Utilization Management
Annual Summary
July 1, 2013 thru June 30, 2014

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<th>Inpt Admissions</th>
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<td>ICU/CCU Days</td>
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<td>Onsite Clinics</td>
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I. INPATIENTS

- Daily Inpatient Review with Wexford, Regional and Site Medical Directors, and DPSCS
- Daily concurrent review and coordination with hospitals and site Medical Directors
- Coordination of transfers and admissions to Bon Secours secured unit
- Use of InterQual and Milliman criteria provided during concurrent review
- Large case review of patients hospitalized greater than ten days
- Collegial discussion with all physicians on various treatment plans and disease management processes
- Discussion of infirmary bed assignments
- Identification of all readmissions from 30 days of last discharge date
- Identification of Trauma cases
- Identification of Federal complicated cases
- Weekend discharge coordination on Fridays with follow up discussion on Mondays
- Daily and monthly reports of all inpatients with extensive detail
- Report of I99 cases
- Spreadsheet of statistical data for State Stat
- Extensive monthly analysis of UM from UM Medical Director
- Report of ICU/CCU bed days
- Report of Cardiac Admissions and Inpatient Days
- Report of Infectious Disease Admissions and Inpatient Days
- Report of delay cases
- Report of denied Inpatient Days and Appeals provided on a monthly basis
- Report of readmission cases including categories of unavoidable, unrelated, preventable site/hospital and expected
- Report of “In and Out of Network” Hospitalization
- Report of trauma cases with sub categories of assaults, falls, sports/work injuries and self inflicted cases
- Trauma report created with paid claims to date for inpatient admissions per site and region
- Trending report developed for all inpatient admissions related to trauma
- Trending reports provided on a monthly basis for inpatients admissions per site and region with average length of stays identified
- Education to new physicians on the UM inpatient review process
- Identification of top diagnostic patterns per site and region produced on a monthly basis
- Report produce bi-monthly of all paid claims to date due to non-compliance with the Wexford UM process
- Conversion of monthly reports into excel format
- Quality audit of Inpatient RN provided monthly
- Diagnostic grouping of all Inpatient Admissions with an extensive EPHR review on each case.
- Monthly Incident Reports
- Third Party Liability Reports
- Review of Interstate Compact inmates
- Review of threshold inmates
- Review of county cases greater than $25,000
- Other reports and analysis per clinic request

Inpatient Days

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<th>Jan</th>
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II. **EMERGENCY ROOM**

- Retrospective review of all emergency room visits
- Identification of all preventable emergency room visits
- Education of all Medical Directors regarding the appropriate use of emergency room referral requests as well as infirmary usage
- Daily report of all emergency room visits per site in summary and detailed format
- Daily report in excel developed and forwarded on a daily basis in order to improve ER QA compliance.
- Medical Director QA Reporting of Emergency Room visit daily compliance
- Report of all preventable emergency room visits in summary and detailed format
- Summary per month of ER reporting non-compliance
- Report of diagnostic categories for all emergency room visits per site and region produced on a monthly basis
- Identification of all trauma cases per categories of assaults, sports/work injuries, falls, and self inflicted cases listed per site and region
- Trauma report created with paid claims to date for emergency room visits per site and region
- Trending report developed for all emergency room visits related to trauma
- Trending reports provided on a monthly basis per site and region
- Report produce bi monthly of all paid claims to date due to non-compliance with the Wexford UM process
- Quality audit of Intake Coordinator provided on a monthly basis
- Provided statistical information for State Stat on a monthly basis
- Diagnostic breakdown on all ER trips for State Stat
- Intensive review thru EPHR on all cardiac and neuro Emergency Room visits.

III. **MEDICAL INFIRMARY**

- Concurrent review of all medical infirmary admissions
- Daily and monthly reports of all medical infirmary admissions per site and region
- Coordination with site Medical Directors with infirmary admissions
- Collegial discussion between Wexford UM Medical Director and site Medical Director on appropriateness of infirmary usage
- Report of all appropriate and preventable admissions
- Summary report of infirmary admissions and total length of stays produced daily and monthly
- Detailed report of all infirmary admissions and total length of stays produced daily and monthly
- Report of diagnostic categories for all medical infirmary admissions per site and region produced on a monthly basis
- Quality audit of the Infirmary RN provided on a monthly basis
- Provided statistical information for State Stat on a monthly basis
- Creation of a daily infirmary acuity census of data collected from CMS and forwarded to OIHS.
• Compliance report on Infirmary site submission of logs generated on a monthly basis.

MENTAL HEALTH
• Concurrent review of all psychiatric acute infirmary admissions as well as sub-acute admissions
• Concurrent review of all non-acute infirmary admissions
• Daily and monthly reports of all mental health admissions per site, region, and service delivery area
• Coordination with site Medical Directors regarding infirmary admissions
• Bi-monthly treatment team review of questionable admissions and readmissions for quality improvement
• Report of all appropriate and preventable admissions
• Report of all readmissions with appropriate assignment of preventable, unavoidable, unrelated or expected categories
• Summary report of all mental health admissions and total length of stays produced daily and monthly
• Detailed report of all mental health admissions and total length of stays produced daily and monthly
• Report of diagnostic categories for all mental health admissions per site and region produced on a monthly basis
• Quality audit of the Infirmary RN provided on a monthly basis

IV. OFFSITE / ONSITE CARE
• Collegial review with Wexford UM Medical Director, UM Nurse, Site Medical Director and site scheduler of all offsite service requests
• Review of current authorized services to date provided during collegial review to assist in the appropriate treatment plans
• Use of InterQual and Milliman criteria provided during collegial review
• Medical research provided during collegial review of the current and optimal treatment of disease processes
• Coordination of medically necessary services during collegial review with contracted providers
• Identification of excessive physical therapy usage
• Education of UM collegial process to all site Medical Directors and covering physicians
• Identification of high volume outpatient elective surgery with provision of current standard of care treatment options
• Implementation of new contracted site vendors
• Reports of onsite and offsite services produced on a monthly basis per site and service delivery areas
• Reports of in- and out-of-network usage per sites and service delivery areas
• Initiation of an Incorrect Provider report when inmates are sent outside of the SDA without approval or to another provider that was not authorized.
• Report of diagnostic categories for all onsite/offsite services per site and region produced on a monthly basis
• Report of procedural categories for all outpatient surgical services per site and service delivery areas
- Report produce bi-monthly of all retrospective paid claims to date due to non-compliance with the Wexford UM process
- Weekly report of claims received due to non-compliance with the Wexford UM process
- Bi-monthly report of paid claims to date of all retrospective services due to non-compliance
- Quality audit of the Outpatient RN provided on a monthly basis
- Monthly submission of an incident report entailing all the SIR's.
- Assistance provided on a daily basis to CMS for scheduling of appointments

### Outpatient Referral Comparison

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