Since 1902, Raritan Bay Medical Center (RBMC) has provided quality care to the people in central New Jersey. Today, RBMC has a total of 501 beds at its two locations, Perth Amboy and Old Bridge, which include more than 500 physicians and a staff of more than 1,700 ancillary health care providers. RBMC has received regional and national attention for its quality care, including recognition among the nation’s top ten percent of hospitals in the care of stroke patients.

Challenges

From high patient volumes to the frequency of life-threatening conditions, the hectic nature of an emergency department (ED) adds to the difficulty of accurately documenting encounters and capturing charges. The ED staff at RBMC experienced this firsthand, with more than 75,000 patients being treated annually in the Perth Amboy and Old Bridge EDs. The paper-based patient records lead to documentation errors that were not discovered until weeks after the patient was discharged. One particular challenge in the documentation that was discovered during internal medical record audits was missing infusion times for start, stop, and duration of a medication, impacting the accuracy of billing for the procedure.

To overcome the document error challenge, RBMC sought a solution provider that could help the organization:

• Reduce or eliminate paper-based processes
• Increase the accuracy of ordering and documenting infusion procedures
• Proactively review documentation practices to correct errors quickly
• Improve documentation compliance with payer guidelines

Improved Documentation and Charge Capture Practices Shorten Chart Completion Time at Raritan Bay Medical Center

With implementation of the Optum™ LYNX ED Charging Application integrated with Picis ED PulseCheck®

Highlights

• Improved documentation of infusion stop times
• Reports upon nursing shift completion identify documentation issues for quick resolution
• Faster completion of patient charts accelerates the revenue cycle, resulting in closed charts upon discharge, instead of two to three days later

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Solutions

In mid-2010, RBMC began a year-long process of evaluating solutions and vendors. “I had used other documentation and charge capture systems in the past, and I knew that I wanted something more user-friendly for our organization,” said Vincent Ciccarelli, the ED nurse manager at RBMC’s Perth Amboy facility. “We also looked at industry reports and forecasts about different vendors, since we wanted a vendor that would be able to support us over the long term.”

After reviewing the capabilities of multiple systems, RBMC selected two solutions: the Optum™ LYNX ED Charging Application and Picis ED PulseCheck®. These integrated emergency department solutions promote consistent and accurate documentation and charging. The ED Charging Application prompts nurses to document all of the care provided to patients, including details about infusion and injection procedures. Evaluation and management (E/M) facility visit levels are calculated based on patient acuity and resource use consistent with the CMS outpatient prospective payment systems (OPPS) guidelines.

ED PulseCheck is an ED-focused electronic medical record (EMR) with capabilities that help nurses to complete their documentation and populates infusion duration values based on the start and stop times entered into the ED Charging Application. Clinicians placing medication orders through ED PulseCheck are prompted to distinguish between medication delivery type (e.g., injection versus infusion, etc.) to help improve documentation of charge capture.

RBMC’s implementation preparations started with clinician training with a total of 430 people trained on the systems, including 150 physicians and 120 nurses.

Implementation was completed in late August 2011, despite some unusual environmental challenges faced by the hospital. First, a water pipe break shut down a server on the scheduled day for the Old Bridge facility’s go live. The go live was completed the following day, even though a major earthquake shook that region the same day. The Perth Amboy go live took place two days later, only a few days before Hurricane Irene was expected to make landfall in that region.

“Everything fell into place because Optum and Picis were there for us throughout the process,” said RBMC’s director of informatics Luz S. Ronquillo, RN, MA, CCRN, RN-BC. “We engaged Optum and Picis for seven-day support, which really helped.”

Results

RBMC took immediate advantage of this new technology to overcome their documentation challenges. This included using the ED Charging Application to help nurses enter stop times for infusions.

“When we first went live, we found about 300 cases where infusion stop times were not entered. That quickly dropped to 200 cases, and within one month we were near 80 percent to 90 percent compliance,” Ronquillo said.
The seamless flow of information between the ED Charging Application and Picis ED PulseCheck helped clinicians correctly order and document medications — whether they were a push, injection or infusion — to obtain accurate reimbursement for the medicine provided. The tight integration between the solutions is designed to help meet the unique documentation, billing, and reimbursement needs of hospitals, resulting in higher levels of efficiency and patient satisfaction. RBMC’s ED reported that 75 percent of its orders were placed electronically using ED PulseCheck, and they had implemented 32 medication order sets.

In early October, RBMC initiated a training program to use the reporting capabilities in the solutions to transform the ED into a paperless environment. “We were battling the problem with documenting infusion times for quite awhile, and were frequently doing audits to get the times recorded,” said Maureen Hubka, an ED system administrator and nursing informatics specialist. “Once we went paperless, we could get the reports to easily identify any issues so we could quickly rectify the situation.”

The reports identified documentation issues, which helped RBMC improve its documentation practices. “In looking at reports from our go live date through October, November, and December, there was a dramatic improvement in the number of records that didn’t have infusion stop times documented,” said Cindy Schwemer, ED nurse manager. “Now when we run the reports, it’s rare that there are any outstanding issues.”

The value that RBMC derived from the reports increased the frequency of use. Initially, Ciccarelli and other nurse managers ran the report every few days to spot documentation issues that needed correction. RBMC quickly realized, however, that running the report more frequently allowed clinicians to resolve documentation issues quicker, since details about the encounter were still fresh in their minds.

Now, nurses use the reports in the ED Charging Application before they remove patients from the ED PulseCheck tracking board to uncover any documentation issues. The ED Charging Application reports are also run at the end of every nursing shift to pinpoint documentation problems. “It used to be that there was a three-day window when the chart remained open to add documentation. Now, it’s immediate. When the patient is discharged, the chart is closed out,” Hubka said.

The mandated use of the reports throughout the workday has virtually eliminated problems related to documenting infusion times. “We implemented a policy to take disciplinary action if a nurse failed to enter two infusion stop times per month,” Ciccarelli said. “To date, we’ve yet to take any disciplinary action because the stop times are always entered by the end of a nurse’s shift.”

The improved documentation practices are helping RBMC realize appropriate reimbursement for the same level of work that they performed in the past. These improvements include correctly capturing medication orders and infusion times.

Going forward, RBMC plans to increase its focus on using the ED Charging Application and ED PulseCheck to assist in calculating facility visit levels. Additionally, the organization plans to further explore the numerous reporting options that are available within the solutions.

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— Vincent Ciccarelli
ED nurse manager
RBMC’s Perth Amboy facility
About Raritan Bay Medical Center

A New Jersey state-designated primary stroke center, Raritan Bay Medical Center (RBMC), located in Perth Amboy and Old Bridge, is ranked among the nation’s top 10 percent of hospitals in the care of stroke patients, a position the hospital has held for the past five consecutive years. RBMC is also one of less than 2 percent of hospitals nationally to achieve re-designation as a Magnet Hospital, recognizing nursing excellence, and has been the recipient of a New Jersey Horizon Blue Cross Blue Shield patient care quality award for the past three years.

About Optum

Optum is an information and technology-enabled health services business platform serving the broad health care marketplace, including care providers, plan sponsors, life sciences companies and consumers. Its business units — OptumInsight, OptumHealth and OptumRx — employ more than 30,000 people worldwide.