UPDATES!

e-Newsletter by Iatric Systems, Inc.

August, 2010



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Message from Senior Management

How to eat an Elephant Oompa-Loompa Style



Ken Hoffman, Vice President - Interface/Integration

What's an Oompa-Loompa you ask? Remember Roald Dahl's Charlie and the Chocolate Factory or the movie versions starring Gene Wilder (1971) and Johnny Depp (2005)? The golden ticket? Chocolate for life? The everlasting gobstopper? Those adorable people that worked happily around the chocolate factory, always singing about the plight of one of the naughty children? Those are Oompa-Loompas.

Of course eating an elephant is nothing I promote, but the figurative challenge is easy to imagine. We've all been faced with challenging projects that seem overwhelming or something you might want to push off until after you retire (like upgrading to MEDITECH 6.0). Obviously I'm joking about the MEDITECH 6.0 challenge, but you get the picture. Here's my "eating an elephant" story and it involves you.

For 20 years Iatric Systems has been working with hospitals and vendors to integrate or interface 650+ products with your HIS. The complexities of integrating an emergency department information system or physician practice electronic health record bi-directionally can give us all goose bumps. There are so many questions about workflow and business rules that make us all pause for a moment. With our years of experience working on complex integration and interfacing and our Oompa-Loompa style approach to tackling challenges, we can help you achieve success.

So you ask "What's an Oompa-Loompa approach?" Fair question – it's our product focused approach to implementing complex integration. We assign knowledge experts to your specific integration project, from certified project managers to programmers in MAGIC, Client/Server and 6.0. Like the Oompa-Loompas that squeezed the blueberry juice from Violet Beauregarde after she consumed experimental chewing gum, we have experts that can alleviate the anxiety of complex integration. The common answer to "how do you eat an elephant" is one bite at a time. With our Oompa-Loompa approach, we have multiple knowledge experts assigned to complex projects to take several bites at a time. I promise our knowledge experts won't break out into song about your project – unless you ask them to. And if you tell our staff I called them Oompa-Loompas, I will have to deny it.

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Matrix Links Meaningful Use Rules Directly to Solutions

As mentioned in our last issue, the drive to meet the 2011 Stage 1 Criteria for Meaningful Use deadline is on and it's putting enormous pressure on every organization involved in healthcare.

At Iatric Systems, we know that the very thought of tackling these requirements -- with staff limitations and a looming deadline -- can seem overwhelming. That's why we created a handy **Meaningful Use Matrix** to help ease your path to compliance.

This Matrix presents a quick, accurate list of each rule and the corresponding Iatric Systems solution you can deploy to help meet that rule. It couldn't be easier.

Get your copy of our **<u>Meaningful Use Matrix</u>** now.

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How to Meet New Privacy Mandates

In 2009, the HITECH Act expanded HIPAA patient privacy rules. One of these new rules is the requirement that healthcare facilities report breaches of patient data within 60 days or face penalties.

Webinar: How to Keep Your Hospital Compliant with HIPAA and HITECH Patient Privacy Requirements

Register now for a one-hour in-depth presentation on steps and methods your organization can take

to meet these new mandates.

You'll learn . . .

- What constitutes a breach
- What should be included in an effective breach-monitoring process
- · How breach information should be investigated, reported and maintained

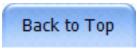
You'll also learn about advanced technology that can ease the burden of meeting these mandates.

This is an issue that can't be ignored.

To register, select a date below and follow the registration instructions.

Date	Day	Time
<u>08-24-2010</u>	Tuesday	3:00pm Eastern
<u>09-01-2010</u>	Wednesday	2:00pm Eastern
<u>09-09-2010</u>	Thursday	3:00pm Eastern
<u>09-21-2010</u>	Tuesday	2:00pm Eastern

For more information please contact Pamela Brock at <u>Pamela.Brock@iatric.com</u> or 978-805-3170.



Upcoming Events

Iatric Systems will be exhibiting and/or speaking at the following events in **September**:



InSight 2010 Annual Conference

The Road to Success: Education, Collaboration and Optimization

September 15 - 17, 2010 Colorado Convention Center (Denver, CO) Booth #807 - Stop by to win an iPad

Northwest Medication Informatics Symposium (NMIS)

Presented by Inland Northwest Health Services in collaboration with eHealth Initiative. September 15 - 16, 2010 Davenport Hotel (Spokane, WA) **The Hall of Doges**

MUSE Event - Philadelphia

MEDITECH 6.0 Summit

September 21 - 23, 2010 Hyatt Regency Philadelphia at Penn's Landing (Philadelphia, PA) **Speaker:** Frank Fortner presenting Staying FOCUSED in a Mad, Mad, Mad, Mad World! **Speaker:** Jen Kelly presenting A First Look at the New FOCUS Report Designer

82nd AHIMA Convention and Exhibit

September 25 - 30, 2010 Gaylord Palms Hotel and Convention Center (Orlando, FL) **Booth #525 - Stop by to win an iPad**

For more information, please contact us at <u>info@iatric.com</u>.

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Revenue Cycle Improvement Tips

Kay Jackson, Marketing Manager - Financial

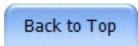
What does denial management really mean at your hospital?

Every hospital needs a Denial Management team in place. To me, denial management comes into play any time a payer does not adjudicate a claim to reimburse your facility 100% of the contract price. Carriers are trying to reduce their contract liability, so unless your facility monitors denial activity, your accounts receivable (AR) will suffer. From missing authorization numbers to the 28 adverse events Aetna refuses to pay, hospitals need to track each reduction. Tracking allows your Denial Management team to review denials by payer and resolution outcome. Reporting the reduction by payer is critical for contract negotiations and creating a plan for how to correct errors.

Attend the education session I presented at MUSE, "Developing the Denial Process" to learn more. To register to attend one or all of these 30 minute Revenue Cycle Powercasts, simply select a date below and follow the instructions:

Date	Day	Product	Time
<u>09-16-2010</u>	Thursday	Denial Process	2:00pm EST
<u>09-29-2010</u>	Wednesday	<u>Visual SmartBoard_w/</u> <u>Revenue Cycle Improvement</u>	2:00pm EST
<u>09-30-2010</u>	Thursday	<u>IatriScan</u>	2:00pm EST

For more information, please contact Pamela Brock at Pamela.Brock@iatric.com or 978-805-3170.



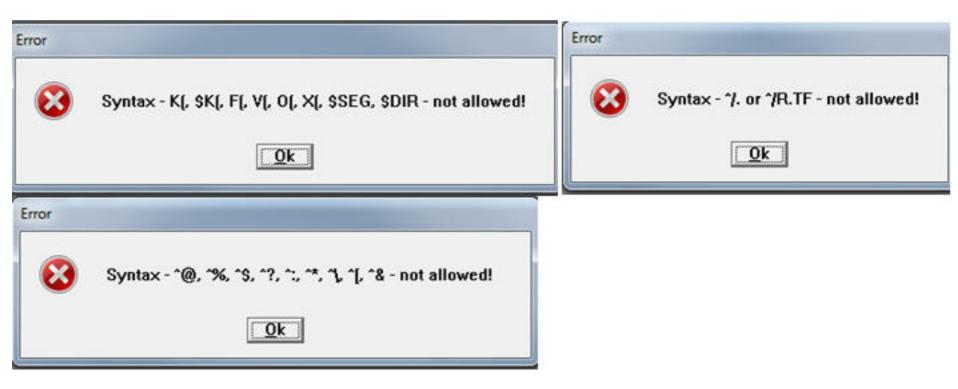
NPR Report Writing Tips



Joe Cocuzzo, Vice President - NPR Services

Syntax Checker Issues (MAGIC or Client/Server)

If you copy a programmer's NPR report (a MEDITECH standard report) into a customer R/W version (if the "INIT REPORT FROM STD" will cooperate) or if you make your own version and then copy the macros from the standard report into your own versions, there are often syntax violations such as:



The MEDITECH Customer Report Writer translator includes a check of source code for certain strings that could (although they may not) indicate that your code writes to the database or writes to certain structures that MEDITECH prefers be left alone. The checking is not perfect, and when you copy a standard macro, the coding often triggers the syntax checker and you cannot file the macro and proceed with programming the changes you want to make to the standard report until you eliminate the "violations." The MEDITECH code you copied does not usually actually write to the database (a few standard reports do log activity or flag a report as printed but those are unusual exceptions). Typically, the MEDITECH programmers have just done programming in a style that triggers the Customer R/W syntax checker.

Additionally, a recent change to the translator checks object code for syntax violations, eliminating the possibility of using sub-macros in a way to get around syntax checker issues. When this checker is triggered, the translator will say "expunging object code" and your report will crash if run without a fix to get your macro code to successfully translate. These types of violations are not included in the "syntax checker" report discussed in this tip, but the error message will show the line of code as it is detected so you will have less trouble finding the spot to change.

Unfortunately, the checker only reports one error per filing attempt, and does not show you the line of code where the error occurred. It is possible, but tedious, to try to pick these out by eye, but sometimes they are difficult to find and you would need to resort to deleting more and more of the copied source code to narrow down to the line of code triggering the checker.

Of course, with some NPR programming, there is a better way.

We have a report in NPR.REP called NPR.REP.zcus.is.rw.syntax.review.updated (MAGIC version) or NPR.REP.zcus.is (C/S version) that will list all the syntax violations and the line of code in one easy step.

The "updated" version for MAGIC has a change which fixes a problem with the lookup on the macro due to a MEDITECH change to the id program since an original version was written as part of our MUSE tips and tricks from 2005. You enter the name of your report (lookup available) and then identify the macro to check (lookup also available of the report's macros):

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How do you fix the syntax violations? Here are some general methods:

For @Kill or K or \$K, the MEDITECH standard report was most likely cleaning up some temp structure, and you can substitute a DO loop as follows:

K(/SOME.LIST) or @Kill(/SOME.LIST) should be replaced by DO{>/SOME.LIST[SUB]^SUB ""^/SOME.LIST[SUB]}

The > syntax will loop thru all levels of a structure and by looping this way and writing "" to / you will do exactly the same thing that the Kill did in MEDITECH's code, except it runs a bit more slowly.

The syntax checker will let you write to / except for /.

For DO{@Next(@event.date) The syntax checker (MAGIC only is fooled in this way) thinks that you are going to do ^@, but since @event.date translates as a subscript, you really are not.

Just remove the @ signs of the subscripts and the syntax checker will be happy.

For ^/. "not allowed!", just put the structure you want to write to in a variable, like so:

".PHA.SITE"^XXX,

"MAIN"^/[XXX]

If you need to call a fragment report in PHA or LAB, you sometimes need to specify a site or the fragment will not work. While the syntax checker programmers at MEDITECH are busy trying to stop you, the NPR Report Writer group (for years) has been showing you how to get around the syntax checker so your fragments will work.

For the @Cursor.on and @Cursor.off commands, replace with $D(14,14)^{\#}$ for @Cursor.on and $D(14,0)^{\#}$ for @Cursor.off. The NPR translator macros write to /.P in some fashion and that is why the syntax checker will no longer let you use them as ^/.P would be a syntax violation.

We hope you find this utility program and these tips on dealing with "syntax violations" useful. You can find the syntax checker utility report in our <u>report library</u>.

You can find additional NPR Tips on our website at <u>http://www.iatric.com/information/npr-tips.asp</u>, as well as information about our <u>on-site NPR Report Writer Training</u> and <u>NPR Report Writing Services</u>.

Read Joe's blog posts at **MEDI-Talk**.

Upcoming NPR Training Opportunities:

We are pleased to offer NPR Report Writer training sessions at host sites this fall. Details and a course description are available on our website at <u>http//www.iatric.com/npr/class-schedule.asp</u>.

Location	Level	Instructor	Date	Cost
John Muir Health 1400 Treat Blvd. Walnut Creek, CA (Oakland area)	Beginner/Intermediate	Richard Serrano	Sept. 22-24, 2010	\$750
Children's Specialized Hospital New Brunswick, NJ	Beginner/Intermediate	Joe Cocuzzo	Oct. 20-22, 2010	\$750

To subscribe for email notifications for new classes, please follow this link: <u>http://www.iatric.com/npr/class-schedule.asp</u>.

For more information or to reserve a seat, please contact Karen Roemer at 978-805-3142 or email <u>karen.roemer@iatric.com</u>.

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Follow us on our blogs: <u>MEDI-Talk</u> <u>Patient Privacy Matters</u>

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