

Learn to do this at home!

- How-To-Guide
 - Simple
 - Practical
 - Tools for success

www.cardinal.com/clinicalcenter/materials/taskforce/IV/toolkit.pdf

SAN DIEGO PATIENT SAFETY CONSORTIUM

Getting Started Kit:

Safe Administration of High-Risk IV Medications

Intra- and Inter-Hospital Standardization:
Drug Concentrations and Dosage Units

How-to Guide

As part of ongoing efforts to improve patient and medication safety, in January 2005 members of the San Diego Patient Safety Consortium (SDPC) evaluated ways for local patient safety improvement. Standardization of intravenous (IV) infusion medication concentrations and dosage units with local area hospitals in San Diego County was identified as a significant opportunity to reduce morbidity and mortality due to preventable, high-risk medication errors. The 2005 Institute of Medicine (IOM) report, "Preventing Medication Errors," urges hospitals to take action to reduce the potential for error. This toolkit provides the results of the work by the SDPC. It Safety Task Force, along with tools and information to assist other local area organizations in implementing this standard approach.

Dollars & Sense Are Your Revenues Optimized?

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What is a Revenue Optimization Checklist?

- Key financial strategies for optimizing revenue
 - Reimbursement
 - Cost avoidance
- Goal: Increase revenue
- Checklist of questions organized in specific sections
 - Yes
 - No



Money, Money, Money

- Financial Management Areas of Focus
 - Chargemaster
 - Ex: Are all new drugs on the formulary on the chargemaster? Is the CMS site checked to determine if new drugs have codes assigned?
 - Pharmacy Systems Maintenance
 - Ex: Does Pharmacy have access to financial systems to review billed charge and reimbursement, including patient and payer specific data?

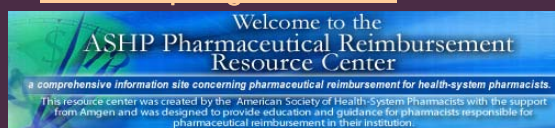
We're In the Money!

- Financial Management Areas of Focus (cont.)
 - Revenue Cycle Management
 - Ex: Is pharmacy a part of a revenue cycle team?
 - Contracting
 - Ex: When applicable, do expensive drugs have a "carve out" with payers for inpatients?
 - Charge Capture
 - Ex: Are audits of charges vs. purchases vs. inventory performed for top drugs by cost and by total expenditures to ensure charge capture?

"If it don't make dollars, then it don't make sense / cents"

- Tailor to your facility
- Continue to update the list
- Re-evaluate to ensure continuous compliance
- Use your resources:

– www.ashp.org/reimburse



– www.cms.hhs.gov



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