

December 12, 2013

Dear Friends and Colleagues,

“*Teamwork*” may be the most overused word in the English language. But in healthcare, never has there been a greater need for collaboration among patients, physicians, hospital systems, payers, and regulators; in other words, for “teamwork.”

Last week in *Straight Talk*, we discussed the three dominant trends—payer ascendancy, consumerism, and steerage—that have already motivated successful healthcare communities such as NCH and those physicians who practice on our medical staff to examine how we can best work together to serve patients, payers and regulators.

The most recent and ongoing example of teamwork is our implementation of *Clinical Documentation Improvement (CDI)* system led by our relatively new CFO **Mike Stephens** and his colleagues. Simply translated, that means recording and having at the ready, accurate and updated clinical records on all our patients.

In order to accurately code medical conditions and treatments, we need a robust computer system for our medical records. And I’m pleased to say that ours is among the best in nation; indeed, NCH has been among the approximately 250 hospitals named *Most Wired* for the past two years. What this objective recognition indicates is that our hospital can be trusted to record accurately what is happening for patients, physicians, payers and regulators.

The coded data that are captured from the documentation in the medical record is used for appropriate reimbursement, as well as to compare NCH patient outcomes against our peers. There are more than 40 different organizations, including the Centers for Medicare and Medicaid Services, which use this codified data to profile hospitals and individual physicians. We all know the high quality of care the NCH team provides to all our patients. We memorialize the record of that high level of care and skill in our patients’ medical records.

The CDI program enables us to tell the whole patient story accurately. **Dr. Doug Ardoin**, our Chief Medical Officer who joined us six weeks ago, has properly observed that the relationship between NCH and physicians is changing—from a primarily transactional one to one that is becoming more integrated. In the past, physicians in private practice (and that was me for 23 years) were relatively independent. Today’s model calls for physicians and systems becoming mutually interdependent and supportive. Synergy among all the participants will facilitate better outcomes for everyone.

This does not mean that doctors will necessarily be employed by healthcare systems. But it does mean that everyone together has a real interest in documenting all of a patient’s current or preexisting conditions along with all of the treatments rendered. Just as hospital rankings are easily accessible on Hospital Compare (<http://www.medicare.gov/hospitalcompare/search.html>) and other websites, comprehensive physician attributes and descriptions will ultimately be posted on various websites. We already have the rudimentary Physician Compare (<http://www.medicare.gov/PhysicianCompare/search.html>), expected to share more data in the near future. The internet will make everyone more knowledgeable and ultimately improve the way we deliver healthcare.

In this age of increased transparency, NCH’s new Clinical Documentation Improvement team will partner with physicians to help everyone. Our goal is to be fair to ourselves and everyone else, as we document episodes of care that accurately reflect the severity of illness, comprehensive treatment, and quality of care that our talented colleagues deliver every day.

Respectfully,



Allen S. Weiss, M.D., President and CEO

P.S. DO YOU HAVE A COLLEAGUE OR FRIEND WHO WOULD BE INTERESTED IN THESE UPDATES?

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