



# NEWS BRIEFS

Informational Newsletter for Wyoming Hospitals

Volume 45, Number 20

May 16, 2014

## WHA Calendar:

WHA Board Meeting  
Casper 5/15

Trustee Educational Program  
Casper 5/16

## Other Events:

Western Regional Trustee Symposium  
Henderson, NV 6/11-6/13



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## HHS Data on Quality Improvements

The Department of Health and Human Services announced that new preliminary data show an overall nine percent decrease in hospital acquired conditions nationally during 2011 and 2012.

National reductions in adverse drug events, falls, infections, and other forms of hospital-induced harm are estimated to have prevented nearly 15,000 deaths in hospitals, avoided 560,000 patient injuries, and approximately \$4 billion in health spending over the same period.

The Affordable Care Act is also helping reduce hospital readmissions. After holding constant at 19 percent from 2007 to 2011 and decreasing to 18.5 percent in 2012, the Medicare all-cause 30-day readmission rate has further decreased to approximately 17.5 percent in 2013.

This translates into an 8 percent reduction in the rate and an estimated 150,000 fewer hospital readmissions among Medicare beneficiaries between January 2012 and December 2013.

“We applaud the nationwide network of hospital systems and providers that are working together to save lives and reduce costs,” said HHS Secretary Kathleen Sebelius. “We are seeing a

simultaneous reduction in hospital readmissions and injuries, giving patients confidence that they are receiving the best possible care and lowering their risk of having to be readmitted to the hospital after they get the care they need.”



These improvements reflect policies and an unprecedented public-private collaboration made possible by the Affordable Care Act.

The data demonstrates that hospitals and providers across the country are achieving reductions in hospital-induced harm experienced by patients.

These major strides in patient safety are a result of strong, diverse public-private partnerships and active engagement by patients and families, including efforts from the federal Partnership for Patients initiative and Hospital Engagement Networks, Quality Improvement Organizations, the Centers for Medicare & Medicaid Services, the Agency for

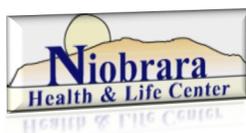
Healthcare Research and Quality, the Centers for Disease Control and Prevention, the Administration on Community Living, the Indian Health Service, and many others.

The public-private partnerships are working collaboratively – along with health care providers – to identify and spread best practices and solutions to reducing hospital acquired conditions and readmissions.

HHS will continue to accelerate delivery system reform efforts by working with nationwide partners to capitalize on these promising results so that the nation continues on the path of increasing patient safety and reducing health care costs while providing the best, safest possible care to patients.

To view the report, please visit: <http://innovation.cms.gov/Files/reports/patient-safety-results.pdf>.

For more information from the Department of Health and Human Services, visit [www.hhs.gov/news](http://www.hhs.gov/news).



*Don't forget to send us a story about your hospital so we can feature you in our Member Spotlight*



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## Lusk Hospital Recognized

Niobrara Health and Life Center (NHLC) has been recognized by Mountain Pacific Quality Health-Wyoming and the Wyoming Department of Health for achieving excellence in infection prevention.

NHLC achieved zero Central Line Associated Blood Stream Infections (CLABSI) and zero Catheter

Associated Urinary Tract Infections (CAUTI) in 2013.

The U.S. Department of Health and Human Services set the 2013 National Prevention Target for a 50% reduction in CLABSI and a 25% reduction in CAUTI.

All Wyoming hospitals have exceeded both goals.

NHLC, along with other Wyoming hospitals demon-

strate their dedication to reducing healthcare associated infections, exceeding national goals for CLABSI and CAUTI reduction and for achieving zero CLABSI and CAUTI incidents.

More information on the awards are available by contacting Brenda VanDewater, NHLC Director of Nursing.

## Lander and Riverton Become SageWest Health Care

As of May 1, Lander Regional Hospital and Riverton Memorial Hospital, which serve patients in Fremont County and surrounding areas, have joined forces to become SageWest Health Care.

This new, common name further unites the two hospitals, which have consolidated management and operations to ensure the efficient delivery of high quality patient care to Fremont County.

As SageWest, the hospitals will operate as one comprehensive health system with two campuses.

Lander Regional Hospital is now named SageWest Health Care at Lander and Riverton Memorial Hospital is SageWest Health

Care at Riverton.

"Lander Regional and Riverton Memorial have partnered to meet the challenges of today's changing health care environment and better serve our communities," Steve Erixon, who has served as the CEO of both hospitals for the last year and will continue to serve as CEO of SageWest Health Care, said. "As one system, we are better positioned to grow, expand our services and recruit additional physicians to meet the health care needs of our region into the future.

The SageWest name symbolizes the region and reflects the vision for the health system.

Sage portrays the possession of wisdom and experience and is a prevalent Wyoming plant with a sweet smell and healing touch.

West represents the hospitals' home and conjures images of self-reliance, determination, independence and a pioneering spirit.

Lander Regional and Riverton Memorial are both affiliated with Life-Point Hospitals.

Their teams have collaborated on the delivery of care in their communities in recent years and in 2013 began sharing a management team.

## CMS Confirms ICD-10 Implementation for Oct. 1, 2015

The Centers for Medicare & Medicare Services (CMS) has confirmed that it will release an interim final rule soon specifying the new ICD-10 compliance date of Oct. 1, 2015.

"The rule will also require HIPAA-covered enti-

ties to continue to use ICD-9-CM through Sept. 30, 2015," CMS said.

Due to the implementation delay, the agency said it has canceled plans for ICD-10 end-to-end testing originally scheduled for July 21-25 and that additional oppor-

tunities for end-to-end testing will be available in 2015.

ICD-10 implementation was to begin Oct. 1, 2014 but was delayed by the Protecting Access to Medicare Act.