

# ACHE Premier Corporate Partner E-Newsletter

April 26, 2018



Welcome to the *ACHE Premier Corporate Partner E-Newsletter*. This quarterly publication is designed to educate ACHE Members and Fellows on arising trends in healthcare, offer solutions to leaders and share information about complimentary education and networking opportunities being offered by ACHE's Premier Corporate Partners.

**ACHE is proud to announce the addition of two new Corporate Partners in 2018—[Optum](#) and [Roche Diagnostics](#)!**

We would like to thank all of our Premier Corporate Partners for their support of ACHE programs and for playing a critical role in helping ACHE advance its members and healthcare management excellence. To learn more about all of our Premier Corporate Partners, please visit [ache.org/CorporatePartners](http://ache.org/CorporatePartners).

*Please note that reference to any specific commercial products, processes or services by a Premier Corporate Partner in this newsletter and featured educational content does not constitute or imply an approval, endorsement, recommendation or referral by ACHE. In addition, the views and opinions expressed in the featured educational content do not necessarily state or reflect those of ACHE.*

*The articles in this newsletter were submitted by Premier Corporate Partners and are generally published as submitted.*

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## Aramark

Aramark's healthcare insights elevate the hospital experience for patients, caregivers and staff in hospitals across the country. Our insights-driven approach fills our menus with on-trend recipes that keep staff engaged while providing patients and caregivers the nourishment needed to heal. Innovative approaches to integrated service solutions deliver disease prevention, and asset management delivers environments that promote healing. And, our data-driven approach to healthcare technology management optimizes the performance of your equipment for increased patient and physician satisfaction, while extending the lifecycle of equipment for lower total cost of ownership.

[Click here](#) to learn more about how our data-driven approach improves performance at hospitals across the country.

[Aramark](#)

## Baxter Healthcare Corporation

Ensuring drugs are prepared safely and accurately is at the core of a pharmacist's responsibilities. Despite best efforts, however, data suggests that errors in the IV compounding room are not uncommon. A study published in the *American Journal of Health-System Pharmacy*, evaluating IV admixture error rates for five hospitals, reported that 9 percent contained errors.

In an effort to increase safety in the IV process, an increasing number of organizations are considering the adoption of IV automation. [Learn more](#).

[Baxter Healthcare Corporation](#)

## BD

HIMSS Analytics conducted research on behalf of BD Medical to understand the state of the medication management market and identify the challenges that exist within it. The [2017 Medication Management and Safety Survey](#) found that more than 75 percent of physicians, nurses and pharmacists surveyed described the medication management process as "flawed," "fragmented," "disjointed" and "primitive." Additional results revealed:

- Nearly half of healthcare professionals surveyed cited better integration with EHRs as an opportunity for improvement.
- More than 70 percent of organizations surveyed see the value in moving to a single vendor for medication management.

- Over 25 percent of clinicians polled stated that data from medication management devices do not integrate well with EHRs at their facilities.

"BD is partnering with IT industry leaders and collaborating with customers to help address these evolving medication management challenges," says Ranjeet Banerjee, worldwide president, Medication Management Solutions, BD. "By leveraging these partnerships, we will improve interoperability across the medication management process, enhance cybersecurity and develop advanced analytics to drive sustained customer outcomes."

The [BD HealthSight™ platform](#) for enterprise medication management supports health systems as they address these challenges by helping to create a seamless ecosystem between the BD Pyxis™ and BD Alaris™ portfolios from pharmacy to bedside—with the goal of improving efficiency, reducing waste and enabling healthcare workers to spend more time on patient care.

To learn more about the HIMSS Analytics/BD study, [watch the on-demand webinar](#).

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[BD](#)

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## Cardinal Health

According to the World Health Organization, as many as one in 10 patients in developed countries are harmed while receiving hospital care, making patient safety a serious global public health issue. While hospital safety culture is constantly evolving, there are specific steps all hospitals can take to improve overall safety and reduce harm. [Read the four keys to implementing and sustaining a culture of safety](#).

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[Cardinal Health](#)

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## Cerner Corporation

When we think of the business of healthcare, many of us automatically think of the administrative and finance departments in hospitals and healthcare systems. That is where the business is accounted for—away from where the care is taking place. At least, that is how it used to be.

Today, the healthcare landscape is shifting rapidly, and a fundamental redesign of the approach to the business of care and revenue cycle management is critical for healthcare organizations' financial solvency.

In this [blog post](#) from Tinu Tadese, MD, a senior physician executive at Cerner and a Healthcare Financial Management Association-certified healthcare finance professional, details why engaged physicians are critical to a hospital's bottom line. She explores why some physicians are disengaged from the business of care and revenue-cycle management and offers strategies for gaining physician buy-in.

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Cerner is proud to host the [ACHE San Francisco Cluster](#) May 21–24. It will host complimentary lectures, where attendees can earn ACHE Qualified Education credit, and networking receptions for Cluster registrants and local ACHE members Monday, May 21, and Wednesday, May 23.

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## [Cerner Corporation](#)

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### **Change Healthcare**

For the past eight years, Change Healthcare has commissioned an online survey of leading health plans and other healthcare stakeholders in an effort to determine and report on the “pulse” of the healthcare industry. This latest Industry Pulse survey—fielded online in late 2017 and published in the first quarter of 2018 in partnership with the Healthcare Executive Group—looks at marketplace challenges, trends, opportunities and the investments payers report, and contrasts those findings with what was reported in past surveys.

This edition’s survey was open to more than 2,000 Change Healthcare customers, which includes leading national and regional payers of all sizes, members of the HCEG and members of the Health Plan Alliance. Additionally, Change Healthcare received survey responses from healthcare leaders across provider, vendor, government and academic areas. In all, 52 percent of respondents were at the president, vice president and C-suite levels.

[Read the full report here.](#)

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## [Change Healthcare](#)

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### **IBM Watson Health™**

As the consumerization of healthcare continues, individuals expect their care experience to resemble their interactions with other frequently used services. The third [webinar](#) in a three-part series with David Nash, MD, dean of the Jefferson College of Population Health, covered important topics in consumer engagement from the perspectives of payers and health systems. Nash was joined by Bobbi Coluni, vice president, offering management, IBM Watson Health, for this recorded discussion on:

- Market trends and environmental factors driving healthcare consumerism
- Potential approaches for engaging patients and members
- How user experience and technology can help move the needle

IBM Watson Health is proud to sponsor the [ACHE Amelia Island Cluster](#) April 23–26. It will host a complimentary lecture on Monday, April 23, from 4 p.m. to 5 p.m., at the Omni Amelia Island Plantation Resort focused on “Sustainable Quality Improvement: Using Data and Analytics to Support Successful Quality Improvement Initiatives.” Attendees will earn 1 hour of ACHE Qualified Education credit. IBM Watson Health

also will host complimentary networking receptions on Monday, April 23, and Wednesday, April 25, from 5 p.m. to 6 p.m., for all Cluster registrants and local ACHE members.

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[IBM Watson Health™](#)

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## **Optum**

Patients go out of their healthcare care insurance plan network for a variety of reasons. When patients receive their care À la carte—choosing primary care from one organization, then specialty or acute care from unaffiliated care providers—it can create serious challenges for healthcare provider organizations and patients.

What can care provider organizations do to prevent patients from seeking care outside their system? Organizations like NYUPN—a collaboration between the University Physician Network and NYU Langone Medical Center—increased in-network utilization by patients who were previously seeing nonparticipating physicians by 5 percent. Discover how NYUPN is keeping patients in network using predictive data and analytics and creating a foundation for actionable insights in this [topic spotlight](#). And, for more on this topic, [watch this video](#).

Optum is proud to host the [ACHE Santa Fe Cluster](#) June 4–7. It will be hosting complimentary lectures, where attendees can earn ACHE Qualified Education credit, and networking receptions for Cluster registrants and local ACHE members Monday, June 4, and Wednesday, June 6.

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[Optum](#)

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## **The Risk Authority Stanford**

While maintaining a formal risk management program within the hospital setting has been common practice for many years, historically, physician practices have had fewer resources and less expertise in managing risk. As healthcare systems increase their ownership of private physician practices and employ more providers, they must ask themselves, “Are we identifying, mitigating and managing the unique risks inherent to our physician practices?”

One key tool for identifying physician risks is an on-site, individualized assessment that focuses on areas unique to the physician and physician’s practice setting. These assessments incorporate questionnaires, environmental walk-throughs, interactive tracers with staff and reviews of medical records and practice policies.

Physician-practice assessments should be followed by both numeric and narrative summaries of findings provided to the practice and health system. It then becomes important to review these findings and recommendations, identify high-risk focal points by using strategies, such as risk-vulnerability scoring, and providing resources to mitigate identified areas of risk.

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Software tools also can assist in proactively identifying risks in physician practice settings. One such tool is The Risk Authority Stanford's [Innovence™ Pulse](#), which uses risk coding to analyze complaints, incidents and claims to pinpoint responsible service areas and categorize the factors involved. This allows users to address issues and prevent future losses.

Learn more about the unique physician practice risks in our overview, [What Can Happen in the Office?](#) And learn how The Risk Authority Stanford's [consulting services](#) can assist you in managing your physician practice risks.

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## [The Risk Authority Stanford](#)

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### Roche Diagnostics

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Multiple legislative changes are affecting the healthcare industry. One of the most significant reforms is the Protecting Access to Medicare Act, which was passed by Congress in 2014 and implemented new reimbursement rates for some clinical laboratory tests on Jan. 1, 2018. PAMA is intended to reduce spending on diagnostic testing by the Centers for Medicare & Medicaid Services by revising how clinical lab reimbursement rates are calculated under the Clinical Laboratory Fee Schedule. While PAMA brings industry changes and challenges, it also offers opportunities to those who are informed and prepared. [Is your organization ready?](#)

What you should know about PAMA:

- **Timeline:** CMS reimbursement rate reductions have already begun and will continue during the next six years.
- **Scope:** PAMA reduces CMS reimbursement amounts for most outpatient Medicare diagnostic testing.
- **Payer mix:** Knowing your Medicare and private payer mix is important.
- **Decoupling contracts:** Experts are recommending that laboratories review their contracting methodologies and take action as needed. [Attend this webinar for more information.](#)
- **Workflow and efficiency:** Operational improvements can help mitigate the effects of reduced reimbursement.
- **ATP billing:** Automated testing profiles are now unbundled.

As your strategic partner, Roche is committed to helping you successfully navigate PAMA and its impact to your organization. We provide tools and resources along with industry-leading diagnostic solutions that enable you to maximize efficiency, increase the value of your laboratory and improve patient outcomes.

Learn more about PAMA and gain insights on addressing its challenges at [LabLeaders.com](#).

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## [Roche Diagnostics](#)

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This email was sent from the American College of Healthcare Executives, 300 S. Riverside Plaza, Suite 1900, Chicago, IL 60606-6698.

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