

KeaneCARRIER

News journal for Keane Care Clients

SPRING 2011

Inside this Issue

- Latest industry news
- Preparations for LTC EHR certification
- Keane NetSolutions GL/AP
- MDS 3.0 features
- New! KNS eDocuments and KNS Quality Assurance

eCommunications

The KeaneCARRIER is available on the Internet with late-breaking updates at:

www.keanecarrier.com

If you haven't already, please sign up for your free Insider password from The Insider menu at:

www.keanecare.com

When you sign up we request your e-mail address so we can notify you by e-mail of software releases, developments, and when a new issue of this newsletter is available online.

Keane Care Blogs!

Keane Care staff update our blogs as news happens. Check them often at the Insider:

- MDS 3.0 blog
- AR-Billing RAM blog
- Clinicals blog
- Keane NetSolutions

Visit the NEWS Hot off the Press blog for regulatory updates at www.keanecare.com



Up and running in 4 hours

LTC Dashboard Ready Out-of-the Box

Keane Insight gives you the best of both worlds – dashboard software complete with pre-built indicators and the ability to build your own indicators, alerts, and reports. Because Keane Care built it for LTC, many providers will find it's exactly what they need out of the box. And they can see for sure in four hours – the time it takes to add Keane Insight to your system. Sample shown at right.

Providers with a more technical mindset, will see the out-of-the box version as a starting point and customize the pre-built indicators, create new ones, and add alerts.

By offering Keane Insight in three packages, it can satisfy all LTC professionals' preferences for how they receive business and clinical intelligence.

continued on page 4



Your dashboard displays a variety of key indicators in different formats with the ability to drill down to details.



Sign up Today!

2011 Keane Client Conference

Smooth Sailing through the Changing Tides of Healthcare IT

July 24-26, 2011

Newport Beach Marriott Hotel & Spa
Newport Beach, CA

See the LTC agenda on page 14

www.keaneclientconference.com

News Front: *Regulatory and Industry Developments*

The 5010 Claims Standard

All HIPAA-covered entities need to transition from Version 4010/4010A1 to Version 5010 electronic transaction standards by January 1, 2012. Keane Care has programmed for it and we are in the process of testing. We have begun testing with the Medicare and Errata versions as well as with some Medicaid EDI departments.

Our current testing includes submitting 5010 Errata version test files to Medicare FFS contractors and continued testing with Medicaid EDI departments according to their specific testing guidelines and schedules.

Production claims cannot be submitted until the successful completion of Errata version testing. After we've done that we will begin releasing the required updates and instructions so you can move forward with the transition.

This will begin with **KNS 6.4.3SP6 and VistaKEANE RAM 2.6SP3**. Be sure to carefully review the release notes for additional information.

If you submit claims directly to your Medicare MAC/FI or Medicaid EDI, you should have already contacted them to become familiar with their implementation schedules and testing requirements.

You may be required to complete new trading partner agreements or other documents required to submit 5010 version files.

For more on Keane Care's progress, see the report on the Insider homepage (password required):

www.keanecare.com/insider/5010-progress-report.pdf

Nursing Home Compare

Changes are coming to CMS' Nursing Home Compare Website per the Affordable Care Act and MDS 3.0.

The Quality Measures and Five Star ratings currently on the Nursing Home Compare Website will be "frozen" until October 2011. Those measures were calculated using MDS 2.0 data submitted in the first three quarters of 2010.

Quality Measures based on MDS 3.0 data are expected to be available in early 2012. The address for CMS' Nursing Home Compare Website:

www.medicare.gov/NHCompare

In July 2011, Nursing Home Compare will include information about the number of substantiated complaints received and number of enforcement actions. The Survey and Certification letter of March 18, 2011, outlines these changes. Read it here:

www.cms.gov/surveycertification/geninfo/downloads/SCLetter11_17.pdf

Proposals for 2012 Payment

CMS is considering several options before setting the 2012 Medicare payment rates for SNFs. One calls for an increase in payment; one calls for a decrease. The options are included in the April 28, 2011 Proposed Rule.

One option is the standard rate update that would provide an increase of \$530 million, or 1.5 percentage points. The increase is based on applying the 2012 market basket index of 2.7 percent reduced by 1.2 percentage points to account for greater efficiencies in nursing homes. This provision was called for in the Affordable Care Act.

The other option CMS is considering is to adjust for an unexpected spike in FY 2011 payments, beginning October 1, 2010. Under this option, CMS would restore overall payments to their intended levels, reducing FY 2012 payments to Medicare SNFs by \$3.94 billion, or 11.3 percent lower than FY 2011.

In implementing RUG-IV, CMS adjusted payment levels so it would not change overall payment. Instead, the new system appears to have resulted in a significant increase in Medicare expenditures.

For example, CMS has found that patients are being classified into one of the highest-paying RUG-IV therapy groups more than 40 percent of the time (as compared to less than 10 percent projected by CMS).

CMS will continue to review RUG-IV claims data and will evaluate recalibrating the payment system for the FY 2012 Final Rule.

In addition, the Rule includes proposals regarding disclosing facility ownership and organization structure, revising the definition and requiring allocation of group therapy, adding an assessment for changes in therapy intensity, and revising the policy on line-of-sight and therapy students.

Public comments will be accepted until June 27. We will keep you current in our Hot Off the Press blog posted on our homepage: www.keanecare.com

The Proposed Rule is posted at: www.ofr.gov/OFRUpload/OFRData/2011-10555_PI.pdf

continued on page 12

Contents

News Front.....	2
Keane Insight	4
<i>Out-of-the-box LTC dashboards</i>	
EHR for LTC on its way.....	5
<i>Preparing for CCHIT certification</i>	
KNS eDocuments.....	7
<i>Adding paper to the paperless system</i>	
MDS 3.0 Better than Ever	8
<i>CAAs, Care Plan library, 672/802</i>	
KNS Quality Assurance	9
<i>Incident Reporting, Infection Control</i>	
KNS AP and GL.....	10
<i>New versions with new features</i>	
Therapute Update.....	13
<i>Tools for MDS 3.0 and RUG-IV</i>	
Northeast Sales Manager ...	13
<i>Meet Colleen Rougeaux</i>	
Keane Client Conference	14
<i>Agenda overview</i>	
User-Defined Assessments..	15
<i>Grane Healthcare shares templates</i>	

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Keane Care News *from the Director of Product Support*

Now that the MDS 3.0 transition is over it's great to be back to a proactive mode working on several initiatives to enhance our service to you.

First, we're excited about eLearning. Our expert trainers have recorded their demonstrations of tasks using the software and posted them on the Insider for 24/7 access. Each one lasts about 15 minutes.

We hope you find them useful as refreshers and as training aids for new staff. We plan to make eLearning sessions for all applications this year and so far have posted MDS 3.0, ADT, and Funds.

In Product Support we're focused on quality assurance activities to reduce the time it takes us to return your calls and to resolve issues.



2011 Keane Client Conference

We're looking forward to seeing many of you at the Keane Client Conference, July 24-26 in Newport Beach, CA. We try to include something for everyone; this year, besides education and networking, we have Cirque du Keane and a golf tournament. Take a look at the agenda overview on page 14.

The fee is \$325 per person with a \$225 rate for early birds (registered by May 20) and groups of four attendees. For full session descriptions and to register, visit the Keane Client Conference Website at:
www.keaneclientconference.com

5010 Implementation

For our Development and Product Support staff who work with AR-Billing and RAM, the big project for 2011 will be moving to the Version

continued on page 12

New Keane Logo

Keane, Inc. was acquired by NTT Data on January 3, 2011. Keane, Inc. will continue as a separate



legal entity headquartered in the United States. For 45 years, Keane has been an IT services firm with distinguished project management credentials.

Keane Care is part of the Keane Healthcare Solutions Division, providing application software to LTC and hospitals.

NTT Data is a subsidiary of Nippon Telegraph and Telephone Corporation, offering a broad range of IT services. For more on Keane, visit www.keane.com.

Regional Service Offices

Pacific
800-426-2680

Midwest
800-652-7719

Eastern
877-393-6965

csonline@keanecare.com

Dashboard for LTC Business and Clinical Intelligence

continued from cover

Dashboard software has become a necessity for executives and managers because it pinpoints statistics needed for top performance. It eliminates searching through reports for trends and exceptions. Data finds you.

Keane Care recognized the need for a turnkey dashboard with indicators unique to LTC. We started with a framework from Altosoft and built key indicators based on our experience and input from our clients.

In a nutshell Keane Insight:

- Delivers business and clinical intelligence in a dashboard view
- Provides up-to-date exception reporting with drill down to details
- Uses data already in your system
- Supports multiple facilities and users
- Combines data from different modules
- Assists in Quality Assurance
- Helps communicate issues such as falls, census, and collections

User-friendly Navigation

Keane Insight information is organized in a logical hierarchy. The main dashboard reports on multiple areas of your business through Key Performance Indicators (KPIs).

For a different perspective, you can quickly change the KPI to a different format, starting with a right click. Formats include tables, bar charts, pie charts, and gauges.

Keane Insight empowers your staff and increases efficiency by providing instant information on an employee's focus, such as nursing or billing.

Analysis Tool

Your initial view of your dashboard is critical for identifying issues that need your attention. It gives you tools that help you analyze an issue and access supporting data by:

- Changing to a different view, such as a comparison or consolidation of multiple sites, one facility, a department, or unit
- Filtering and sorting by factors such as station, payer, and facility
- Drilling down to source data such as a resident, note, or invoice

Keane Insight is installed with multiple pre-loaded dashboard pages, each with four to seven KPIs displayed as charts that focus on vital subjects for LTC (*see sample below*).

Alerts: Clinical & Financial

Never miss a critical event – clinical or financial – with Keane Insight Alerts. Your system is scanned for certain conditions, events, or dates. If they occur, you're notified by email or alert charts. Alerts are valuable for:

- **Exception reporting:** when an entry falls outside a specified range. Valuable for financial statistics such as cash receipts, and AR aging, they can be lifesavers for blood glucose levels, and late medications.
- **Reminders** of scheduled events such as collections follow-up and care plan goal review.
- **Event monitoring**, such as an admission, progress note category of dehydration, PRN documentation missing, or Medicaid cash receipt.

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Dashboards that Deliver a 360-degree View



For a different view from your dashboard click on a colored section of a chart. A window opens where you can specify what you want to see such as drilling down to source data or changing to a different dimension.

For example when you click on the Medicare section of the Admission by Pay Type chart you can drill down to the Medicare residents and then change your view to show Medicare residents by level of care in a pie chart.

Keane Insight

continued from previous page

Keane Insight Packages

Keane Insight is available in Standard, Premium, and Unlimited packages. You can upgrade from one package to another at any time.

Standard Package

The Standard Package includes a main dashboard with an overview of critical census, financial, and clinical topics. Indicators from KNS AP/GL will be added soon. Additional pages cover those topics in more detail (see the list at right).

With the Standard Package you receive tools for setting up user-defined Alerts.

Premium Package

The Premium Package expands on the Standard, adding 26 more topic-based pages. Keane Insight Designer is included to give you tools to create and modify existing dashboards using the events and KPIs already defined and included in the dashboards.

Unlimited Package

This package includes the contents of the Premium Package and adds Keane Insight Studio that gives you tools to capture any record or event you want from KNS tables and Excel spreadsheets containing data from KNS. It includes the Dashboard Designer you use to implement how you want to display or report events and KPIs.

An optional Third-Party Licensing component supports building reports from third-party databases or from spreadsheets containing data retrieved from third-party software.

Next Step

Interested in learning more about Keane Insight? Contact your Keane sales manager or Jill Moss at Jill.Moss@Keane.com or 800-426-2675. ■

Keane Insight Standard Package

Main Dashboard

Census – Yesterday, includes Hold Days
Cash Receipts – Current Month by Payer Type
Census by Payer Type – Yesterday
AR Aging
AR Aging by Category
Today's Resident Birthdays
Resident Cash Receipts – Current Month vs. Previous Month
Medication Administration by class, Top 20 – Past Month

Census Dashboard

Census Days by Pay Type – Past Week
Census – Yesterday with Hold Days
Census Days by Payer Type – Yesterday
Admissions – past 5 days
Discharges – past 5 days
Resident Mix by Level of Care – Top 60 – Yesterday
Today's Birthdays

Clinical Dashboard

PRN Medications without Follow-up Documentation
ADL Alert – ADL score <5 past 30 days
UDA Assessments Due in next 7 Days
Medication Orders – Top 30 in Past Week
Medication Administration – Top 30 – Past 24 Hours
Care Plan Goal Review due within 7 Days
Care Plan Conference Planning – Goals Due in 8-30 Days



Accounts Dashboard

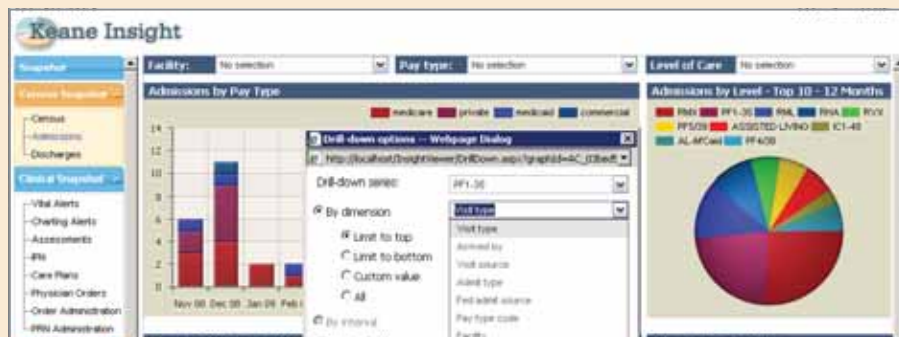
Resident Cash Receipts – by Payer, Current Month
Cash Receipts – Current Month
Charges by Payer Type – Current Month vs. Previous
Charges by Payer Type – Past 4 Months
Adjustments by Description – Top 15 – Current Month
Adjustments by Payer – Current Month

AR Dashboard

Collection Activity Due Today
AR Aging
Aging by Category
Aging by Payer Type
AR Aging by Payer Type and Aging Category
End-of-Month Aging Compared to Current

User-Defined Alerts

Different Dashboards a Click Away



This partial dashboard page shows how your dashboard displays a variety of key indicators in different formats. To change to different indicators, simply click on a topic from the left-hand menu for another group of charts.

What you should know now to prepare LTC Electronic Health Record is on its Way

LTC providers and software vendors have been working toward Electronic Health Records (EHR) since 2004 when President Bush announced an initiative calling for healthcare providers in different settings to be able to share patients' health records electronically in ten years.

"Meaningful Use" Incentive

The EHR initiative received a big boost in 2009 when incentive payments were funded for hospitals and physician practices that achieved "meaningful use" (MU) of EHR. The payments are part of ARRA, the American Recovery and Reinvestment Act. Long-Term and Post-Acute Care providers were excluded from the incentive payment program.

Before ARRA, work had been proceeding towards EHR under the direction of the DHHS Office of the National Coordinator for Health Information Technology. That office defined the capabilities needed and certification criteria were developed for hospitals and physicians.

In August 2010 CCHIT®, the Certification Commission for Health Information Technology, was officially authorized by the federal government as a certifying body of EHR technology systems supporting "meaningful use" and qualifying providers for the incentive programs.

Fast Track to EHR

Due to the financial incentives associated with MU the certification criteria for hospitals and physician practices were put on a fast track and by early 2011 hundreds of systems have been certified.

When registration for providers opened for the Incentive Program on January 3, 2011, more than 21,000 hospitals and physicians initiated registration in the first month.



Strategic Plan for LTPAC

Long Term and Post Acute Care (LTPAC) was included in the Strategic Plan 2011-2015 for Federal Health Information Technology released by ONC in March 2011 (page 20):

"Strategy I.C.3: Support health IT adoption and information exchange in long-term/post-acute, behavioral health, and emergency care settings. Providers working in long-term and post-acute care (LTPAC) and behavioral health settings are essential partners in patient care coordination.

"ONC, CMS, and the Assistant Secretary for Planning and Evaluation (ASPE) will collaborate to address quality measures and evolving clinical decision support opportunities that will promote appropriate exchange of health information in LTPAC and behavioral health care settings for optimal coordination of care."

The Strategic Plan is posted at the ONC Website:

<http://healthit.hhs.gov>

Long-Term Care Progress

Although LTPAC providers do not have a financial incentive at this time, LTPAC providers and CCHIT agreed that there was reason to work on EHR technology criteria specific to LTPAC.

They agreed to move forward separately from the federal government to independently define criteria for LTPAC EHR technology while making sure that critical interoperability and security criteria would not conflict with federal requirements.

Keane & CCHIT Certification

LTPAC IT vendors seek CCHIT certification as a "seal of approval" that their software meets CCHIT's stringent criteria for LTPAC EHR software. Certification gives providers a new method to distinguish among vendors in the LTPAC IT market.

Keane and other LTC IT vendors are readying their systems for CCHIT certification. As of May 2011, no vendors had begun the process.

To achieve certification LTPAC software vendors must follow a multi-step process that includes demonstrating their product's ability to meet the criteria by following test scripts that simulate actual medical situations. In addition, actual use of the software at provider sites is verified by CCHIT before full certification is achieved.

Suzy Greenly, Keane Care's Manager of Product Management and Documentation has been tracking criteria development. "It is rewarding for all of us on the Development

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Certification for LTC EHR

continued from previous page

Team to know that our direction is in synch with EHR.

”Keane NetSolutions already meets many of the criteria. We have some work to do including releasing our new eDocuments application in August 2011. It will meet the criteria that providers have the ability to import scanned materials.”

Down to Brass Tacks: Certification Criteria

The document titled “CCHIT Certified 2011 LTPAC EHR Certification Criteria” dated July 26, 2010, includes 38 categories in 45 pages.

This listing of LTPAC EHR technology criteria is the to-do list for vendors seeking certification.

For LTPAC facility staff, it is a list of the software features and functions that the CCHIT Work Group has determined will be needed by LTPAC providers who wish to participate in the electronic exchange of information.

Using Keane NetSolutions application names, an LTC EHR system would include ADT, MDS 3.0, Care Plan, Physician Orders, eMAR, Drug Interactions & Patient Education, Interdisciplinary Progress Notes, User-Defined Assessments, point-of-care interface, eDocuments, and Keane Insight.

The list of criteria includes items required for 2011 EHR technology certification as well as criteria intended for the future. The full list of LTPAC EHR Certification Criteria dated July 26, 2010 is available to download at: ■

www.stage.cchit.org/certify/2011/cchit-certified-2011-long-term-post-acute-care-ltpac-ehr

Introducing KNS eDocuments

We'd like you to meet Keane NetSolutions eDocuments – another tool to eliminate paper storage in your facility. With it you will be able to add documents and graphic files to a resident's Electronic Medical Record (EMR), even when they're on paper. You can upload:

- Scanned paper documents saved in pdf format
- Photos in formats such as jpg, gif and bmp
- Files received via email attachment in pdf format

Scheduled for release this Summer, Keane NetSolutions eDocuments meets criteria for a certified LTPAC EHR.

When you add a file to a resident's EMR it's date-stamped, assigned a file type, and stored in the folder you specify.

File labels are facility-defined, such as advance directives, admission

records, payer eligibility, dietary, MDS, social services, and lab results.

You can add a note regarding the file. Upload files during pre-registration and add them to the resident's EMR at registration.

Open the eDocuments pop-up page (*sample below*) by right clicking at any time, from Snapshots, the main menu, and from links within applications.

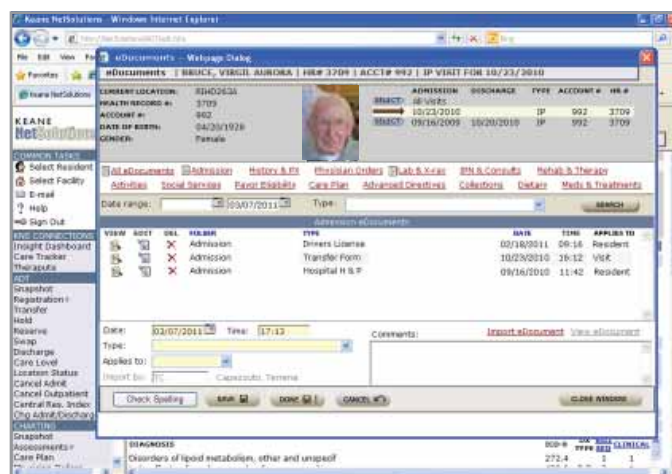
Access to the imported files is protected by security levels set by the facility's System Manager.

You can attach an eDocument to a progress note, care plan intervention, or order using the associated Keane NetSolutions application.

More information

For more information, contact your sales representative or Jill Moss at Jill.Moss@Keane.com or 800-426-2675. ■

KNS eDocuments adds “paper” forms to paperless records



In this sample screenshot you can see that eDocuments opens on top of the page where you're working. From this page you can import, view, and delete documents. Simply close the page to return to where you were.

On the Other Side of the Transition to MDS 3.0

With version 6.4.3 SP4 released in January 2011, Keane Care's MDS 3.0 software includes the features and functions we built into our MDS 2.0 software over the years.

We hope you are getting reacquainted with these great features released for both Keane NetSolutions and KNS Lite. Use them to work the CAAs, import data collected at the point-of-care, complete the CMS-672/802, and create care plans. Here is an overview.

Working the CAAs

The Care Area Assessment/Care Area Triggers (CAA/CAT) replace the RAPs. Page 2 of Appendix C of the RAI Manual clarifies that facilities are required to use "resources" such as the included worksheets to assess triggered CAAs, and facilities could choose to use other resources.

Our development team made the CAA worksheets accessible from Section V of MDS 3.0 (*samples at right*). Content you add with the worksheets is "attached" to the MDS for future reference and not submitted to CMS.

Additional features for the CAAs are scheduled for later this year. As always, if you have suggestions for features, please tell us.

MDS 3.0 Care Plan Library

Keane's MDS Care Plan Library was updated for MDS 3.0 and released in KNS 6.4.3 SP4 and VistaKEANE 4.3.2 SP1. With it, when you begin a care plan in Keane Care Plan software you have a list of Suggested Problems based on MDS 3.0 responses.

This library of problem, goal, and intervention statements is purchased separately.

Interface to CareTracker

As Platinum Partners, Resource Systems, CareTracker's developer, and Keane Care offer a maximum amount of data through their interface. CareTracker is a point-of-care charting product. The interface delivers:

- Resident and census data exported to CareTracker from ADT
- Vitals collected with CareTracker exported to the EMR. Vitals including temperature, pulse, blood glucose, and oxygen saturation are secured by KNS Exchange and an SSL certificate.

Responses for MDS 3.0 items exported to Keane Care MDS software for these MDS 3.0 Sections:

- D – Mood (D0200, D0300, D0500, D0600)

- E – Behavior (E0200, E0300, E0500, E0600, E0800, E0900, E1000)
- G – Functional Status (G0110 [all ADL items], G0120)
- H – Bladder and Bowel (all except H0200 A,B)
- K – Swallowing (K0200, K0300 - height, weight, weight loss)
- O – Special Treatments (O0500- Restorative Nursing)

Survey Forms: CMS-672/802

When you think of great ideas, right behind sliced bread should be Keane Care's features for the survey forms, CMS-672/802. Our MDS 3.0 software automatically completes the forms with data from the latest MDS 3.0. As with MDS 2.0, a dozen CMS-672 items do not correspond with MDS 3.0

continued on next page

Tools for Working the CAAs

When you arrive at MDS 3.0 Section V you will see which CAAs were triggered by MDS responses. In the sample screen at top Visual Function is marked Yes. To see the criteria, click [Document](#) on the far right and the sample window below it opens.

That window shows the MDS 3.0 items that triggered the CAA. To the right is the Review of Indicators list from Appendix C of the RAI Manual where you can check indicators. Add and view notes in the lower portion of the window.

MDS 3.0 Software Features

continued from previous page

items. Those items are indicated with asterisks and you can enter responses online. The 672 facility view shows number of residents triggering each Ftag. Click on the number to see who triggered with their MDS responses.

From that window you can update an MDS 3.0 response and add a resident to the category. If an assessment isn't open, the change is held for the next assessment.

Clients tell us they keep the forms updated as changes occur so they are ready when surveyors arrive. Clients also use updated forms as QA tools that point out possible areas of concern and trends.

MDS Analysis Specialists

Keane Care offers optional interfaces to the following vendors that analyze MDS data for inconsistencies, RUG potential, and possible issues.

- Care Watch from eHealth Data Solutions, www.ehds.biz/
- MDS Director from Resource Systems, www.resourcesystems.net
- Point Right, www.pointright.com
- Team TSI, www.teamtsi.com ■

New Keane NetSolutions Quality Assurance App on its Way...

Incident Reporting and Infection Control

We were listening when our clients asked for a paperless tool for incident reporting and infection control – a KNS Quality Assurance application will be released this Summer. This module removes QA activities such as incident reporting and infection control from residents' legal health records and keeps them separate in the Administrative Record.

Incident Reporting

When you automate your facility's paper Incident Reports, they are available anywhere/anytime to authorized employees. You also gain tools to help ensure proper actions are taken and crucial data is captured.

With KNS QA and Keane Insight on your system you can set up alerts to notify you when an Incident or Infection Control report is opened.

KNS Incident Report includes a Summary page that lists all reports for a resident with view-only clinical information. From the Summary you open these documentation pages:

- **Observations** – with a checklist of items in categories such as cognitive status, appearance, injuries, and reaction to medication.
- **Findings** – for conclusions and causative factors
- **Reporting** – to assist in making necessary notifications
- **Actions** – for charting actions at the time of the incident or investigation
- **Audit** – to ensure all necessary fields have been completed.
- **Reports:** Incident Case and Incident Log for a summary of all or selected residents.

Infection Control

This software is used to enter, track and report on infection control issues. It is similar to Incident Reporting in that it starts with a Summary page listing a resident's infections and basic information. Links in that page take you to these component pages:

- **Signs and Symptoms** – entered according to infection type, such as GI tract, Respiratory, UTI
- **Tests and Results**
- **Treatment Information** – including an order lookup and follow-up information
- **Reporting** – to assist in making required notifications
- **Resolution** – documentation of facts relating to decisions regarding an infection
- **Audit** to ensure all necessary fields have been completed

For more information, contact your sales representative or Jill Moss at Jill.Moss@Keane.com or 800-426-2675. ■

Ready When Surveyors Arrive: CMS Forms

Packed with user-friendly tools, the online CMS-672 form above is one scrollable page. At upper right is a summary by category of residents who triggered survey items. The remainder of the page shows all the items with number of residents.

Click on a number in red to open the inset page that includes a list of residents who triggered with the specific MDS entry. You can edit items in this window.

AP and GL Join the Keane NetSolutions System

We are pleased to introduce you to the new Keane NetSolutions Accounts Payable and General Ledger. Rewritten for the .NET platform, they include the great features and functions of our VistaKEANE software with valuable additions.

Keane NetSolutions AP and GL are Web-enabled, offering anytime anywhere access. They are part of the KNS SQL database system that shares data seamlessly.

Keane NetSolutions General Ledger is a powerful tool for financial record keeping, reporting, analysis, budgeting, and projections.

So far, ten clients have migrated to Keane NetSolutions AP and GL, and Pat Hook, Senior Financial Implementation Consultant, has implemented them all. "I installed Keane's windows-based AP/GL for 14 years and I liked these products better after only a month," he says.

"Because so much of the functionality is the same, it's an easy migration for our Keane windows clients – all their data is converted and they are using it after a day on the phone with me.

"As people learn KNS navigation they'll get faster. For example if



Pat Hook, Senior Financial Implementation Consultant

New Tools and Navigation with KNS General Ledger

		2010	CURR YTD	BUDGET	BUDGET YTD	VARIANCE	VAR %
JAN 10	1	<u>6,650.48</u>	6,650.48	5,053.62	5,053.62	1,596.86	31.60
FEB 10	2	<u>5,777.75</u>	12,428.23	4,564.56	9,618.18	1,213.19	26.58
MAR 10	3	<u>6,066.70</u>	18,496.93	5,053.62	14,671.80	1,015.08	20.09
APR 10	4	<u>3,725.80</u>	22,222.73	4,890.60	19,562.40	-1,164.80	-23.82
MAY 10	5	<u>4,775.42</u>	26,998.15	5,054.00	24,616.40	-278.56	-5.51
JUN 10	6	<u>6,379.00</u>	33,378.05	4,891.00	29,507.40	1,488.90	30.44
JUL 10	7	<u>6,927.02</u>	40,305.07	5,034.00	34,561.40	1,873.02	37.06
AUG 10	8	<u>6,232.02</u>	46,537.10	5,034.00	39,615.40	1,178.03	23.31
SEP 10	9	<u>5,316.32</u>	51,853.42	6,000.00	45,615.40	-683.68	-11.39
OCT 10	10	<u>5,029.25</u>	56,882.67	5,500.00	51,115.40	-470.75	-8.56
NOV 10	11	<u>4,544.44</u>	61,427.11	5,500.00	56,615.40	-955.56	-17.37
DEC 10	12	<u>7,055.87</u>	68,482.98	5,735.00	62,350.40	1,320.87	23.03
Total			68,482.98	62,350.40		6,132.58	9.84

This sample GL Account Inquiry page shows the account for Dietary/Food with total expense for each period by month and current YTD. It also shows a comparison to previous year by month and YTD with variances. Click on an underlined amount to drill down to source transactions. Switch the view to Budget, Dollars, or Stats with a click.

you're entering an invoice and need to print checks, it's just one step with KNS," continued Pat.

Standard & Custom Reports

KNS GL offers both standard reports and a report writer for custom reports. On-demand reports include:

- Income Statement with Prior Year
- Income Statement - Monthly
- PPD Income Statement - Monthly
- Balance Sheet with Prior Year
- Labor, Labor Hours PPD - Monthly
- Resident Days
- Trial Balance/Comments
- Balance Sheet with Prior Month
- Ancillary Stats - Monthly

"The biggest change in functionality is the GL Report Writer," says Pat. "It requires no maintenance because it pulls from the chart of accounts. You can create a report in half an hour, compared to half a day.

"You save the reports you create and if you want to mix and match columns and rows later, you can save the tweaked versions to use again."

The report writer is great for monthly comparison reporting across fiscal years, and linking or combining multiple reports into one. It offers reporting on account number statistical codes and printing up to 198 characters per line, landscape or portrait.

Account Inquiry

You can instantly retrieve GL data with a powerful inquiry tool. Search by account number, facility, department, and subaccounts to see entries by fiscal period, transaction, and journal entry with actual and budget data, including variances. See sample above.

Per-Patient Day Statistics

Per-patient-day (PPD) statistics add a whole new level of meaning to budgeting and profit/loss. The software divides dollars by actual patient days from AR-Billing. It can control type of days such as nursing unit, level of care, and payor type. PPD statistics include:

- Nursing hours per resident day

continued on next page

- Food costs per resident day
- Laundry costs per resident day
- Total cost per resident day

Budgeting

General Ledger provides user-friendly features that simplify budget creation.

Variable Budgeting: budget a fixed amount per month or a per-patient-day amount with the PPD amount multiplied by budgeted or actual days using census data.

Budget Inquiry: view current, prior, and future budget information for the GL account you select. Enter your search criteria to see actual and budget dollar amounts for the current and prior budgets with variances available by dollars and percentage.

If an organization prefers to maintain budgets in Excel, Keane NetSolutions General Accounting can import budgets from Excel.

Multi-facility tools

KNS GL handles facility data in multi-facility organizations. It offers flexible consolidation configurations and facility-comparison reporting.

Keane NetSolutions Accounts Payable offers superior tools for maintaining vendor information, processing invoices, writing checks, generating 1099s, and monitoring cash requirements.

Vendor information

Vendor master windows support entering complete information for use in accounts payable processes. For multi-facility organizations, vendor information can be shared by all.

Collect and maintain data such as 1099 information and addresses. For vendors with multiple addresses, you can assign remit-to codes for each address. Assign distribution account numbers per vendor that default when entering an invoice. A review of YTD activity by vendor is available on demand.

With AP's powerful inquiry tools (*see below*) vendor and invoice details are always a click or two away.

Cash Management

Make payments at the optimum time using AP's cash management functions including automatic or

manual selection of invoices for payment. Use the Cash Projections Summary report to see total payable amounts by due dates.

Discount terms

Set up codes for vendors' discount terms to calculate check amounts and schedule invoices for payment.

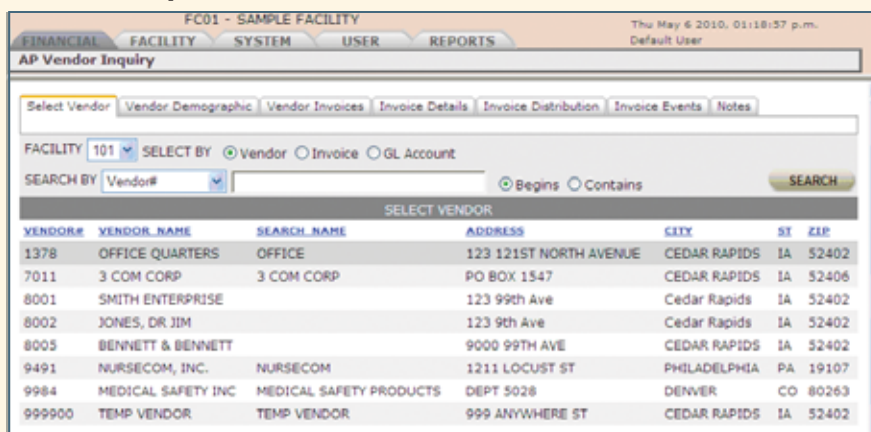
Key Features of KNS AP

- Supports centralized processing of multiple facilities and inter-company accounting
- Handles multiple cash accounts
- Processes one invoice for charges incurred by multiple facilities
- Processes current month without closing prior month
- Offers online validation of GL account distribution
- Provides inquiry and reporting for projected cash requirements
- Offers ability to set security for users by facility and to view only
- Handles recurring invoices
- Supports importing a check reconciliation file from the bank into your system
- Generates a report of month-to-date purchases compared to budget by account number
- Automates month-end processing, sharing data with Keane and other GL systems for expense, liability and cash journal entries

More Information

For more information on KNS AP/GL and a demonstration, contact your sales representative or Jill Moss at 800-426-2675 or Jill.Moss@Keane.com. ■

KNS AP: quick access to vendor and invoice data



In this Vendor Inquiry page you select vendors by name or number. Then use the tabs above to access detailed vendor information in the categories of vendor demographics, vendor invoices, invoice details, invoice events, invoice distribution, and notes.

Keane Care News

continued from page 3

5010 standards for electronic claims. We are on schedule for programming and testing and will keep you posted on the Insider homepage and by email.

New! KNS Quality Assurance: Infection Control and Incident Reporting

We're pleased to announce the release of a new KNS QA application with modules for Infection Control and Incident Reporting. Please see page 9.

Keane Insight

If you've looked into dashboard software before, we hope you'll take a few minutes now to consider our Keane Insight product that is ready out-of-the-box with indicators and user-defined alerts we built with input from our clients. If you are a technical person, you'll appreciate that Keane Insight offers a package with tools for modifying and creating your own indicators.

It offers you many business intelligence indicators with more on the way, including indicators from KNS AP/GL. See page 4 for more on Keane Insight.

EHR Certification and KNS eDocuments

Keane Care is committed to receiving certification of our software for the LTC Electronic Health Record. We meet most of the criteria now but do need to make some changes, such as releasing Keane NetSolutions eDocuments for adding scanned documents and graphics to residents' EMR. See pages 6-7. ■

News Front (continued)

continued from page 2

Accountable Care Organizations

CMS has proposed a new program, ACO (Accountable Care Organizations) to encourage providers to improve quality and reduce Medicare expenditures in return for payment incentives.

Post-Acute and Long-Term Care providers will be able to **participate** in ACOs, but only physicians and hospitals can **form** an ACO.

To receive incentive payments, ACOs must first meet quality measures in the areas of patient/caregiver experience, care coordination, patient safety, preventive health, and at-risk population/frail elderly health.

To qualify for a shared savings payment, an ACO must achieve minimum savings. CMS will estimate a benchmark for minimum savings that will be adjusted annually.

For full information visit CMS' Shared Savings Program Website at: www.cms.gov/sharedsavingsprogram

Therapy Payment Reduction

MPPR is a change made for some therapy services paid under the Medicare Physician Fee Schedule (Part B, Outpatient) effective 1-1-2011.

This Multiple Procedure Payment Reduction (MPPR) is 25 percent, applied only to the Practice Expense part of payment after the first unit when more than one unit is provided to the same patient on the same

Is eHosting Right for Your Facility?

If you're considering a costly hardware upgrade, a great alternative is to sign up for Keane eHost Services.

Your software will run on our secure servers for an affordable flat monthly fee. Keane eHost frees your staff from IT tasks and ongoing maintenance.

Your Sales Representative or Jill Moss, Inside Sales, will be glad to discuss how Keane eHost Services would work for you: 800-426-2675 or Jill.Moss@Keane.com.

day. Updates for Keane RAM and AR-Billing that handle MPPR are available. For more on MPPR see Medlearn Matters 7050:

www.cms.gov/MLNMMattersArticles/Downloads/MM7050.pdf

Intermediary Errors re MPPR

CMS learned in February 2011 that the Fiscal Intermediary system was taking the discount on claims regardless of whether services were provided on the same day. CMS has instructed contractors to adjust those claims.

Therapy claims for service on or after 1-1-2011, processed between 1-3 and 2-6-2011, with one of the specified therapy codes in Change Request 7050, were processed incorrectly.

YouTube for MDS 3.0

YouTube is now the place to go for CMS training on MDS 3.0 and Medicare. See CMS' Website:

www.cms.gov/NursingHomeQualityInits/45_NHQIMDS30TrainingMaterials.asp ■

Therapute Updated for MDS 3.0/RUG-IV

MDS 3.0 had a big impact on how therapy minutes are counted and Therapute responded by updating their interface with Keane NetSolutions MDS 3.0 software and adding features to help ensure appropriate payment.

With the Keane NetSolutions interface, you click Import at MDS 3.0 Section O400 and see the minutes and days collected in Therapute for individual, group, and concurrent therapy for each discipline. You can edit or accept them as is for the MDS.

A product of Therapute LLC, Therapute uses treatment minutes entered by therapists to estimate RUG-IV scores based on actual and on ordered therapy minutes. If there is a discrepancy, the software shows it in the PPS Planner (*sample below*).

With Therapute, therapists begin a shift with a worksheet listing patients and therapy planned by type. At the end of the shift, therapists simply enter the minutes delivered and any notes. These notes can be imported to KNS Progress Notes, secured by Keane functions and an SSL certificate.

About Therapute

Therapute software is licensed for a flat monthly fee. It is a hosted Web-based application. An interface with Keane through an SSL Web Service is a separate purchase.

Therapute IT staff maintain your database and keep it current with regulatory changes and updates. For more on Therapute contact your Keane sales representative or Jill Moss, 800-426-2675 or Jill.Moss@Keane.com. ■

New Sales Team member
Colleen Rougeaux

Colleen Rougeaux is Keane Care's new Regional Sales Manager for the Northeast, succeeding Larry Uhler who retired earlier this year after a long and distinguished career with Keane.

Colleen comes to Keane from Partners Healthcare in the Spaulding Rehabilitation Network Division of Partners Healthcare that also owns Massachusetts General Hospital and Brigham and Women's Hospital in the Boston area.

As a Project Manager for Partners Healthcare, Colleen managed various process improvement initiatives including the three-year implementation of Keane NetSolutions Clinicals, AR-Billing and CareTracker at two SNFs.

Colleen will be reaching out to Keane Care clients she serves in CT, MA, ME, NH, NJ, NY, PA, RI, and VT. You can email her at Colleen.Rougeaux@Keane.com or leave a message at 800-426-2675. ■



Colleen Rougeaux, Regional Sales Manager for the Northeast.

PPS Planner for the Optimum RUG Score

Plan Day	12	13	14	15	16	17	18	19	20	21	22	23
Date	2-05	2-06	2-07	2-08	2-09	2-10	2-11	2-12	2-13	2-14	2-15	2-16
Week Day	Sat	Sun	Mon	Tue	Wed	Thu	Fri	Sat	Sun	Mon	Tue	Wed
Est. Service (hrs)	N	N	N	N	N	N	N	N	N	N	N	N
PT Plan/Act		45 / 45	45 / 45	45 / 45	45 / 45	45 / 45	45 / 45	45 / 45		45 / 45	45 / 45	45 / 45
OT Plan/Act												
OT Available Group												
SLP Plan/Act		60 / 60	60 / 60	60 / 60	60 / 60	60 / 60	60 / 60	60 / 60		60 / 60	60 / 60	60 / 60
SLP Available Group												
Total Plan/Act			105	105	105	105	105	105		105	105	105
7 Day Plan/Actual	675	675	675	675	675	675	675	675	675	675	675	675
7 Day Actual	675	675	675	675	675	675	675	675	675	675	675	675
Target ARD Var												
7 Day Unit PT/OT/SLP	5:54	5:54	5:54	5:54	5:54	5:54	5:54	5:54	5:54	5:54	5:54	5:54
RUGS from Plan/Actual	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA
RUGS from Actual	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA	RVA

Use this window to plan, enter, and track minutes of therapy by category: concurrent, individual and group, according to CMS' rules. It helps you determine remaining group minutes and alerts you if planned/actual minutes will not achieve your targeted RUG on the selected ARD.

2011 Keane Client Conference

Smooth Sailing thru the Changing Tides of Healthcare IT

Educational Sessions at the Keane Client Conference*

Monday, July 25, 2011

Schedule Subject to Change

	AR/Billing	Clinical	Technical	Multiple Topics
7:00 - 8:15 am	Breakfast			
8:30 - 10:00	Welcome and Keane Insight Overview	Welcome and Keane Insight Overview	Welcome and Keane Insight Overview	Welcome and Keane Insight Overview
10:30 - 12:00	Medicare Secondary Payor: Primary Advice	Year in Review, Future, and I Wish it Could...	Managing, Securing, and Troubleshooting the KNS Website	KNS AP and GL Overview and I Wish it Could...
12:00 - 1:15	Lunch			
1:15 - 2:15	Year in Review and the Future	MDS 3.0 Hot Topics	KNS General Accounting and Keane Insight	Custom Reports with KNS General Ledger
2:30 - 3:30	MDS 3.0 & RUG-IV from a Billing Perspective	Physician Orders Setup	Year in Review	Payroll Refresher and I Wish it Could...
4:00 - 5:00	MPPR: New Therapy Payment Discount	Physician Orders Setup: Therapeutic Correlations	Keane Care Hosting Services	ePrescribing Infrastructure
6:00 - 9:00	Cirque du Keane			

Tuesday, July 26

	AR/Billing	Clinical	Technical	Multiple Topics
7:00 - 8:15 am	Breakfast			
8:30 - 10:00	Users' Group Meeting	Users' Group Meeting	Users' Group Meeting	Users' Group Meeting
10:30 - 12:00	I Wish it Could... and How do You do It?	Creating & Sharing UDA Assessments	KNS Updates and Server Configuration	Improve your Bottom Line with Resource Systems Products
12:00 - 1:15	Lunch			
1:15 - 2:15	ANSI 5010 Claim Format	New! Incident Reporting and Infection Control Apps	ePrescribing and eCharting	Keane Insight: Which Kind of Person are You?
2:30 - 3:30	Nobody Likes Collections	Preparing for eCharting	KNS Interfaces	Certification of an EHR: What to Expect

* Visit the Conference Website for full descriptions of the sessions, complete conference information, and to register: www.keaneclientconference.com

Many thanks to Grane Healthcare for

Sharing User-Defined Assessments

It's easy to understand the benefits of electronic worksheets but it's a whole other thing to make the move. Twelve skilled nursing facilities advised by Grane Healthcare in Pennsylvania successfully met the challenge and have eliminated paper forms, using KNS User-Defined Assessments (UDA).

And they're sharing the results of the project – their 34 UDA templates.

Project to be Paperless

"We started the project by gathering the paper forms, including Dietary and Social Services, and making sure questions from the different versions were in the standard version," said Julie Kane, RN, Quality Improvement Nurse Consultant for Grane Healthcare. "It took us three months to evaluate the forms, consolidate them, and send them out for review.

"We didn't use any pre-built forms so nurses didn't have to learn new questions. Our paper process wasn't broken – we had tried and true forms that we wanted to keep, we just wanted to make them paperless."

As training on UDA was complete and the go-live date neared, Julie took a rip-off-the-bandaid approach, and removed all the paper forms. "We knew facility staff were ready for the change because we already had standardized forms and were familiar with the software from using KNS Progress Notes and Care Plan."

Implementing UDAs

"To make the forms quick and easy to complete we used minimal text in the UDAs. We entered questions as multiple choice or yes/no instead of asking for notes," continued Julie.

"We built our scoring systems into UDAs and that gave us a bonus – the software does the calculations for us. Besides saving time, it lowers the risk of math errors. Another benefit is that the UDA form is always the right one – you never have to search the building. We supplied copies of the forms for backup, but so far we haven't had to use them."

Grane has a procedure for modifying templates so the system is always current. Facility staff submit suggestions to their manager and every six months the approved modifications are made.

"When we update a template we inactivate the previous version so the data is saved in a useful format," explained Julie. "If needed, staff have view-only access to the old files."

Sharing their Success

Julie Kane is Co-Chair of the Keane Care Users' Group KNS Subcommittee and is making Grane's files available after hearing from fellow Keane Care clients who want to replace their paper forms. ■



Julie Kane, RN, Quality Improvement Nurse Consultant Grane Healthcare

Download UDA Templates created by Grane Healthcare

Use these templates as is or edit for your facility's practices. Download them at the Insider (password required) under KNS / Product Knowledge / UDA at:

www.keanecare.com/insider/kns.asp

30-day Restraint Review
Activities Assessment
Activities Re-Assessment
Admission Data Collection Form
AIMS - Abnormal Involuntary Movement Scale
Bed Safety Assessment
Bowel and Bladder Assessment
Braden Scale
Cardiac Pacemaker Information
Care Conference Summary
Change in Condition Assessment
Consultant Dietitian Evaluation
Contracture Tracking
Elopement Risk
Fall Risk Data Collection
Geriatric Depression Scale
Hydration Risk
Initial Restraint Assessment
Medication Nutrition Initial Therapy Assessment
Medical Nutrition Re-Assessment
Mini Mental Exam
Nursing Communication to Therapy
Pain Data Collection
Post-Hospital Return Assessment
Resident Transfer Guide
Respiratory Assessment
RN Assessment Tool
Smoking Assessment Tool
Social Services Worksheet
Social Svcs Discharge Anticipation
Social Services Discharge Referral
Social Services Initial Assessment
TB Early Detection Questionnaire
Urinary (Foley) Catheter Assmt

These UDA files are shared by Grane Healthcare as a courtesy. Keane Care and Grane accept no responsibility for the contents.