

Patient Choice Connection

Patient Choice News for Members

Spring 2004

Moving Toward a Paperless Health System

There has been considerable focus recently on the cost and quality of health care in this country. And it's for good reason. The U.S. spent \$1.7 trillion on health care in 2003—more than \$5,800 for every American. But according to one study, as much as 30 percent of care is unnecessary. And, another study by the Rand Corporation, found that nearly 50 percent of care does not meet best practice standards.

One promising technology has the potential to help reduce medical errors, improve quality and lower costs.

Electronic health records (EHRs), also known as electronic medical records and electronic patient records, are computerized systems that help physicians and other staff efficiently and effectively view, record and interact with patients' health information.

EHRs benefit both patients and doctors. For patients, the systems can dramatically improve quality of care and help to avoid medical errors. Some records available to patients, give them the ability to access their medical history, view lab results and obtain prescription drug refills online. Doctors can access patient information instantly, share information securely with other providers and specialists, create prescriptions electronically, receive alerts about possible drug interactions, and proactively manage patients with chronic illnesses.



Patient privacy is also enhanced since access to the record is password protected, allowing an audit trail of those who have used the record.

“It’s important for consumers to understand the value that information technology has in health care,” said Ann Robinow, vice president and general manager of Patient Choice. “EHR systems make the health care system more efficient, more patient-centered and, most importantly, improve how doctors care for patients.”

continued on page 7

In this issue:

Choices & Changes | 2
Area Hospitals Make Big Leaps
in Sharing Patient Safety Survey
Results

Health Help | 4
Women and Heart Disease

Health Help | 6
Are You Getting the Care You
Need?

Q & A | 8
Commonly Asked Questions and
Answers

In 1999, the Institute of Medicine released a report highlighting the impact of patient safety failures in inpatient settings. In this landmark report, it was projected that patient safety problems, such as getting the wrong dose or type of medication while hospitalized, results in up to 98,000 deaths per year. That’s more than 11 deaths every hour!

Errors made in the hospital are the eighth leading cause of death in our country. Reducing medical errors is the primary focus of The Leapfrog Group, a coalition of more than 150 public and private organizations that provide health care benefits to more than 34 million individuals.

Patient Safety Recommendations

Working with medical experts throughout the country to drive patient safety improvements in hospitals, The Leapfrog Group has identified three practices that it recommends hospitals should have in place. These practices have been proven to reduce some of the most common medical mistakes—and together could prevent approximately 60,000 hospital deaths and more than half a million serious medication errors every year.

The practices include:

1. Computer Physician Order Entry (CPOE)

Hospital requires doctors to use computerized physician order entry systems or CPOE systems.

CPOE systems used to order prescription medication and laboratory and imaging tests can greatly reduce the risk of prescription and text errors.

2. Evidence-based Hospital Referral (EHR)

Hospital has proven outcomes or extensive experience with specific procedures or diagnoses.

Studies show that the more experience a hospital has performing a specific surgery, the less likely the patient is to be the victim of a preventable medical mistake.

3. Intensive Care Unit Physician Staffing (IPS)

Hospital has an Intensive Care Unit (ICU) that is staffed at least eight hours per day by specially trained physicians and other caregivers.

Numerous studies have shown that ICUs staffed by critical care physicians, that take care of patients at least eight hours per day, have lower death rates and shorter ICU stays for patients.

Recognizing Hospital Progress

As part of its patient safety initiative, The Leapfrog Group has asked hospitals across the country to complete a survey indicating their progress in implementing the three recommended practices.

In Minnesota, all hospitals have elected to participate in this voluntary program and share information about their medical error prevention measures. While hospitals around the country are just beginning to implement the practices, several area hospitals have made significant progress and are highlighted in the table on the following page.*

Staying Informed

Hospitals are working on many programs to reduce preventable mistakes and make health care safer for their patients. You can access

Patient Choice Helpline Medical Benefits

Monday-Friday, 7:00 a.m. to 7:00 p.m.

1-877-390-7632

TTY (for the hearing impaired): 1-800-627-3529

Patient Choice Web Site

Your source for the most up-to-date information and access to online customer service features.

www.patientchoicesignature.com

Patient Choice Signature is administered by Wausau Benefits, Inc.

Medical Claims Submission:

Wausau Benefits, Inc.
Patient Choice Claims
P.O. Box 8013
Wausau, WI 54402-8013

All Other Correspondence:

Wausau Benefits, Inc.
Patient Choice Customer Service
P.O. Box 8013
Wausau, WI 54402-8013

in Sharing Patient Safety Survey Results

the information collected by The Leapfrog Group online at www.leapfroggroup.org, or by linking to it from www.patientchoicesignature.com.

You can use The Leapfrog Group information to help assess how effectively hospitals are implementing the three safety

practices, and to learn more about why you should care about hospital practices.

Later this fall, The Leapfrog Group will expand its survey from three to 30 quality and safety practices. The enhancement will provide even more useful information

with which you can evaluate hospital performance. Patient Choice will review these additional measurements in a future newsletter.

** Due to lower patient volume and scarcer resources, some measures endorsed by The Leapfrog Group are harder for rural hospitals to implement. Future surveys will be adapted with measures more suitable for smaller hospitals.* ●

1. Computer Physician Order Entry (CPOE) Implementation Progress	
Fully Implemented:	Good Progress Toward Implementing:
<ul style="list-style-type: none"> • Fairview Red Wing Health Services • Minnesota Valley Memorial-LeSeur 	<ul style="list-style-type: none"> • Austin Medical Center • Fairview Southdale Hospital • Fairview University Medical Center • Hennepin County Medical Center • Mayo Clinic–Rochester Methodist • Mayo Clinic–St. Mary’s • Mercy Hospital • Methodist Hospital • Northfield City Hospital • Regions Hospital • Ridgeview Medical Center • Unity Hospital
2. Evidence-based Hospital Referral (EHR) – is measured on procedure, condition, process excellence and volume for six identified high-risk procedures/conditions.	
Patient Choice affiliated hospitals with an overall score of 100% in one or more of these six conditions/procedures include:	
<ul style="list-style-type: none"> • Abbott Northwestern Hospital • Fairview Southdale Hospital • Fairview University Medical Center • Mayo Clinic–St. Mary’s • Mayo Clinic–Rochester Methodist 	<ul style="list-style-type: none"> • Regions Hospital • St. Cloud Hospital • St. Luke’s Hospital • United Hospital
3. Intensive Care Unit Physician Staffing (IPS) Implementation Progress	
Fully Implemented:	Good Early Stage Implementation:
<ul style="list-style-type: none"> • Fairview Southdale Hospital • Mayo Clinic–Rochester Methodist • Mayo Clinic–St. Mary’s • Methodist Hospital • Owatonna Hospital • United Hospital 	<ul style="list-style-type: none"> • Abbott Northwestern Hospital • Fairview University Medical Center • North Memorial Medical Center • St. Cloud Hospital • St. John’s Community Hospital (HealthEast) • St. Mary’s Medical Center

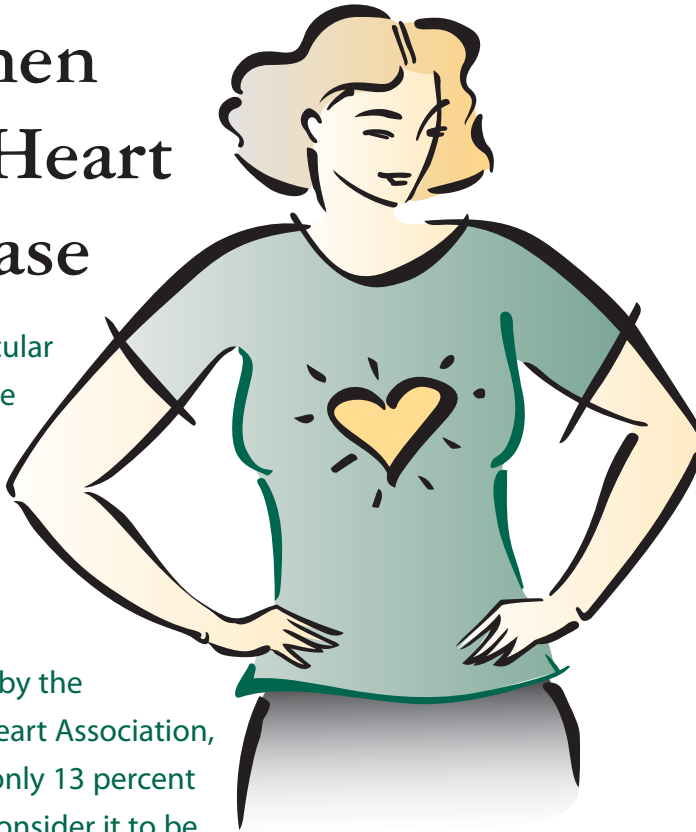
Women and Heart Disease

Cardiovascular disease is the number one killer of women in America. However, a new survey by the American Heart Association, found that only 13 percent of women consider it to be their greatest health issue.

In February, the American Heart Association (AHA) helped to raise awareness about heart disease in women with its updated *Evidence-Based Guidelines for Cardiovascular Disease Prevention in Women*. The revised guidelines issue a challenge for all women to take heart disease as a serious health threat and provide clear directions for women who want to take charge of their health.

The Warning Signs of a Heart Attack

Heart attack symptoms experienced by women can be different than those experienced by men. For women, the symptoms are often



more subtle, making it harder for doctors to diagnosis and treat.

Women also need to be aware that the appearance of new symptoms may be associated with heart disease. They should seek medical care to determine the cause of their symptoms, especially if they have known risk factors for heart disease. (See the risk factors listed below.)

Warning signs for women include:

- **Chest discomfort**—it may be steady or may come and go. It may feel like pressure, squeezing, or pain. Women are less likely to report this as pain, but rather as aching, tightness or pressure.

- **Shortness of breath**—it can be present with chest discomfort or by itself.
- **Sweating**—it may be a cold sweat.
- **Nausea.**
- **Lightheadedness or dizziness.**
- **Anxiety or a feeling of doom.**
- **Fatigue or trouble sleeping**—in one study of women who had had a heart attack, unexplained fatigue or trouble sleeping were experienced as much as a month prior to the attack.

Know Your Risk Factors

The chance of developing (or worsening) heart-related disease increases greatly with the number of risk factors you have. Working on the risk factors you can control or treat, can help to reduce your chance for heart disease. In fact, a recent issue of *Newsweek* magazine reported that unhealthy habits account for more than 82 percent of heart disease in women.

1. High blood pressure

Having high blood pressure forces your heart to work harder and can damage your arteries. The only way to know if you have high blood pressure is to have it checked. The ideal blood pressure goal for women (and men) is less than 120/80 mm Hg. This goal should be met through lifestyle approaches, such as healthy eating, regular exercise and maintaining an ideal weight. Blood

pressure medications may be needed when blood pressure is greater than or equal to 140/90 mm Hg, or even lower, if other blood pressure-related conditions or diabetes are present.

2. High cholesterol

Cholesterol is a fat-like substance that builds up inside the walls of arteries. Plaque forms and narrows blood vessels. This plaque can break off and block an artery in the heart.

Like high blood pressure, high cholesterol has no symptoms. The only way to know if you have this risk factor is to have a blood test. The ideal cholesterol goals for women (and men) are:

- LDL less than 100 mg/dL,
- HDL greater than 50 mg/dL,
- Triglycerides less than 150 mg/dL and
- Total cholesterol below 200.

The new AHA clinical practice guideline directs physicians to use a “10-year risk for heart attack” assessment tool to determine if a woman needs cholesterol-lowering medicine, in addition to dietary and lifestyle measures. All women who want to reduce this risk should adopt a healthy, low-fat, low-salt eating plan.

3. Tobacco

Tobacco use is the single most preventable cause of death in America. Women who smoke are simply more likely to die from heart disease or stroke. Women appear to be at greater risk from tobacco use than men. If you smoke, make a plan to quit. If you don't smoke, stay clear of second-hand smoke.

4. Physical inactivity

One of the major risk factors for heart disease is being inactive. The human body needs to move in order to operate efficiently. A mere 30 minutes of moderately intense activity on most days is all it takes to reduce this risk.

5. Overweight (or obese)

Individuals who are overweight, especially if the majority of excess weight is around their middle, have an increased risk for high blood pressure, high cholesterol, diabetes and heart disease. Strive to reduce or maintain your weight to achieve a body mass index (BMI) between 18.5 and 24.9 and a waist circumference less than 35 inches. For information about how to calculate your BMI, visit the National Institutes of Health's web site at www.niddk.nih.gov.

6. Diabetes

Women with diabetes have a two to four times higher risk of death from heart disease and stroke than women without diabetes. Getting diabetes under control can significantly reduce this risk. If your blood sugars are too high (a HbA1c of 7.0 percent or greater), talk to your doctor.

Questions To Ask Your Doctor

It's important to talk with your doctor about how to best minimize your risk for heart disease. Some questions you may want to ask include:

- What is my blood pressure? Is it at a healthy goal or target for me?
- What are my cholesterol levels? Am I meeting the healthy goals for cholesterol? If not, can I meet my goals with diet and exercise, or do I need medication?
- Should I take an aspirin as a preventive measure?
- What about hormone replacement therapy and the risk for heart disease?
- Can you help me to quit smoking?
- Is it safe for me to begin a regular program of physical activity? If so, what kind?
- Am I at a healthy weight?
- Am I at risk for developing diabetes? Is my diabetes considered well controlled?

Understanding the warning signs, knowing your risk factors, and making smart choices everyday can help you reduce your risk for cardiovascular disease.

For more information about heart disease in women, visit the AHA's web site at www.americanheart.org.

(Sources: Wausau Benefits, Inc.; AHA Guidelines: Evidence-Based Guidelines for Cardiovascular Disease Prevention in Women. February 2004; Unusual Fatigue May Be Warning Symptom of Heart Attack In Women. Circulation: Journal of the American Heart Association. November 4, 2003; Newsweek, Putting It All Together, May 10, 2004.) ●



Are You Getting the Care You Need?

In health care, quality means getting appropriate, timely, personalized care, that produces the best possible results. Knowing what high-quality care is and what services you should be receiving, can help you make better choices and get better health care overall.



Patient Choice has teamed up with HealthFront, a local, non-profit organization dedicated to helping individuals make better health care decisions, to sponsor *CompareYourCare*[™].

CompareYourCare is a set of online tools to help you understand what quality health care is and how to work better with your doctor to get it.

To access the site, go to www.patientchoicesignature.com, click on the “*Is your doctor treating you well?*” graphic and follow the instructions.

When you visit the site, you will be asked a few questions about your physical health and overall well-being. (To ensure your privacy, you will not be asked to provide any personally identifiable information.) Based on your responses, you’ll receive information such as health care tips that are customized for you and a checklist of items to help you communicate more effectively with your health care provider(s).

“The *CompareYourCare* site offers valuable information for both patients and providers,” noted Brad Montgomery, executive director of HealthFront. “Patients can obtain information specific to their background, health status, and the quality of their medical care to help them take charge of their health. Providers can learn what their patients think about the care they

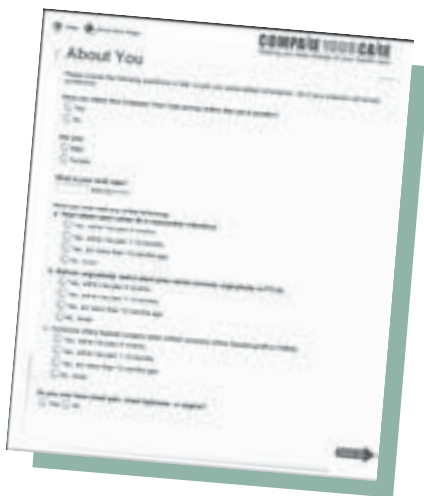
Moving Toward a Paperless Health System

continued from page 1

are delivering. They can also use the feedback to help identify areas in which they are doing well and those that may need improvement.”

You can use the site to:

- Find out if your doctor is performing all of the recommended tests and treatments
- Discover what you can do to improve your health care
- Learn what questions to ask your doctor
- Get expert tips on receiving high-quality health care



By becoming an active member of your health care team, learning more about your condition and asking your caregivers relevant and important questions about your care, you can improve the quality of care delivered to you and your family. Visit www.patientchoicesignature.com and check out *CompareYourCare* today. ●

Slow to Take Hold

Currently, only about 10 percent of physicians' offices in the United States, and even fewer hospitals, use EHRs, according to a recent Washington Post article. Cost, security and compatibility issues are just a few of the reasons the health care industry has been relatively slow to adopt them.

The Push Is On

But interest in the use of EHRs is growing. That's due, in part, to a report issued last year by the Institute of Medicine, a division of the National Academy of Sciences, which is a powerful organization that advises the federal government. The report, titled *Patient Safety: Achieving a New Standard for Care*, calls for "health care to adopt information technology systems that are capable of collecting and sharing essential information on patients and their care."

Moreover, just last month, it was announced that a new post would be created within the U.S. Department of Health and Human Services. This individual will be responsible for promoting the development of national standards so that all Americans can have an electronic medical record by 2014.

Monitoring Progress

Understanding the programs and services your Care System has in place to serve your needs can help you make better choices about your care. As the industry moves to adopt EHRs more widely, you can stay informed of local efforts. Last year, Patient Choice began collecting information about

Care Systems' progress toward implementing EHR systems. This information, as well as other details about Care System capabilities and services, are collected annually and published in the *Patient Choice Care System Comparison Guide*. You can view the most recent guide online at www.patientchoicesignature.com.

(Sources: *The Rand Corporation*, www.rand.org; *Washington Post*, *Doctors Advised to Keep Records Electronically*, 11/21/03; *Institute of Medicine*, www.iom.edu) ●

Care Systems Making Advances

Below are the Care Systems that reported having EHRs available in some or all of their sites.

- Allina Medical Clinic Care System
- CareNorth Health System
- Children's Physician Network
- Fairview Physician Associates
- Fairview Red Wing Health Services
- HealthPartners Affiliated
- HealthPartners Medical Group & Clinics
- MeritCare Health System
- Park Nicollet/Methodist Care System
- Minnesota Healthcare Network
- North Memorial Care System
- University of Minnesota Physicians Care System
- St. Mary's/Duluth Clinic Health System

● Available in all sites

○ Partly available or available only in some sites



Commonly asked questions and answers

Q: I heard that Patient Choice was recently acquired by Medica, a local health plan. Is it true?

A: Yes. Patient Choice was acquired by Medica in March. The acquisition means that Patient Choice's program in Minnesota and North and South Dakota will become one of the programs offered by the Medica organization.

Q: How will this acquisition affect the Patient Choice program in which I participate?

A: The Patient Choice program itself—the Care System model, its providers, benefits and services will continue to operate in the same manner. As a member of the Patient Choice program, administered by Wausau Benefits, you will not experience changes in the program.

- You will continue to have access to the same Patient

Choice network of Care Systems, providers, hospitals and other health care facilities.

- You will continue to use the same ID card that includes the Patient Choice logo.
- Your claims will continue to be processed by Wausau Benefits.
- Your customer service issues will continue to be handled by Wausau Benefits.
- Your benefits will not change as a result of the acquisition. ●

Patient Choice Connection

Patient Choice News for Members
Spring 2004

Wausau Benefits, Inc.
P.O. Box 8013
Wausau, WI 54402-8013

Connection, Patient Choice News for Members, is published quarterly.

NOTE: The information provided in Connection is for general education purposes only. It should never be a substitute for medical advice from your qualified health care provider.

PUBLISHER: Medica®, in connection with its Patient Choice Program

MANAGING EDITOR: Michelle Nied

LAYOUT: Lori Lindquist

MEDICAL ADVISOR: Nicholas Mischler, M.D.

CONTRIBUTING WRITER: "Women and Heart Disease" Kathy Bliss, R.N., B.S.N.

Copyright © 2004 Medica®

All rights reserved.

SIG 405 (05/04)

PRSR STD
US POSTAGE
PAID
PERMIT NO. 2431