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CORRECTION: *The KentuckyOne Health Cerner Wave 3 go-live article that appeared in the Oct. 11 edition of this newsletter included an incomplete list of facilities. The correct listing of Cerner Wave 3 go-live facilities is included in the first article in this newsletter.*

KentuckyOne Health OneCare News & Updates

New Cerner Wave 3 Go-live Schedule Announced

KentuckyOne Health's Cerner Wave 3 was originally scheduled for Feb. 1, 2014. After extensive review by national OneCare governance and local leadership Cerner Wave 3 has been rescheduled to May 10, 2014. Cerner Wave 3 facilities are:

- Jewish Hospital
- Jewish Hospital Medical Center East
- Jewish Hospital Medical Center Northeast
- Jewish Hospital Medical Center South
- Jewish Hospital Shelbyville
- Frazier Rehab (inpatient)
- Frazier Rehab (outpatient)
- Southern Indiana Rehab Hospital (SIRH)

The new go-live date will allow additional time for the project team to conduct necessary integration testing and focus on infrastructure needs. In addition, the new date will work within CHI's recently announced national OneCare project pause timeframe of May 2014 through January 2015 that will allow for necessary readiness preparations in anticipation of



Have OneCare Cerner questions?

Get all your questions about Cerner answered quickly by emailing them to:

OneCareAskIt@KentuckyOneHealth.org

new ICD-10 activation in October 2014.

Other factors considered in the decision-making process were:

- The need to assure full on-the-ground resource support three weeks prior to go-live (April 19, 2014) and four weeks post go-live (June 7, 2014)
- Acknowledgment of spring break, Easter and Kentucky Derby events

As OneCare Cerner Wave 3 project teams continue to work toward the May 10 go-live, regular project updates will be communicated to stakeholders through a variety of KentuckyOne communication channels.

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KentuckyOne Health McKesson STAR Upgrade On Track for Dec. 3

McKesson STAR, the health information system used for patient admission, registration and other revenue cycle processes, will be upgraded to an ICD-10 compliant version on Dec. 3.

Affected facilities are those currently using McKesson STAR. The project team does not anticipate that STAR users will see any significant changes.

Thorough testing of the upgrade continues. If you have questions, please contact [Michael Popovec](#), project manager, or [Bryan Smith](#), ICD-10 applications manager. [Back to top](#)

End-to-End Barcode Solutions Update for KentuckyOne Health

KentuckyOne Health's End-to-End Barcode Solutions (ETEBS) go-live waves continue to make progress. However, it was recently announced that there is a [pause on OneCare go-lives](#) to prepare for the ICD-10 transition. As a result, new ETEBS go-live schedules are being determined across CHI.

Below is the latest information for ETEBS in Kentucky.

The pharmacy remodel at Jewish Hospital was delayed and began the week of Oct. 21. The delay postponed delivery of the medication carousel. Project Manager Eddie Gee is examining how the delay will affect the go-live date at Jewish Hospital.

CareFusion is still on schedule to go live Dec. 10, 2013, at Jewish Hospital and Dec. 11 at Jewish Hospital Shelbyville. The Jewish Hospital date may change because of construction delays. [Back to top](#)

AEHR Team's Improved Abstraction Process Saves Time and Money, Slated to Move Ahead in Kentucky

In February 2013, Ambulatory Electronic Health Record (AEHR) implementations and go-lives were paused to improve the system and its efficiencies. The team worked on a variety of issues with the goal of improving performance. During the pause, PatientLink, an abstraction software/hardware system, was piloted at Family Physician Associates in Shelbyville, Ky.

Abstraction is the process of inputting patient data from a paper file into an electronic file. After a two-month PatientLink pilot and 2,200 abstracted records, the project team identified a potential for significant savings in abstraction costs. OneCare leadership reviewed the pilot results and decided to implement PatientLink in clinics systemwide, beginning in the Louisville market.

PatientLink speeds up the abstraction process and creates more usable patient data than the manual abstraction process. This saves time and money. The pilot at Family Physician Associates showed that manual abstraction takes 20 minutes to complete for every five patients worth of data. Using the PatientLink system, the average abstraction time for every five patients dropped to seven minutes.

The 13 minutes of time saved with PatientLink is significant when projected across a large number of patients. For every 100 patients, this means it will take 2.33 hours to complete the abstraction process using PatientLink, compared to 6.67 hours using the normal abstraction method.

Improving go-live processes supports OneCare's mission to transform health care and advance patient care by creating a universal, shared, electronic health record for each CHI patient. [Back to top](#)

CHI's Enterprise Data Warehouse Received ONC Certification for Meaningful Use

The Office of the National Coordinator (ONC) for Health Information Technology has certified CHI's Enterprise Data Warehouse as a Meaningful Use reporting tool.

This certification ensures that electronic health record technology that is adopted by hospitals and providers is capable of performing required functions to successfully attest to the Centers for Medicare & Medicaid Services (CMS) EHR Incentive Program (Meaningful Use). All hospitals and providers are required to use certified technology to receive CMS incentive payments. Certification also helps assure providers and patients that the electronic health record technology is secure, can maintain data confidentially and is able to work with other systems to share information.

"Receiving ONC certification is a significant milestone in our Meaningful Use journey because it ensures we are using the right technology to help our early adopters in Little Rock, KentuckyOne Health Cerner Wave 1 and the Fargo Division move forward with attestation today knowing they can provide the required evidence," said Deborah O'Dell, senior director, Enterprise Intelligence Operations. "It also ensures that as the Meaningful Use and quality measures evolve, we have the right technology to meet those requirements."

The Enterprise Data Warehouse is CHI's Meaningful Use reporting tool. It is also the solution for other patient care and quality measures, which include Perfect Care scores and evidence-based practices.

The reporting tool will be applicable for KentuckyOne Health hospitals using Cerner, and for other CHI facilities using Epic and Meditech. CHI's Enterprise Intelligence team worked closely with the national Meaningful Use program team to meet ONC's criteria.

More information about Meaningful Use and CHI's national Meaningful

Use program can be found on the [CHI Meaningful Use SharePoint site](#). For more information about the ONC certification or CHI's enterprise intelligence, please contact [Deborah O'Dell](#). [Back to top](#)

Winter OneCare Program Update Offers Latest on Market Information and Implementations Dec. 2

Mark your calendars for the Winter OneCare Program Update, 12-1 p.m. ET, Dec. 2. Kathy Sanford, RN, CHI senior vice president and chief nursing officer; Steve Moore, MD, CHI senior vice president and chief medical officer; and Michael O'Rourke, CHI senior vice president and chief information officer, will present the latest news on the overall OneCare Program. Guest speakers will present OneCare market information and the latest implementations.

The meeting will be hosted from Denver, Colo. Employees located in Denver are invited to join the session in person at the 198 Inverness Building in the R-I-C-E Room. A Live Meeting link and toll-free number are included below for employees located outside of Denver.

[Attendees: Live Meeting Link \(12-2-13\)](#)

[Add to my Outlook Calendar](#)

Telephone conference: 800-230-1951

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More information about specific OneCare projects is available on CHIOneCare.net and Inside CHI: [AEHR](#), [Cerner](#), [CHI eScripts](#), [ETEBS](#), [HIE](#), [Meaningful Use](#), [Meditech 6.0](#), [OEHR](#), [Physicians/Providers and the EHR](#), [PPMS](#)

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