



Executive Health Resources

## Achieving compliance through a partnership founded in evidence-based methodology and analytic oversight

From the launch of the Two-Midnight Rule through the 2016 Hospital Outpatient Prospective Payment System clarification about inpatient short stays, CMS has gradually evolved guidance pertaining to medical necessity and inpatient admissions. Charleston Area Medical Center (CAMC) General Hospital in West Virginia sought to ensure that its utilization review (UR) process continued to produce accurate, defensible admission decisions. To accomplish that goal, CAMC turned to Optum Executive Health Resources.

Although the Two-Midnight Rule added an element of time, the key to determining the correct admission status remained unchanged: the physician's judgment on whether a patient requires an inpatient level of care based on symptoms, severity, possible complications and risks. Anticipated length of stay alone was not sufficient to make admission decisions.

The hospital team focused on making appropriate evidence-based admission determinations as early in the UR process as possible. "Two-Midnight didn't affect our internal process for reviews," said CAMC Medical Director, Rod McKinney, DO FACOI, ACPA. "We've always proactively supported our medical necessity decisions with documented evidence based on physician judgement."

The evidence-based methodology that Optum physician advisors leverage when conducting case reviews is developed from the latest medical research contained within more than 100,000 peer-reviewed medical articles. CAMC chose to continue using this foundation to support its admission recommendations following the implementation of the Two-Midnight Rule. "We want to get medical necessity right on the front end to avoid missed opportunities and extra work on the back end," says Leighann Stone, RN, Director of Case Management at CAMC.

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CAMC continues to send all cases that do not meet InterQual first-level criteria for a second-level review by physician advisors. "Optum Physician Advisors work seamlessly with our internal physician advisor to perform the second-level reviews



### About Charleston Area Medical Center General Hospital:

- 956-bed nonprofit regional referral and academic medical center
- West Virginia's largest teaching hospital with over 500 students annually in various programs
- The only West Virginia hospital to be awarded the Distinguished Hospital Award for Clinical Excellence™ from Healthgrades, awarded to the top 5% of hospitals nationwide; CAMC has achieved the award in 2014, 2015 and 2016
- 2015 Malcolm Baldrige National Quality Award recipient
- Features a level I trauma center, a level III NICU, the Vascular Center of Excellence, kidney transplant center, West Virginia's only free standing children's hospital, and the state's premier cancer center

we need to remain compliant," reports Stone. "All cases are looked at individually and reviews are very thorough." In addition to helping CAMC provide strong documentation to avoid denials in the first place, Optum also proved itself as a valuable partner by supporting its recommendations through the first three levels of appeal at no additional charge.

But CAMC was looking for more than just a third-party vendor to assist with performing and defending second-level reviews. They also had analytic plans and required a partner who could help them with tracking multiple key performance indicators (KPIs). "The quarterly review of the results has been very helpful in maintaining or adjusting the process to continue its efficiency," said Dr. McKinney.

For instance, CAMC consults the concurrent trend report provided by Optum on a weekly basis to identify larger patterns in referral results that indicate opportunities for process improvement. Studying the case volumes, conversion rates and length of stay data all provided insight into hospital operations that allowed the team to optimize its UR function. "The reports have helped understand physician trends like who was called, whether they responded and what the outcomes were," said Joyce Prunty, RN IQCI, Continuum of Care Coordinator. Likewise, reviewing the observation rate, denial rates and appeal statuses allowed CAMC to understand how its UR activities affected its finances. "These reports are vital to maintaining a tight, compliant process," said Prunty.

Additionally, CAMC leveraged Optum reporting to understand trends in physician engagement. By understanding which physicians are responding to queries and where the delays are, Prunty identifies areas for further refinement and physician education to help reduce handle time and increase awareness of the importance of physicians being active partners in utilization review.

"We value the thoroughness of Optum recommendations, the easy access to reporting and analytics and their responsiveness to our questions and needs," said Prunty. "Their (Optum) physicians are always professional, helpful and work well with both our physicians and our case managers. Someone is always willing to take the time to work through cases with us."

"CMS regulations will always change," she continued. "It's comforting to know we have a partner we can trust to help us thrive in any regulatory environment."

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- **Joyce Prunty, RN IQCI**  
*Continuum of Care Coordinator*

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Learn more about our services and the advantages clients have gained by leveraging Optum Executive Health Resources.

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