

the CORAZON REPORT

A special briefing from your service line experts

Volume 17, Issue 1

The President & CEO's Corner

There's no doubt that clinicians within our ever-evolving industry must remain on the cutting-edge of new ideas, technologies, and care approaches. But, there is equal value in continuing education for administrative professionals who are tasked with leading teams and shaping strategy to achieve growth, long-term viability, and top clinical and financial outcomes.

Which is why Corazon is once again hosting THE event for **cardiovascular, neuroscience, and orthopedic administrators** in partnership with LUMEDX. We're heading to **The Paris Hotel in Las Vegas, April 30 – May 2**, to present an excellent panel of thought-leaders to share experiences, spark ideas, initiate discussion, and help attendees reach new heights for CV, Neuro, and Ortho service lines.

Don't take a gamble on the success of your hospital specialty program!

Join us in Vegas, learn and exchange ideas at our conference, and we'll make sure you come out a winner!

My best,




The Next Phase of Neuro Intervention: A Combined Platform to Optimize Care

Since the initial release of the DAWN™ trial in 2017, multiple follow-up clinical trials have only served to further validate the significant benefits of Thrombectomy for the treatment of stroke. Decreased mortality and disability scores, and improved long-term outcomes, have all been attributed to the introduction of catheter-based therapies for stroke. But, the access to Thrombectomy services continues to lag well behind the increasing number of patients who could potentially benefit from this rapidly-evolving technology.

With construction, equipment, and initial supply costs exceeding over \$4 million on average for a newly-developed neuro-interventional suite, a dedicated lab for interventional stroke may not be an option for many organizations.

While the expense of adding a new lab can be prohibitive, and leaving specialty-based procedural areas underutilized is not cost-effective, Corazon believes a solution for some organizations is to **consider a multi-use interventional suite combining both cardiac and neuro interventional services into one area**. While such an approach requires significant planning and operational coordination due to the combining of two or more emergent services (PCI and Thrombectomy), the efficiencies gained are well worth the upfront investment in planning and coordination required.

Changes to the current interventional area footprint will need to be planned to accommodate the additional equipment, monitoring needs, staff, and inventory to support use of the space by multiple providers for benefit of multiple complex patient types. **Corazon believes programs already performing cath/PCI in an existing interventional lab are well positioned for such an effort**, given the synergies that already exist with respect to space, equipment, staff training, and community perception.

Another issue to consider is the training and experience of physicians who will be using the shared interventional space. A solid credentialing and privileging program will need to be developed to set the standards of who is doing what in the newly-combined area. This should include inclusion/exclusion criteria for all case types, as well as emergency protocols to address the need for a higher level of care that may require an emergency transfer to the operating room, or even a tertiary partner.

And while we believe that expansion to neuro-intervention within an existing cardiac interventional space is a worthwhile and resourceful effort, the implementation of such a change can be daunting.

A well-researched business plan and timeline is an essential pre-planning step for any hospital considering this approach to dual-use interventional labs. This plan can lay the groundwork for facility and staffing needs, along with physician engagement strategies that will need to be addressed during the implementation phase.



CEREBROS™ as Part of the “IMPROVE Stroke Care” Study at Duke Clinical Research Institute

Corazon joined the **IMPROVE Stroke Care** study with the Duke Clinical Research Institute (DCRI) in Durham, NC, collaborating with principal investigators Drs. Brad Kolls, MD, PhD and Carmen Graffagnino, MD. The goal of IMPROVE is to **develop a regional integrated stroke system to identify, classify, and treat patients rapidly and effectively**. CEREBROS™, Corazon’s Neurovascular Information System (NVIS), will be used in this study to collect, summarize, and analyze information related to “hub-and-spoke” stroke programs across the region. IMPROVE will utilize a customized version of CEREBROS™ to track key information related at each participating hospital, with the goal of enhancing patient care and outcomes.



Part of IMPROVE Stroke Care is to **use novel data capture technologies to drive real time practice improvement**. CEREBROS™ functionality is based on real-world experience and early adopters have encountered a real and measurable impact program-wide as the system supports a continuum for consistently achieving best practice.



According to Dr. Brad Kolls, “We are thrilled Corazon has agreed to collaborate with us for this innovative approach to changing the way we measure the quality of healthcare delivery. Current approaches to data collection are slow and lag weeks to months behind the time of care delivery. We are not only trying to accelerate and automate the collection of information about care, but also tie together the providers involved and facilitate communication and efficiency. Corazon and CEREBROS™ will play a key role in helping us validate this new approach to data capture and sharing.”

Corazon E3 Accreditation & Client Kudos

Formal cardiovascular program Accreditation is on an upward trend, and with dozens of clients, Corazon witnessed the overall clinical and programmatic value that can be realized with this effort. **Corazon’s E3 Accreditation** offers a focus on quality and patient care, with a customized approach to Evaluate performance, Enhance the patient care experience, and Excel with best practice. **Consider these impressive results over four years across our accredited client programs:**

- PCI In-Hospital Risk-Adjusted Rate of Acute Kidney Injury (all patients) decreased 45%.
- PCI In-Hospital Risk-Adjusted Rate of Bleeding Events (all patients) decreased 68%.
- PCI Transfusion of Whole Blood or RBC Post-PCI decreased 44%.



Evaluate. Enhance. Excel.

Coffee Regional Medical Center in Douglas, GA engaged Corazon for business planning, CON submission, and PCI implementation. This 4-month engagement resulted in successful PCI program verification and accreditation. In the first 8 weeks of service, 47 PCIs and 9 STEMIs were performed, in addition to an overall lab volume increase of 64%.

Conemaugh Nason Medical Center in Roaring Spring, PA engaged Corazon for PCI implementation and accreditation services. After only 2 months of program operation, 100 left-heart catheters were performed in addition to 50 PCIs.

Corazon congratulates our clients for these accomplishments and bringing advanced treatment to their communities!

Summer Webinar Series

Join our experts for this summer’s **Spine Webinar Series** highlighting:

- **Spine Program Strategy - June 6**
- **Success in the Outpatient Setting - July 18**
- **Spine Operations & Finances - August 15**
- **Physician Recruitment - September 24**



Corazon’s EDGE™ brings unparalleled excellence and objective expertise for program growth. Register for one or all of these webinars at www.corazoninc.com/distance-learning/ today!

ASC Reimbursement News

Beginning in CY2019, CMS approved the performance of diagnostic cardiac catheterizations in Ambulatory Surgery Centers (ASC), though state regulations may pose a barrier for approval of these procedures in the outpatient setting. Also, the reimbursement impact is quite significant. For example, Medicare reimburses a hospital outpatient diagnostic cardiac catheterization \$2,810 while the same procedure performed in an ASC is reimbursed \$1,360. Although this is a 48% difference in payment, ASCs are traditionally a lower-cost setting of care and lower out of pocket costs for the patient.



In Corazon's experience, diagnostic-only cath labs in the hospital are few and far between, with DX procedures rather serving as a bridge to PCI. Without the inclusion of PCI procedures at ASCs, diagnostic utilization can come under scrutiny. **Perhaps this is "writing on the wall" that PCI procedures in an ASC can become more widely accepted in the near future, and in some places already are. Stay tuned...**

Client Placements

Corazon is pleased to announce completed Permanent and Interim placements for the following clients:

- A **Cardiology Practice Manager** at **Peterson Regional Medical Center** in Kerrville, TX.
- A **Site Director, Cardiothoracic Surgery** at **UPMC Pinnacle Memorial** in York, PA.
- A **Cardiac Cath Lab Manager** at **Peterson Regional Medical Center** in Kerrville, TX.

Planning & Implementation

Over seven fast-tracked months in 2018, Corazon partnered with the **University of Maryland St. Joseph Medical Center** to plan and implement six state-of-the-art operating suites. Despite the rapid pace of this significant project, design and quality were not compromised.



At the Podium

Becker's Healthcare 17th Annual Future of Spine + The Spine, Orthopedic, and Pain Management-Driven ASC Conference 2019

June 13-15 in Chicago, IL

- SVP Stacey Lang will be a panelist for *"The Future of Orthopedics - Practice, Medical Device Issues, and More"*



Want Corazon to speak at your next event?
Call us at 412-364-8200 and let us contribute our industry expertise in Cardiovascular, Neuroscience, and Orthopedic services!

Corazon's role in outfitting the rooms and assuring in-depth staff education resulted in a **solid and seamless adoption of the technology**. Corazon's additional work with supply chain resulted in an overhaul of inventory management, bringing consistent par levels to OR rooms, thus creating an organized sterile core, and implementing a closed case cart system.

Corazon's unique clinical expertise and focus on a 'Day in the Life' approach not only **enhanced workflow efficiency for all staff**, but more importantly, **elevated staff practices by integrating key AORN quality standards**. The merging of an efficient facility design, advanced technology, and lean workflow principles has given rise to a new OR culture of quality. Corazon looks forward to replicating the same standard of care in the design of the cardiac ORs and procedural areas, finishing in Spring 2019.

Visit us at www.corazoninc.com or call 412.364.8200

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The Corazon Report is published by the experts at Corazon, THE national leader in strategic program development for **HEART, VASCULAR, NEURO, SPINE, and ORTHOPEDIC** programs and practices. Our team of experts offers total program solutions through Consulting, Software Solutions, Recruitment, Interim Management, and Accreditation services to clients across the country and in Canada. The information herein reflects the opinion of Corazon and in some cases may not necessarily be the opinion of other healthcare industry professionals.

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CORAZON STROKE INSTITUTE

Powered By CEREBROS

The **Corazon Stroke Institute** brings excellence in stroke patient care through continuous focus and expert input to all facets of program development.

This 3-phase approach is THE bundled package hospitals need to **implement or improve stroke program performance.**



ASSESS.

IMPLEMENT.

ACTION.

- Review of program
- Establish goals and vision
- Identify areas of focus
- Develop workplans

- Manage projects
- Create sample materials
- Develop program tools
- Establish best practice

- Utilize CEREBROS™
- Monitor performance
- Identify program strategies
- Offer ongoing education

The Corazon Stroke Institute is a package solution to expertly **manage patient and program elements from start to finish.**

Understand how Corazon's Stroke Institute can help your stroke program by contacting us today!

With more consistent processes and streamlined care, programs with 250+ cases per year can increase stroke program margins by over \$250,000 annually.

CORAZON
www.corazoninc.com
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