

# CIMRO OF NEBRASKA

## 2008-2009 ANNUAL REPORT



**Resources for better healthcare**

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## LEADERSHIP MESSAGE

CIMRO of Nebraska has had the pleasure of serving as the Medicare Quality Improvement Organization (QIO) in Nebraska for over six years. In that time, many goals have been accomplished and Nebraska healthcare providers have many reasons to be proud. CIMRO of Nebraska's success is due to the dedication and hard work of Nebraska's healthcare providers working to improve their performance. Those providers that partnered with CIMRO of Nebraska have demonstrated significant improvement in the quality of care provided and we are grateful for their commitment to excellence.

We are particularly proud of our national recognition received at the conclusion of the 8<sup>th</sup> Scope of Work (8SOW). CIMRO of Nebraska was awarded the 'Quality Improvement Organization Champion Award', given to the QIO with the highest performance based on the Centers for Medicare & Medicaid Services' (CMS) contract requirements. CIMRO of Nebraska received nine "excellent" passes in each of the nine categories of the 8SOW CMS contract. An excellent pass indicates expectations were exceeded in each clinical outcome category outlined. Nebraska's evaluation composite score also exceeded the national average in every task.

The 9<sup>th</sup> Scope of Work (9SOW) contract brings new challenges, however. Within this report, we note our efforts to change how care is delivered so that it is both less expensive and more effective. Through cutting-edge work, such as CareTrek™, we are engaging providers at the community level to improve transitions of care and redesign systems that will ultimately lead to better outcomes for Medicare beneficiaries. The results of our collective efforts will be important as more healthcare providers pursue similar efforts in the near future.

In American history, there has never been a more urgent time to discuss and plan for improvements in quality healthcare than now. Across the nation, those with an interest in reforming healthcare have come to realize the costs of imperfect care can no longer be afforded nor sustained. While the adoption of information technology offers great promise in coordinating care, the current reality is that most providers and practitioners have yet to adopt interoperable systems. Efforts to change our respective cultures to center care around our patients and residents are ongoing and productive, yet still not widely applied in practice. Clearly, there is desire to improve, but we lack the one true compass to guide us to the proper destination.

As part of any healthcare reform effort, we strongly believe that more resources should be made available to providers and practitioners striving to improve and that an even greater national commitment be made to the QIO program. As impartial, stakeholder-governed organizations, QIOs stand ready to demonstrate to the nation the value of committed individuals and organizations, working together, to put the best interests of the healthcare consumer first. The citizens of Nebraska deserve nothing less than the best care possible and we remain committed to that vision.

With the support of our many partners, we look forward to the upcoming year with great hope and high expectations. We value the relationships we hold with our healthcare stakeholders, as they are critical to our success. Again, we thank you for your commitment to performance improvement and sharing our vision to make healthcare in Nebraska the nation's best.

Tina Georgy, RN, MS  
Chief Executive Officer

Greg Schieke, MBA  
Senior Vice President

**While great strides have been made over the past several years in areas such as publicly reporting provider quality measure data, adoption of health information technology and narrowing the performance gap between healthcare providers, there is still much work to be done. CIMRO of Nebraska continues to serve as a key resource to providers as they work to improve the efficiency, consistency and quality of the care they deliver.**

## CARE TRANSITIONS

CIMRO of Nebraska was awarded one of 14 Medicare contracts to improve care transitions between healthcare settings. The local project, CareTrek™, is a joint effort between CIMRO of Nebraska and the Omaha metro community. In partnership, we are working to improve care coordination and reduce hospital readmissions within Douglas and Sarpy counties. CIMRO of Nebraska is accountable for project management and facilitation.



CareTrek was launched on January 27, 2009 with nearly 40 organizations committing to participate. The first educational session was held on March 3, CareTrek participants were provided education and training on evidence-based interventions to improve transitions of care.

The following are samples of proven interventions being implemented in the Omaha area:

- \* **Medication Management** – the process of comparing a patient’s medication orders, at transition, to all of the medications the patient is currently taking or has been taking to ensure the medications and dose are accurate. Medication reconciliation should be done at every transition of care.
- \* **Communication of Plan of Care** – at discharge, patients and caregivers often do not know what medications their physicians have prescribed, when they should have a follow-up appointment, and in some cases, why they were hospitalized in the first place. It is important to ensure discharge instructions are properly relayed and understood.
- \* **Patient/Caregiver Knowledge** – good transitional care requires effective communication between all parties. It is critical not only to communicate relevant care medication information, but also to empower patients and caregivers with the information, leading to better self management.
- \* **Project Re-Engineered Discharge (Project RED)** – was developed in a series of randomized controlled trials at Boston University Medical Center. Each phase of Project RED is aimed at improving patient safety by recreating the patient discharge process. The Project RED intervention is founded on 11 discrete, mutually-reinforced components.
- \* **Care Transitions Intervention<sup>SM</sup> (CTI) Model** – a model developed by Dr. Eric Coleman to improve the care transition process. During a four-week program, a transition coach works with patients with chronic disease and/or complex care needs to learn self-management skills. These skills will empower patients and caregivers to remain out of the hospital for longer periods of time.

The CareTrek team will continue to provide training and support improvement efforts for evidenced-based interventions, along with a framework for moving forward. The long-term impact of CareTrek and similar projects across the country have the potential to significantly improve healthcare. We look forward to sharing additional successes with you as CareTrek evolves.



Visit the CareTrek Web site to learn more at [www.cimronebraska.org/caretrek.aspx](http://www.cimronebraska.org/caretrek.aspx).

CareTrek™ is a trademark of CIMRO of Nebraska.  
Care Transitions Intervention<sup>SM</sup> Model; Eric A. Coleman, MD, MPH.

“I always appreciate the expertise you bring to our organization and look forward to continued success.”

## PATIENT SAFETY

CIMRO of Nebraska's work under the National Patient Safety Initiative focuses on eliminating patient harm by improving healthcare processes and systems. A select group of providers have been identified to receive this quality improvement organization assistance. Working closely with CIMRO of Nebraska, these organizations locate gaps in care delivery systems and identify opportunities for creating more efficient and effective care. Quality measures and metrics are being used to identify opportunities for improvement and track performance.

The primary focus of our work includes:

- **Reducing rates of healthcare-associated methicillin-resistant *Staphylococcus aureus* (MRSA) infections.** Hospitals collaborating in this project are monitoring MRSA-related data and reporting it to the National Healthcare Safety Network, while working to reduce the infection and transmission rates of MRSA within their organizations.
- **Reducing rates of pressure ulcers in nursing homes and hospitals.** Through an action learning process, hospitals and a nursing home in the same community are coming together to ensure best practices are in place for the prevention of pressure ulcers in their facilities. The community is sharing ideas on ways to implement new processes that ensure pressure ulcer prevention is a priority.
- **Reducing rates of physical restraint use in nursing homes.** Nursing homes working together in this project are working together in an all-teach-all-learn environment that includes educational webinars, sharing of best practices, monthly teleconference calls and a committed willingness to change. This effort has successfully brought down the average restraint rate for these homes from 17.8 to 6.4 percent (May 2008 – August 2009).
- **Improving inpatient surgical safety and heart failure treatment in hospitals.** Participating rural hospitals are identifying potential missed opportunities while the patient is still in the hospital so action can be taken to ensure patients undergoing surgery or those being treated for heart failure receive all the right care before discharge.  
In partnership with the Nebraska Hospital Association, CIMRO of Nebraska launched the Nebraska Surgical Safety Checklist Campaign in May 2009. The checklist, developed by the World Health Organization, is designed to improve team communications and consistency in surgical care. The goal is to have every hospital in Nebraska that performs surgery commit to having a surgical team test the checklist and adopt it into standard practice.
- **Improving drug safety by reducing the use of potentially inappropriate medications and drug-drug interactions in Medicare beneficiaries.** A technical expert panel provided guidance on which medications to target and what alternative options can be provided to prescribers to aid in this effort. Educational materials will be shared with prescribers and pharmacists across the state.



### Expanding the Scope to Rural Boundaries

In August 2009, CMS expanded the QIO gSOW to include assistance to rural providers as part of the current patient safety theme. QIO activities under the rural-focused projects will focus on the following three components: 1) reducing rates of pressure ulcers in hospitals, 2) reducing rates of pressure ulcers in nursing homes and 3) reducing rates of and use of physical restraints in nursing homes.

## PREVENTION

Building upon past efforts, CIMRO of Nebraska is working with a select group of primary care physician practices across the state to increase preventive care services in the areas of colorectal cancer screenings, mammography and influenza and pneumococcal vaccinations. This partnership is an opportunity for CIMRO of Nebraska to offer technical assistance and support as these practices determine ways to maximize the use of their electronic health records (EHRs). By generating and analyzing data reports, opportunities for improvement are being identified, including improved systems that notify providers and patients when screenings and vaccinations should be scheduled. Through these efforts, practices are learning how they can increase office efficiency, improve patient care processes and better report healthcare outcomes.

CIMRO of Nebraska continues to facilitate efforts of the Nebraska Adult Immunization Coalition through the coordination of its Web site. The NAIC Web site, [www.nebraskaimmunizations.org](http://www.nebraskaimmunizations.org), is a repository for flu and pneumonia educational resources, tools and links for both healthcare professionals and consumers.

In our ongoing support of prevention activities across the state, CIMRO of Nebraska also commits staff time and resources through participation in the Every Women Matters Program, Nebraska Stroke Advisory Council, Nebraska Cardiovascular Program, Nebraska Registry Partnership, Nebraska Colon Cancer Screening Program, Focus on Health, Nebraska Diabetes Consensus Guidelines and the Nebraska C.A.R.E.S. program.



## OTHER PARTNERS

CIMRO of Nebraska has established partnerships and contracts with entities outside of CMS, which provide an opportunity to broaden the scope of our work. Additional contractors include the Nebraska Department of Health and Human Services Division of Public Health, the Rural Comprehensive Care Network and the Good Samaritan Foundation/Rural Nebraska Regional Ambulance Network (RNRAN). Our efforts focus on internal dispute resolution services, health information technology, workforce development, management resources and technical assistance.

“You deserve recognition for your efforts.

It has been great working together on various quality initiatives.”

## BENEFICIARY PROTECTION

CIMRO of Nebraska beneficiary protection staff coordinate multiple activities to ensure the rights of Medicare beneficiaries are protected and to link these activities to quality improvement. Core activities include quality of care reviews, including complaints from Medicare beneficiaries; review of discharge appeals from beneficiaries; review of hospital-requested higher-weighted Diagnosis-Related Groups (DRGs); utilization review and reviews of potential anti-dumping cases.

CIMRO of Nebraska adopted the Milliman Care Guidelines® effective January 1, 2009. Nationally-recognized quality measures are integrated within the guidelines, including those from CMS, NCQA (National Committee for Quality Assurance) and The Joint Commission.

CIMRO of Nebraska beneficiary protection staff have met or exceeded our contract requirements, including 100 percent timely completion of all case review activities. In addition, 100 percent of Medicare beneficiaries surveyed report being satisfied with CIMRO of Nebraska's complaint process.



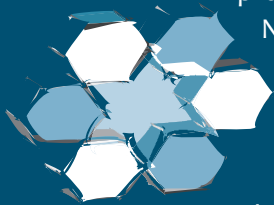
Maintenance of the Medicare helpline allows CIMRO of Nebraska staff to promptly assist Medicare beneficiaries with their inquiries or refer beneficiaries to the appropriate agency for assistance to resolve their concerns. CIMRO of Nebraska staff continues to maintain timely and appropriate responses to the over 250 calls received on the Medicare helpline since the start of the 9SOW.

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## COLLABORATION

### Nebraska Healthcare Quality Forum

CIMRO of Nebraska hosted the sixth annual Nebraska Healthcare Quality Forum on May 4, 2009. Over 300 healthcare providers statewide gathered to build partnerships and improve the quality of care provided for Nebraskans. The Quality Forum is an opportunity for Nebraska healthcare professionals to share quality improvement tactics and best practices to improve care with representatives from all care disciplines.



In addition to two national keynote speakers, twenty-four Nebraska healthcare organizations shared information on electronic health records, care processes, clinical care models, medication reconciliation, patient safety and many others in an effort to improve healthcare in Nebraska.

Many Nebraska healthcare professionals continue to make innovative changes in how they care for patients and residents; the Nebraska Healthcare Quality Forum provides the opportunity to share those successes. This unique level of collaboration among healthcare professionals sets our state apart as we strive to make healthcare in Nebraska the nation's best.

New Location -  
Omaha - La Vista Embassy Suites

SAVE THE DATE:  
TUESDAY, MAY 11, 2010  
NEBRASKA HEALTHCARE QUALITY FORUM

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*“CIMRO of Nebraska staff and board have done a terrific job –  
thanks for all you do.”*



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*To make healthcare in Nebraska the nation's best.*