

Milliman Criteria Inpatient Admission

Rev. ed. of: Essentials of managed health care / edited by Peter R. Kongstvedt. 5th ed. c2007.

Observation MedicinePrinciples and ProtocolsCambridge University Press

The seventh in a series of congressionally mandated reports on Gulf War veterans health, this volume evaluates traumatic brain injury (TBI) and its association with long-term health affects. That many returning veterans have TBI will likely mean long-term challenges for them and their family members. Further, many veterans will have undiagnosed brain injury because not all TBIs have immediately recognized effects or are easily diagnosed with neuroimaging techniques. In an effort to detail the long term consequences of TBI, the committee read and evaluated some 1,900 studies that made up its literature base, and it developed criteria for inclusion of studies to inform its findings. It is clear that brain injury, whether penetrating or closed, has serious consequences. The committee sought to detail those consequences as clearly as possible and to provide a scientific framework to assist veterans as they return home.

Advances in medical, biomedical and health services research have reduced the level of uncertainty in clinical practice. Clinical practice guidelines (CPGs) complement this progress by establishing standards of care backed by strong scientific evidence. CPGs are statements that include recommendations intended to optimize patient care. These statements are informed by a systematic review of evidence and an assessment of the benefits and costs of alternative care options. Clinical Practice Guidelines We Can Trust examines the current state of clinical practice guidelines and how they can be improved to enhance healthcare quality and patient outcomes. Clinical practice guidelines now are ubiquitous in our healthcare system. The Guidelines International Network (GIN) database currently lists more than 3,700 guidelines from 39 countries. Developing guidelines presents a number of challenges including lack of transparent methodological practices, difficulty reconciling conflicting guidelines, and conflicts of interest. Clinical Practice Guidelines We Can Trust explores questions surrounding the quality of CPG development processes and the establishment of standards. It proposes eight standards for developing trustworthy clinical practice guidelines emphasizing transparency; management of conflict of interest ; systematic review--guideline development intersection; establishing evidence foundations for and rating strength of guideline recommendations; articulation of recommendations; external review; and updating. Clinical Practice Guidelines We Can Trust shows how clinical practice guidelines can enhance clinician and patient decision-making by translating complex scientific research findings into recommendations for clinical practice that are relevant to the individual patient encounter, instead of implementing a one size fits all approach to patient care. This book contains information directly related to the work of the Agency for Healthcare Research and Quality (AHRQ), as well as various Congressional staff and policymakers. It is a vital resource for medical specialty societies, disease advocacy groups, health professionals, private and international organizations that develop or use clinical practice guidelines, consumers, clinicians, and payers.

Standard Hospital Admission Criteria

A Guide to Compliant Level of Care Determinations

A Practical Guide to Success in Managed Care

Principles and Practice of Hospital Medicine, 2nd Edition

Case Management

Gulf War and Health

In two freestanding volumes, Textbook of Neural Repair and Rehabilitation provides comprehensive coverage of the science and practice of neurological rehabilitation. Revised throughout, bringing the book fully up to date, this volume, Medical Neurorehabilitation, can stand alone as a clinical handbook for neurorehabilitation. It covers the practical applications of the basic science principles presented in Volume 1, provides authoritative guidelines on the management of disabling symptoms, and describes comprehensive rehabilitation approaches for the major categories of disabling neurological disorders. New chapters have been added covering genetics in neurorehabilitation, the rehabilitation team and the economics of neurological rehabilitation, and brain stimulation, along with numerous others. Emphasizing the integration of basic and clinical knowledge, this book and its companion are edited and written by leading international authorities. Together they are an essential resource for neuroscientists and provide a foundation of the work of clinical neurorehabilitation professionals.

Using sample administrative and clinical protocols that any hospital can use, this book gives a detailed account of how to set up and run an observation unit and reviews all medical conditions in which observation medicine may be beneficial. In addition to clinical topics such as improving patient outcomes and avoiding readmissions, it also includes practical topics such as design, staffing, and daily operations; fiscal aspects, such as coding, billing, and reimbursement; regulatory concerns, such as aligning case management and utilization review with observation; nursing considerations; and more. The future of observation medicine, and how it can help solve the healthcare crisis from costs to access, is also discussed. Although based on US practices, this book is also applicable to an international audience, and contains instructions for implementing observation in any setting or locale and in any type of hospital or other appropriate facility.

The leading textbook of hospital medicine - completely updated to reflect today's challenges A Doody's Core Title for 2021! Since its publication in 2012, Principles and Practice of Hospital Medicine, Second Edition has become the field's premier resource. Comprehensive, authoritative, and practical, this landmark text provides a solid grounding in clinical, organizational, and administrative areas central to the practice of hospital medicine. The Second Edition has been completely updated to reflect the evolving practice responsibilities of hospitalists. Examples include value-based medicine, expanded surgical content, bedside clinical reasoning, and a new segment devoted to rehabilitation and skilled nursing care. This edition also features a more accessible and streamlined full-color design enriched by more than 600 illustrations. Each clinical chapter opens with boxed Key Clinical Questions that are addressed in the text and summarized in hundreds of tables. Case studies demonstrate how to apply this information specifically to the management of hospitalized patients. Representing the expertise of more than two hundred renowned contributors, Principles and Practice of Hospital Medicine, Second Edition is logically divided into six sections: The Specialty of Hospital Medicine and Systems of Care Medical Consultation Rehabilitation and Skilled Nursing Care The Approach to the Patient at the Bedside Diagnostic Testing and Procedures Clinical Conditions in the Inpatient Setting Principles and Practice of Hospital Medicine, Second Edition is essential reading for clinicians who strive to optimize inpatient care and sharpen their leadership skills.

This text contains the core body of knowledge for case management practice as delineated by the Case Management Society of America (CMSA), the largest professional organization of case managers. The core curriculum provides a "synthesis of case management evolution," and presents essential elements, concepts, and vision for current and future case management practice. This edition is significantly expanded to reflect the dynamic changes taking place in case management. Each chapter is organized in a consistent format that includes learning objectives; introduction; important terms and concepts; key definitions; and references.

Geriatric Dermatology, An Issue of Clinics in Geriatric Medicine, E-Book

Volume 7: Long-Term Consequences of Traumatic Brain Injury

California Department of Corrections

The Medicare Recovery Audit Contractor Program

Joint Arthroplasty

CMSA Core Curriculum for Case Management

This practical, "hands-on" guide includes vital information every case manager and administrator of a case management program need to be successful. A useful resource for working in the changing face of healthcare, it addresses case managers in all settings with an emphasis on nurse case managers and their role in providing patient care and containing costs. Focusing on the "nuts and bolts" aspects of case management, it discusses the operations of case management programs based on the authors' first hand experiences. Case Management Tip boxes in each chapter highlight important tips and provide easy access to this information. Case studies in several chapters address possible situations the case manager may confront along with the most effective solutions. Key points at the end of each chapter summarize pertinent information. Appendices provide extensive examples of forms and multi-disciplinary action plans used in various healthcare settings. Six new chapters have been added on Utilization Management (Chapter 5), Transitional Planning (Chapter 6), Disease Management (Chapter 7), Application of Legal Concepts in Case Management Practice (Chapter 17), Ethical Issues in Case Management (Chapter 18), and Internet Resources and Case Management (Chapter 19). Content on Financial Reimbursement Systems has been expanded to cover community case management issues such as the new community reimbursement systems for ambulatory, home, and long-term care.

Information on community-based models is covered in more detail in response to growth in this area - including managed care, telephonic, rehabilitation, sub-acute, and long-term and emergency department case management. The chapter on Skills for Successful Case Management has been expanded to include a discussion of additional skills such as clinical reasoning, cost-effectiveness, and negotiation among others. Content on Developing Case Management Plans has been updated to include more content on community plans and a detailed review of the types of case management plans, including algorithms. The chapter on Quality Patient Care has been updated to include an historical review, minimum data sets, report cards, and the relationships between outcomes and quality. Quality indicators and organizations across the continuum are included. Appendices have been expanded to include community-based case management plans, home care plans, and long term care plans. A new CD-ROM with each book provides the entire text in an electronic format.

Each year, more than 33 million Americans receive health care for mental or substance-use conditions, or both. Together, mental and substance-use illnesses are the leading cause of death and disability for women, the highest for men ages 15-44, and the second highest for all men. Effective treatments exist, but services are frequently fragmented and, as with general health care, there are barriers that prevent many from receiving these treatments as designed or at all. The consequences of this are seriousâ€”for these individuals and their families; their employers and the workforce; for the nationâ€™s economy; as well as the education, welfare, and justice systems. Improving the Quality of Health Care for Mental and Substance-Use Conditions examines the distinctive characteristics of health care for mental and substance-use conditions, including payment, benefit coverage, and regulatory issues, as well as health care organization and delivery issues. This new volume in the Quality Chasm series puts forth an agenda for improving the quality of this care based on this analysis. Patients and their families, primary health care providers, specialty mental health and substance-use treatment providers, health care organizations, health plans, purchasers of group health care, and all involved in health care for mental and substanceâ€™use conditions will benefit from this guide to achieving better care.

Medicare fraud is big business, but while only a few profit from intentional malfeasance, the Centers for Medicare & Medicaid Services is now taking a closer look at everyone. The Medicare Recovery Audit Contractor Program, already infamously known as the RAC, swings into full operation in 2010 and every healthcare provider that receives payment under any of the Medicare fee-for-service payment systems will be subject to RAC scrutiny. And scrutinize, they will... . Instead of developing another bureaucracy, the government has turned the job of auditing over to outside firms whose payment will be based exclusively on finder fees for recouping improper payments. There will be little tolerance for poor record keeping or gray areas of coding. Written by medical billing guru and Lean accounting expert, Duane Abbey, The Medicare Recovery Audit Contractor Program: A Survival Guide for Healthcare Providers explains all that is required to prepare and successfully defend against inappropriate RAC audit recoveries. Using the same succinct style that always makes his writing so accessible, Abbey illustrates his lessons with simple case studies placed in the context of a fictitious community whose population is served by a hospital, clinics, a nursing facility, and other providers all seeking to maintain compliance and profitability. In discussing RAC guidelines, this resource — Shows how to identify overpayment areas and associated compliance issues Details a systematic problem-solving process relative to RAC processes Addresses resource requirements including new personnel, such as RAC specialists Includes planning models for developing compliance departments Provides an extensive glossary to make sense of medical billing's alphabet soup of acronyms While the book works well as a stand-alone reference for those seeking advice on RAC audits, readers will also discover that this volume extends the lesson of Abbey's classic Compliance for Coding, Billing & Reimbursement, Second Edition , making this book a natural companion for those wanting to fully explore the role of compliance and Lean accounting in medical billing.

Foundations of Health Information Management, 5th Edition is an absolute must for any student beginning a career in HIM. By focusing on healthcare delivery systems, electronic health records, and the processing, maintenance, and analysis of health information, this engaging, easy-to-understand text presents a realistic and practical view of technology and trends in healthcare. It reads you for the role of a Registered Health Information Technician, who not only maintains and secures accurate health documentation, but serves as a healthcare analyst who translates data into useful, quality information that can control costs and further research. The fifth edition follows the CAHIIM 2018 HIM Associate Degree curriculum competencies, preparing you for the RHIT credentialing exam. EHR samples, practice exercises, and new Bloom's-level Competency Milestone features help ensure mastery of all competencies. Clear writing style and easy reading level make reading and studying more time-efficient, and are ideal for 2-year associate degree HIM programs and career schools. Chapter learning objectives are tied to the CAHIIM curriculum competencies to allow instructors to teach to the test ? and prepare you for success on the credentialing exam. Professional Profile boxes highlight key HIM professionals within chapter discussions. SimChart and SimChart for the Medical Office EHR samples demonstrate electronic medical records in use. Career Tip boxes instruct you on a course of study and work experience required for the position. Chapter summaries and reviews allow for easy review of each chapter's main concepts. Full-color design and illustrations make content more appealing and easier to learn. Competency Check-In exercises at the end of every main section in each chapter encourage you to review and apply key concepts. UPDATED! Content organized to follow CAHIIM 2018 HIM Associate Degree curriculum competencies, allowing you to study content that matches your credentialing exam. NEW! Updated material fully addresses the newest curriculum competencies with the most contemporary picture of the health care landscape and job market. NEW! Cardinal focus on electronic health record processes in both ambulatory and acute care settings with new screens and images. UPDATED! Revised Statistics and Data Analytics chapter reinforces the role of the HIM professional as a data analyst, and includes introductory material on research methodologies. NEW! RHIT review question engine with custom exam and timer functionalities so you can study for the RHIT exam by category, or create timed mock exams. EXPANDED! Additional application exercises offer more opportunities to strengthen your understanding. UNIQUE! New Bloom's-level Competency Milestone features assure instructors of your mastery of all competencies. NEW and UPDATED! Expanded coding and reimbursement content with hands-on exercises. NEW! Ethics Challenge and Critical Thinking exercises assess your learning. EXPANDED! Additional photos and images visually demonstrate HIM concepts and real-life scenarios.

A User's Guide

Clinical Practice Guidelines We Can Trust

Winning Strategies for Clinical Practice

CURRENT Practice Guidelines in Inpatient Medicine

Your Guide to Passing the Certified Case Manager Exam

Textbook of Neural Repair and Rehabilitation

The book provides a thorough review of the U.S. health care system, including its organization and financing, care delivery, recent reforms, and an evaluation of the system's performance.

Publisher's Note: Products purchased from Third Party sellers are not guaranteed by the publisher for quality, authenticity, or access to any online entitlements included with the product. The first resource dedicated to providing concise summaries of the most clinically relevant inpatient care guideline summaries CURRENT Practice Guidelines in Inpatient Medicine, 2018-2019 is written to spare busy physicians, nurse practitioners, physician assistants, and medical students from having to wade through full-length practice guidelines in order to provide high-quality care for hospitalized adults. With content drawn from reliable sources such as major professional societies and government agencies, each section of the book outlines the guidelines surrounding initial assessment, acute management, and subsequent care for conditions commonly encountered in the hospital setting. CURRENT Practice Guidelines in Inpatient Medicine, 2018-2019 strikes the perfect balance between brevity and clinical necessity, delivering exactly the amount of information needed – no more, no less

The Second Edition of this comprehensive "how to" text has been completely revised and updated. This text outlines the basics of case management and illustrates some of the pitfalls encountered in the field of case management. The book provides information on the new Case Management Standards, supplies standard definitions and guidelines of case management for the practicing case manager, and presents information on caring for clients in a wide variety of health care settings. New to this edition--chapters focusing on Quality Reviews and Risk Management with a strong emphasis on Continuous Quality Improvement (CQI), ethical and legal issues, and various case studies.

This online Clinics series provides evidence-based answers to clinical questions the practicing hospitalist faces daily. The tenth issue in our growing online database, edited by James Newman, covers essential updates in the following topics: Long QT; Noninvasive ventilation; Fever of Unknown

Origin; Post Bariatric Surgery; Hospital Fall Prevention; Mimics of Cellulitis; UR Essentials; Neutropenic fever; Nephrotic syndrome; and Chronic Spinal Cord Injury.

Geriatric Emergency Medicine

Registries for Evaluating Patient Outcomes

Insights and Strategies

Health Information - E-Book

Hospital Capacity Management

Medical Quality Management

Volume 2 of the Textbook of Neural Repair and Rehabilitation stands alone as a clinical handbook for neurorehabilitation.

The care of patients with eating disorders involves a comprehensive array of approaches. These guidelines contain the clinical factors that need to be considered when treating a patient with anorexia nervosa or bulimia nervosa.

Risk management for health care institutions involves the protection of the assets of the organizations, agencies, and individual providers from liability. A strategic approach can result in significant cost savings. Risk Management in Health Care Institutions: A Strategic Approach offers governing boards, chief executive officers, administrators, and health profession s devise a successful risk management program. Experts in risk management have contributed comprehensive, up-to-date syntheses of relevant topics to assist with practical risk management strategies.

How good is the quality of health care in the United States? Is quality improving? Or is it suffering? While the average person on the street can follow the state of the economy with economic indicators, we do not have a tool that allows us to track trends in health care quality. Beginning in 2003, the Agency for Healthcare Research and Quality (AHRQ) will produce a report on the quality of health care delivery in the United States. AHRQ commissioned the Institute of Medicine (IOM) to help develop a vision for this report that will allow national and state policy makers, providers, consumers, and the public at large to track trends in health care quality. Envisioning the National Health Care Quality Report offers a framework for health care quality measures that should be included in the report, suggestions on the criteria for selecting measures, as well as advice on reaching the intended audiences. Its recommendations could help the national health care quality report to become a mainstay of our nationâ€™s effort to improve health care.

A Survival Guide for Healthcare Providers

Handbook of Healthcare Operations Management

Observation Medicine
Conditions of Participation for Hospitals
Essentials of Managed Health Care
Risk Management in Health Care Institutions

As US health care systems undergo a period of transformative change, so too will emergency care, and more specifically emergency departments. This transformation will include: The development of new diagnostic, therapeutic, and information technologies A growing need to prepare and respond to emerging public health threats The expansion of the role of allied health professionals to address the workforce crisis Novel expectations for care coordination The fundamental economics of emergency care under new payment models, and The key relationship with American law. Emergency Care and the Public's Health explores the complex role of emergency care in the context of these changes and as an increasingly vital component of health care systems both within and outside the US. From an expert emergency medicine team, this new title is a reference for emergency care and critical care providers, allied health professionals and hospital administrators. It is also relevant for public policy and healthcare policy professionals.

This issue of Clinics in Geriatric Medicine features expert clinical reviews on Geriatric Emergency Medicine which includes current information on topics such as palliative medicine and emergency care, alternative management strategies, transitions of care, the emergency department observation unit and the older patient, generalized weakness, altered mental status, trauma management, acute pain management, acute visual changes, orthopedic emergencies, dizziness, palpitations, acute stroke syndromes, abuse and neglect, and electrolyte and endocrine emergencies.

Hospital Capacity Management: Insights and Strategies details many of the key processes, procedures, and administrative realities that make up the healthcare system we all encounter when we visit the ED or the hospital. It walks through, in detail, how these systems work, how they came to be this way, why they are set up as they are, and then, in many cases, why and how they should be improved right now. Many examples pulled from the lifelong experiences of the authors, published studies, and well-documented case studies are provided, both to illustrate and support arguments for change. First and foremost, it is necessary to remember that the mission of our healthcare system is to take care of patients. This has been forgotten at times, causing many of the issues the authors discuss in the book including hospital capacity management. This facet of healthcare management is absolutely central to the success or failure of a hospital, both in terms of its delivery of care and its ability to survive as an institution. Poor hospital capacity management is a root cause of long wait times, overcrowding, higher error rates, poor communication, low satisfaction, and a host of other commonly experienced problems. It is important enough that when it is done well, it can completely transform an entire hospital system. Hospital capacity management can be described as optimizing a hospital 's bed availability to provide enough capacity for efficient, error-free patient evaluation, treatment, and transfer to meet daily demand. A hospital that excels at capacity management is easy to spot: no lines of people waiting and no patients in hallways or sitting around in chairs. These hospitals don ' t divert incoming ambulances to other hospitals; they have excellent patient safety records and efficiently move patients through their organization. They exist but are sadly in the minority of American hospitals. The vast majority are instead forced to constantly react to their own poor performance. This often results in the building of bigger and bigger institutions, which, instead of managing capacity, simply create more space in which to mismanage it. These institutions are failing to resolve the true stumbling blocks to excellent patient care, many of which you may have experienced firsthand in your own visit to your hospital. It is the hope of the authors that this book will provide a better understanding of the healthcare delivery system.

Foundations of Health Information Management, 4th Edition is an absolute must for any student beginning a career in HIM. Balancing comprehensive coverage with an engaging, easy-to-understand tone, this text focuses on healthcare delivery systems, electronic health records, and the processing, maintenance, and analysis of health information to present a realistic and practical view of technology and trends in healthcare. It prepares you for the role of a Registered Health Information Technician who not only files and keeps accurate records, but serves as a healthcare analyst who translates data into useful, quality information that can control costs and further research. With new SimChart and SimChart for the Medical Office samples, the new 2014 AHIMA outcome-based competencies, and more exercises, this fourth edition puts you in a position to succeed on the RHIT certification exam. Clear writing style and easy reading level makes reading and studying more time-efficient, and is ideal for two-year associate degree HIM programs and career schools. Chapter learning objectives are tied to the American Health Information Management Association's (AHIMA) HIM domains and subdomains to allow instructors to teach to the credentialing exam — and prepare you for the exam. Separate legal chapter covers HIPAA privacy regulations and emphasizes the importance of HIPAA compliance in today 's healthcare system. Statistics chapter gives new students a foundation for learning. Four-color design and illustrations make content more appealing and easier to learn. Exercises at the end of every main section in each chapter encourage you to review and apply key concepts. Career Tip and Professional Profile boxes give you a broader view of the field and show you the many career options you have upon graduation and certification. Chapter summaries and reviews allow for easy review of each chapter 's main concepts. Robust appendices, including sample paper records, electronic documentation, and demonstration of Microsoft Excel, equip you with all the extras you need to enter the HIM world. NEW! Content mapped to 2014 AHIMA CEE competencies and domains so you can prepare for the current health information environment and the RHIT exam. NEW! SimChart and SimChart for the Medical Office samples feature screenshots from EHRs to demonstrate electronic medical records in use. NEW! More exercises give you additional opportunities to practice your knowledge of material. NEW! AHIMA competency mapping included in the front of book to provide instructors and students with instant access to the AHIMA domains and competencies needed to prepare for the RHIT exam. NEW! Classroom handouts can be used in the classroom or as homework, and include a variety of exercises.

CCM Certification Made Easy

Envisioning the National Health Care Quality Report
A Strategic Approach
Methods and Applications
Management of a Strategic Resource

From the Preface: Collectively, the chapters in this book address application domains including inpatient and outpatient services, public health networks, supply chain management, and resource constrained settings in developing countries. Many of the chapters provide specific examples or case studies illustrating the applications of operations research methods across the globe, including Africa, Australia, Belgium, Canada, the United Kingdom, and the United States. Chapters 1-4 review operations research methods that are most commonly applied to health care operations management including: queuing, simulation, and mathematical programming. Chapters 5-7 address challenges related to inpatient services in hospitals such as surgery, intensive care units, and hospital wards. Chapters 8-10 cover outpatient services, the fastest growing part of many health systems, and describe operations research models for primary and specialty care services, and how to plan for patient no-shows. Chapters 12 – 16 cover topics related to the broader integration of health services in the context of public health, including optimizing the location of emergency vehicles, planning for mass vaccination events, and the coordination among different parts of a health system. Chapters 17-18 address supply chain management within hospitals, with a focus on pharmaceutical supply management, and the challenges of managing inventory for nursing units. Finally, Chapters 19-20 provide examples of important and emerging research in the realm of humanitarian logistics.

The introduction of total joint arthroplasty throughout the world has contributed manifold benefits to patients who suffer from joint diseases. Concurrently, however, there has been an increase in revision surgery. Many orthopedic surgeons agree that durability of prostheses is an eternal problem. In particular, periprosthetic osteolysis recently has been identified as one of the serious problems affecting prosthetic dura bility. To improve durability, osteolysis and many other problems must be investi gated and solved both experimentally and clinically with respect to such aspects as prosthetic material, design, and biological and biomechanical behavior. This book comprises 37 papers that were presented by orthopedic surgeons and biomedical engineers at the 28th Annual Meeting of the Japanese Society for Replace ment Arthroplasty, held in March 1998 in Kanazawa, Japan. The volume is thus a compilation of the latest knowledge about the pathogenesis and reduction of osteolysis and wear, newly developed total hip prostheses, and other current topics of total knee arthroplasty. We earnestly hope that this book will be of benefit to clinicians and researchers, and that it will contribute to the creation of more durable total joint prostheses in the future. SHINICHI IMURA v Contents Preface " V List of Contributors. XI Part 1 Wear and Pathogenesis of Osteolysis Friction and Wear of Artificial Joints: A Historical Review N. AKAMATSU , 3 Matrix Degradation in Osteoclastic Bone Resorption Under Pathological Conditions .

This guide to successful practices in observation medicine covers both clinical and administrative aspects for a multinational audience.

This comprehensive volume provides a practical framework for evaluation, management and disposition of this growing vulnerable patient population.

Textbook of Neural Repair and Rehabilitation: Volume 2, Medical Neurorehabilitation

Federal Register

Section 1557 of the Affordable Care Act

The Hospital Guide to Contemporary Utilization Review

Theory and Practice

Observation Services

This report concludes that overall, Corrections’s payments for hospital care services have risen \$59.4 million from FY1998-99 through 2002-03, and grew at an average rate of 21% per year, outpacing the nat. consumer price index average of 8% annual growth for hospital services during this same period. The reasons for this growth can be attributed to the combination of more expensive health care and to Corrections’s increased use of contracted hospital facilities. Analysis indicates that increases in its inpatient hospital payments are driven primarily by more expensive services, whereas increases in its outpatient hospital payments are driven by increases in both the price of services and number of hospital visits. Charts and tables.

This comprehensive medical textbook is a compendium of the latest information on healthcare quality. The text provides knowledge about the theory and practical applications for each of the core areas that comprise the field of medical quality management as well as insight and essential briefings on the impact of new healthcare technologies and innovations on medical quality and improvement. The third edition provides significant new content related to medical quality management and quality improvement, a user-friendly format, case studies, and updated learning objectives. This textbook also serves as source material for the American Board of Medical Quality in the development of its core curriculum and certification examinations. Each chapter is designed for a review of the essential background, precepts, and exemplary practices within the topical area: Basics of Quality Improvement Data Analytics for the Improvement of Healthcare Quality Utilization Management, Case Management, and Care Coordination Economics and Finance in Medical Quality Management External Quality Improvement — Accreditation, Certification, and Education The Interface Between Quality Improvement and Law Ethics and Quality Improvement With the new edition of Medical Quality Management: Theory and Practice, the American College of Medical Quality presents the experience and expertise of its contributors to provide the background necessary for healthcare professionals to assume the responsibilities of medical quality management in healthcare institutions, provide physicians in all medical specialties with a core body of knowledge related to medical quality management, and serve as a necessary guide for healthcare administrators and executives, academics, directors, medical and nursing students and residents, and physicians and other health practitioners.

Following the AHIMA standards for education for both two-year HIT programs and four-year HIA programs, Health Information: Management of a Strategic Resource, 4th Edition describes the deployment of information technology and your role as a HIM professional in the development of the electronic health record. It provides clear coverage of health information infrastructure and systems along with health care informatics including technology, applications, and security. Practical applications provide hands-on experience in abstracting and manipulating health information data. From well-known HIM experts Mervat Abdelhak, Sara S. Grostick, and Mary Alice Hanken, this book includes examples from diverse areas of health care delivery such as long-term care, public health, home health care, and ambulatory care. An e-book version makes it even easier to learn to manage and use health data electronically. A focus on the electronic health care record helps you learn electronic methods of organizing, maintaining, and abstracting from the patient health care record. Learning features include a chapter outline, key words, common abbreviations, and learning objectives at the beginning of each chapter, and references at the end. Unique! Availability in the e-book format helps you in researching, abstracting, and managing data electronically. A study guide on the companion Evolve website includes interactive exercises and cases containing real-life medical records, letting you apply what you've learned from the book and in the classroom. Evolve logos within the textbook connect the material to the Evolve website, tying together the textbook, student study guide and online resources. Well-known and respected authors include Mervat Abdelhak and Mary Alice Hanken, past presidents of the American Health Information Management Association (AHIMA), and Sara S. Grostick, a 2007 AHIMA Triumph Award winner for excellence in education. Self-assessment quizzes test your learning and retention, with answers available on the companion Evolve website. Did You Know? boxes highlight interesting facts to enhance learning.

We are extremely pleased to tell you that CCM Certification Made Easy has been updated to it's Second Edition, and includes all the new material recently added to the CCM Exam. Every subdomain is covered on the exam. CCM Certification Made Easy is clearly the most complete CCM Exam prep book you can buy.Up to date - every area has been revisited for this updated edition to keep pace with the substantial changes in healthcare and the CCM Exam.Includes a condensed versions of the CCMC's Glossary of Terms that are an essential resource to pass the CCM Exam.Includes a website link to download a free companion workbook and study strategies that countless case managers have used to pass the CCM Exam at no extra charge.

Emergency Care and the Public's Health

The Case Manager's Survival Guide

USA, Second Edition

Principles and Protocols

Health Systems in Transition

Practice Guideline for the Treatment of Patients with Eating Disorders

Volume 1 of the Textbook of Neural Repair and Rehabilitation covers the basic sciences relevant to recovery of function following injury to the nervous system.

This User's Guide is intended to support the design, implementation, analysis, interpretation, and quality evaluation of registries created to increase understanding of patient outcomes. For the purposes of this guide, a patient registry is an organized system that uses observational study methods to collect uniform data (clinical and other) to evaluate specified outcomes for a population defined by a particular disease, condition, or exposure, and that serves one or more predetermined scientific, clinical, or policy purposes. A registry database is a file (or files) derived from the registry. Although registries can serve many purposes, this guide focuses on registries created for one or more of the following purposes: to describe the natural history of disease, to determine clinical effectiveness or cost-effectiveness of health care products and services, to measure or monitor safety and harm, and/or to measure quality of care. Registries are classified according to how their populations are defined. For example, product registries include patients who have been exposed to biopharmaceutical products or medical devices. Health services registries consist of patients who have had a common procedure, clinical encounter, or hospitalization. Disease or condition registries are defined by patients having the same diagnosis, such as cystic fibrosis or heart failure. The User's Guide was created by researchers affiliated with AHRQ's Effective Health Care Program, particularly those who participated in AHRQ's DECIDE (Developing Evidence to Inform Decisions About Effectiveness) program. Chapters were subject to multiple internal and external independent reviews.

Observation services insight from the industry's top expert Here is the essential guide for understanding observation services and the most recent regulatory guidance for inpatient admission. Author Deborah K. Hale, CCS, CCDS, uses case studies and real-life examples to examine regulatory guidelines and fiscal management, and also explains how to manage multiple payers and find an easier way to achieve reimbursement for observation services. You will also learn about the roles of nurses and physicians in observation services and how to foster an effective team approach for compliance and appropriate reimbursement. With your copy of Observation Services, Third Edition, you'll learn how to: - Assign proper level of care using real-life case studies - Implement an effective and compliant policy in accordance with the Medicare rules for observation services and instruction - Implement a payer-specific policy in compliance with the multiple payers' rules for observation services and instruction - Determine improvement opportunities and understand how to use internal and external data - Decipher the dos and don'ts for Condition Code 44 What's new in the Third Edition? - CMS and American Hospital Association interaction regarding observation use - Updated guidelines on the process for use of Condition Code 44 and proper billing - The 2011 version of ST PEPPER - New and improved strategies for accurate billing - New examples of provider liable claims - New CMS instructions required for payment - New policy and procedure examples and case studies Topics covered include: - Determining the right level of care - The consequences of incorrect level of care determination - Correcting level of care determinations - Condition Code 44 - Using data to determine improvement opportunities - The role of the physician advisor - Strategies for achieving accurate reimbursement - The Medicare appeals process Downloadable tools include: - Appeal letter templates - Level of care decision-making flowchart - Revised PEPPER report example - Observation pocket card reference - UR physician documentation templates for Condition Code 44 - Transmittal 299 Condition Code 44 - MLN Matters Clarification Condition Code 44 SE0622 Here are just a few of the tools and forms you'll find in Observation Services, Third Edition. - Appeal letter templates and sample reports - Site of service decision-making flowchart - Non-physician review worksheet - Transmittal 299 Condition Code 44 - MLN Matters Clarification Condition Code 44 SE0622 - Top volume Medicare MS-DRGs You'll receive instructions to download these and all of the forms and tools so you can use them right away!

Section 1557 is the nondiscrimination provision of the Affordable Care Act (ACA). This brief guide explains Section 1557 in more detail and what your practice needs to do to meet the requirements of this federal law. Includes sample notices of nondiscrimination, as well as taglines translated for the top 15 languages by state.

Foundations of Health Information Management - E-Book

Volume 3, Issue 2, An Issue of Hospital Medicine Clinics E-BOOK

Improving the Quality of Health Care for Mental and Substance-Use Conditions

More Expensive Hospital Services and Greater Use of Hospital Facilities Have Driven the Rapid Rise in Contract Payments for Inpatient and Outpatient Care

Summary Report Fiscal Year