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In Brief

Santa Rosa Family Medicine.

According to OSHPD, the funds are used to develop new curriculum, develop clinical training sites and other expenses excluding tuition. The agency estimates it costs \$150,000 to train a single resident.

Grants, awarded for residency training through OSHPD's Brown-Song program have totaled \$21 million since it was initiated in 2003.

Blue Shield of California Awards \$24.7 Million

San Francisco-based **Blue Shield of California** has awarded \$24.8 million in incentive bonuses to medical groups and physicians in its provider network.

Blue Shield is granting \$13 million through the **Integrated Healthcare Association's** P4P program. Another \$7 million will be awarded through its own performance improvement rewards program, which focuses on managing ER and inpatient resources and generic drug utilization. An additional \$4.8 million was granted in the form of other incentives.

Jones: Medi-Cal Drawdown Near

A fee program that will allow California's hospitals to draw down an additional \$3.2 billion in Medi-Cal funding should be operational by early next month, according to Assemblyman **Dave Jones, D-Sacramento**.

Jones' office said that the **CMS** has been satisfied about all major issues surrounding the fee. Jones authored key pieces of legislating authorizing the fee and how it should be implemented.

Blue Shield ACOs May Go Statewide

Plans to Build on Success of Sacramento Pilot

The success of an accountable care organization pilot program in Sacramento overseen by **Blue Shield of California** has prompted the San Francisco-based insurer to consider expanding it statewide.

The ACO pilot, launched earlier this year in conjunction with **Catholic Healthcare West** and **Hill Physicians Medical Group**, has resulted in a 4% reduction in hospital admissions, a 9% decrease in average length of stay and a 24% drop in readmissions, translating to a \$14 million annual savings. The 38,000 participants are retired government workers who receive their coverage from the **California Public Employees Retirement System**.

The numbers, presented at last week's **Healthcare Financial Management Association** in Long Beach last week, were initially questioned by a Hill Physicians spokesperson, but officials at both Blue Shield and CalPERS confirmed the data this week.

Blue Shield and the providers have invested in a network of electronic medical records and such practices as providing full

prescriptions upon discharge, something few insurers are willing to pay for.

"\$14 million in savings is a lot of success, even when we're doing it in a clunky manner," said **Juan Davila**, Blue Shield's senior vice president of network operations, adding that some changes to clinical processes in the ACO have yet to be fully refined. "Our goal is to expand it."

Davila said that the ACO would likely expand into the San Joaquin Valley in the first part of 2011, involving more CHW hospitals. "That's a slam dunk," he said.

A CHW spokesperson declined comment, but confirmed that it was in negotiations with Blue Shield.

However, Davila said Blue Shield is also in talks with medical groups such as **Gemcare** and **PrimeCare** in the Inland Empire, and hospital operators such as the Providence network in the Los Angeles area, **Adventist Health** and **Tenet Healthcare**.

"We hope to have four to six ACOs up and live by the end of next year, depending on discussions, and 20 by 2014," he said.

Kaiser Opens Much Of EMR System

Release of CMT to Help on Meaningful Use Regs

Oakland-based **Kaiser Permanente** has opened up the technology that helps operate its elaborate electronic medical record system to other developers.

The donation of the technology, known as the **Convergent Medical Terminology**, was made to the **International Health Terminology Standards Development Organization**. It will be distributed in the United States through the **U.S. Department of Health and Human Services**.

CMT essentially governs and knits together Kaiser's EMR system, known as **KP HealthConnect**.

"This donation...from Kaiser Permanente addresses that critical need by making it easier for health professionals and patients to create standardized data in electronic health records," said Health and Human Services Secretary **Kathleen Sebelius**. "It can help

physicians provide better evidence-based care, while directly supporting the administration's investment in bringing information technology to healthcare."

The donation of CMT is also hoped to expedite the development of EMR systems and meaningful use compliance in smaller practices and hospitals, according to a joint statement issued by Kaiser and HHS.

"This will support efficient patient care, as well as the production and export of standardized data needed to support quality assessment, decision support, exchange of data for patients with multiple healthcare providers, and public health surveillance," the statement read.

A dollar value of the donation was unknown. Kaiser spokespersons did not immediately respond to phone calls and e-mails seeking comment.