders completed

$103,405 in revenue

78 percent non-member orders

14 unique processes

The NHIS continued refinement of claims data submission process for NHIS. Currently, there are 14 unique processes for claims data submission, with 94 reports distrubuted during the prior 12 months for non-dues revenue of $164,721. Of this revenue, $113,778 was from non-member organizations.

In January 2012, the industry converted to the HIPAA 5010 format for the 837i claims transaction. The transition to 5010 did not go as smoothly as the industry anticipated. There were several clearinghouses that had performance issues and as a result, those claims were delayed in submission to the NHIS. Because of the low claim volume, standard reports and data extract were delayed. The major of issues were resolved during the spring months. One clearinghouse with significant claim volume continued to have issues. At the beginning of October, those issues appeared to be resolved. Additional test and catch-up activities will need to be performed. It is anticipating that data and reports will be release in late October.

The NHA worked with NHA Services and Medsphere to provide an open source hosted EMR system to member hospitals. This model will allow hospitals to work towards adopting EMR system without the need for large capital outlays. IT-PAC consulting continues to engage member hospitals with security assessments.

The NHA continues working with Nebraska Medicaid on their implementation of the State Medicaid Health Plan (SMHP) to register and pay meaningful use HIT incentives to hospitals. Nebraska Medicaid launched their registration and attestation process May 7, 2012, and made their first incentive payment in May 2012.

Health Information Technology

The Nebraska Healthcare Information and Management System Society (HIMSS) Chapter continues to develop their HIT Special Interest Group. The Chapter held their spring meeting in Omaha with 62 individuals registered, and held their fall meeting in North Platte with 27 individuals registered. The Chapter currently has 213 members and continues to grow.

The Nebraska Health Information Initiative (NeHII) continues to develop a statewide health information exchange (HIE). An additional 26 hospitals have signed a letter of intent to implement with NeHII. With the 16 current hospitals, NeHII will have almost half of the Nebraska beds covered in an exchange.

The NHA also worked with the Wide River Technical Extension Center under the ARRA Health Information Technology Extension Program. Wide River TEC is working with Nebraska physicians and CAHs in implementing electronic health records.

NHA 2012 BOARD of DIRECTORS

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Madonna Rehabilitation Hospital, Lincoln

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Nebraska Hospital Association

The influential voice of Nebraska's hospitals

The NHA will continue to provide value to the membership. We are advancing, searching for and embracing new ways to help our member hospitals and health systems weather the challenges ahead. Your involvement is essential to help maintain a strong, effective Association. We will continue to provide influential and collaborative leadership, assisting members to provide comprehensive care to their communities, improving the health status of those communities.

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