

News Release

FOR IMMEDIATE RELEASE

June 21, 2007

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NMMRA Is Awarded a Multi-state Contract to Assist in Standardizing Hospital Admission Practices Using Case Management Protocols

Albuquerque, NM – The New Mexico Medical Review Association (NMMRA) announced today that it is leading a six-state study that involves using a case management process, or protocol, for assigning bed status when a patient arrives at a hospital. Participating hospitals will learn how to modify their procedures for assigning and documenting the proper setting of care needed (inpatient or observation), when admitting a patient. Funded for about \$700,000 by the Centers for Medicare & Medicaid Services (CMS), the Case Management Assignment Protocol (CMAP) project is designed to reduce unnecessary short-stay hospital admissions and inadvertent Medicare payment errors, while assuring that patients receive appropriate care.

The contract names NMMRA, the Medicare Quality Improvement Organization (QIO) for New Mexico, as the state lead for this project. NMMRA will form a consortium of western states, working with its counterpart QIOs in Arizona, Nevada, Oregon, Utah and Washington. Each QIO will recruit three hospitals in each state to adopt the case management protocol that is based on a previous pilot study conducted in Florida. In a centralized, train-the-trainer effort, the Florida QIO will train the western region QIOs and hospitals on how implement and evaluate the effectiveness of this protocol in a consistent manner. NMMRA will coordinate QIO and hospital trainings, analyze data and evaluate the project. Actual hospital data will be collected to determine the reduction in payment error rates and short hospital stays as a result of using this protocol. NMMRA will compare outcomes in the western states to Florida's results. Patient-level information will not be identified in the data that NMMRA collects from the other states. Results from this study may influence universal recognition of the use of case management protocols across the country.

“That a relatively small QIO like NMMRA has been selected to lead this western multi-state effort speaks to the high regard for NMMRA's past work in reducing payment error, in particular the collaboration between our hospital quality and case review teams,” says Dan Jaco, NMMRA chief executive officer. “New Mexico hospitals once had the highest Medicare payment error rate in the

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New Mexico Medical Review Association



country, but working closely with NMMRA these past few years, have been successful in reducing the rate significantly.”

“It is important to note when talking about payment errors,” Jaco added, “that we are referring primarily to human error, not systematic attempts to increase revenues inappropriately. In fact, New Mexico hospital personnel are more likely to undercode than overcode diagnosis and procedure information, often resulting for some hospitals in less, not more reimbursement.”

“We believe that this effort helps to bridge current gaps that exist between admitting physicians, case management and billing staff in many hospitals and will help streamline the process for appropriate inpatient admissions,” explains Carlene Brown, MPH, CPHQ, NMMRA quality improvement manager and the lead for this special project. “Under this protocol, a set of pre-approved orders will direct case management personnel to use hospital admission criteria to assign the appropriate setting. And, it ensures that a patient’s bed status is clearly documented in the medical record so that Medicare will be billed correctly.”

This special study expands work that NMMRA is already doing in New Mexico as part of the CMS Hospital Payment Monitoring Program that aims to reduce the number of errors in Medicare payments made to hospitals.

NMMRA is a not-for-profit, physician-sponsored organization that is New Mexico’s federally contracted Medicare Quality Improvement Organization and External Quality Review Organization for Medicaid. The organization works with health care providers, consumer and health care organizations, and state and federal agencies to improve the quality of health care in New Mexico.

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This material was prepared by NMMRA, under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services. The contents presented do not necessarily reflect CMS policy. 8SOW-NM-HPMP-07-17