

# The Corazon Report

A special briefing from the Heart Experts

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### TAKE THESE WORDS TO HEART...

"Every heart that has beat strong and cheerfully has left a hopeful impulse behind it in the world, and bettered the tradition of mankind."

- Robert Louis Stevenson

# CORAZON

The Heart Experts

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## The Cardiac Universal Bed: Optimizing Cardiac Care

As economics demand a decrease in healthcare costs, physicians and nurses must provide more intense care in less time. While payers heavily scrutinize financial results, educated consumers fervently demand quality clinical outcomes. The Cardiac Universal Bed (CUB) Model satisfies all of these requirements by simplifying the care process.

This care delivery model is unique since cardiac surgery patients are recovered directly from the operating room and cared for in the same bed—by the same nurse—until discharge. The model capitalizes on the success seen with the popular labor, delivery, recovery, and post-partum (LDRP) process in women's health. This "high-tech, high-touch" environment allows nurses with critical care skills to develop interpersonal relationships with the patients and families through all phases of the care continuum.

Hospitals implementing the Cardiac Universal Bed Model benefit from enhanced patient, fiscal, and satisfaction outcomes. Clinical outcomes are improved through the rapid assessment and management of complications such as atrial fibrillation. The elimination of transfers reduces the number of medication and treatment errors due to transcription inaccuracies.

The Cardiac Universal Bed unit promotes multiple cost efficiencies including up to a 35% shorter stay for cardiac surgery patients in some institutions. The focus on a "healing" physical environment enhances patient satisfaction. All rooms are private and designed to minimize the intimidating "intensive care unit" feeling. Defibrillators and other acute care equipment are easily

accessible but hidden in cabinetry out of the patient's view.

Physician support of this model is strong because of their confidence in the nurses' critical care expertise. This confidence leads to a highly collaborative work environment resulting in high nursing staff satisfaction. In addition, nurses are able to appreciate the fruits of their labor since they can celebrate recovery milestones along with the patient and family. Because of the high nursing staff satisfaction, CUB units across the country report lower nurse turnover rates than in traditional cardiovascular intensive care units.

Hospitals with CUB units are just starting to appreciate the uniqueness of this care delivery model. This approach enables them to differentiate their cardiac programs from the competition, enhancing community perception and referring physician support.

*Call our office at 412-364-8200 to speak with one of our experts on CUB development.*



The ICU phase of care.



The recovery phase of care.  
Technology is hidden.

# Seeing is Believing! A New Strategy for a Successful Start-Up

Hospitals with superior cardiovascular programs function as competitive players in today's healthcare marketplace.

Creating an excellent program begins with a sound business plan followed by an implementation process that brings the plan to fruition.

The implementation can be challenging, especially when envisioning how the new facility design and processes will work.

Columbus Regional Hospital in Columbus, Indiana, was in the midst of its implementation process for an open-heart expansion program. To help the Columbus team imagine how their program might one day function, Corazon introduced facility tours as part of their ramp up to implementation. In August, 2001, key members of the Columbus organization visited three Pennsylvania hospitals to observe their new start-up programs.

Sharon Regional Hospital (Sharon), St. Clair Memorial Hospital (Pittsburgh), and DuBois Regional Medical Center (DuBois) were the three hospitals that showcased their facilities. In addition to tours of the heart centers and their specialized units, the Columbus team met with key program management staff to discuss their planning and implementation processes. Corazon Consultant Barbara Michaels stated, "By talking through the barriers met and overcome by each organization, the Columbus team came away with ideas to advance their initiative."

Cherona Hajewski, Senior VP, Patient Care Services, Columbus Regional Hospital remarked, "Site visits afford the client the opportunity to see first-hand how a program is delivering a challenging new service effectively and with enthusiasm and excitement. These tours boosted our confidence exponentially that we could implement this service successfully and expertly deliver high quality care in a very competitive market."

Because of the success of these tours, such site visits are an integral part of every Corazon-aided implementation.

*Visit our website at [corazon-consulting.com](http://corazon-consulting.com) to view details on all our implementation services.*



**DuBois CVOR.** Pictured left to right: Cherona Hajewski, Senior VP, Columbus; Mary Ann Nicometo, Surgical Director, DRMC; Dr. George Brueggerman, Board Member, Columbus; Joanne Castor, Cath Lab Coordinator, Columbus; Douglas Leonard, President & CEO, Columbus.

## THE CORAZON TEAM

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**Karen Hartman**  
*Director, Business Services*

**Jerry Johnson**  
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**Wayne Calder**  
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**Barbara Michaels**  
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**Evelyn Ozanich**  
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**Judith Mills**  
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**Michele Strotmeyer**  
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**David Fuller**  
*Business Analyst*

**Shirley Susany**  
*Office Coordinator*

**Brad Messner**  
*Information Technologist*

**Marie Danko**  
*Office Assistant*

## Amazing Heart Facts

- About every 29 seconds an American will suffer a coronary event, and about every minute someone will die from one.
- Cardiovascular disease is the cause of more deaths than the next six causes of death combined.
- It is a myth that heart disease is a man's disease. In fact, cardiovascular diseases are the number one killer of women (and men). These diseases currently claim the lives of more than half a million females every year—more than the next 16 causes of death combined.



# DRG Update

The past year was exceedingly profitable for CV services, and the New Year brings confidence for continued earnings. Effective October 1, 2001, the Center for Medicare and Medicaid Services (CMS) completed a number of changes to the cardiac Diagnosis Related Grouping (DRG) from the Prospective Payment System (PPS) for inpatient reimbursement. The DRG modifications, especially in PTCA, will allow hospitals and CMS to track volumes and their associated costs with less ambiguity within the DRG data. The following changes will help relate market share growth with reimbursement projections.

DRG	Description	CMS Action
104	Valve and other major cardiothoracic procedures with cath	Removed cardiac defibrillator implant. See DRG 514
105	Valve and other major cardiothoracic procedures without cath	Removed cardiac defibrillator implant. See DRG 515
112	Discontinued	Prior use was balloon angioplasty and electrophysiology studies. See DRG 516,517,518
116	Other permanent cardiac pacemaker implant	Removed angioplasty with stent. See DRG 516,517,518
514	Cardiac defibrillator implant with cath	New DRG
515	Cardiac defibrillator implant without cath	New DRG
516	Percutaneous cardiovascular procedure with AMI	New DRG
517	Percutaneous cardiovascular procedure with stent without AMI	New DRG
518	Percutaneous cardiovascular procedure without stent without AMI	New DRG



## Spotlight on Corazon Speakers

Jackie Johnson, President, was a featured speaker at the AIA Academy of Architecture for Health Annual Conference, October 2001, in Chicago, IL. Attendees benefited from her presentation, "Designing the Heart Hospital of the Future."

Susan Heilman, Director, Clinical Services, recently presented at the American Academy of Medical Administrators 44th Annual Conference, October 2001, in Las Vegas, NV. Sue addressed important staffing recruitment and retention strategies in the CV service line.

### Mark your Calendar

**Corazon's 2nd Annual Conference  
October 2-4, 2002  
Naples, Florida**

## Congratulations to our Clients

Deaconess Medical Center, part of Empire Health Services in Spokane, WA, received approval in November, 2001, to build their Heart Hospital. Corazon conducted the Business Plan for their new facility. Congratulations to our friends at Deaconess!

Trinity Health Systems in Steubenville, OH, celebrated the opening of their new open heart unit with their first patient in December 2001. Corazon directed the Planning and Implementation process for this new service. Best wishes to Trinity for continued success.

## Join us in welcoming...

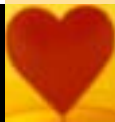
Our new team members: Wayne Calder, Senior Consultant; James Burns, Business Consultant; David Fuller, Business Analyst; Brad Messner, Information Technologist; and Shirley Susany, Office Administrator.

## Corazon has gone Hollywood!

Last year, from January to April, Wayne Calder, Senior Consultant, was Richard Gere's double/stand-in during the filming of "The Mothman Prophecies," which was filmed here in Pittsburgh. The film was released nationwide on January 25th. Check out the movie, and look for Wayne!



Wayne Calder (l), Richard Gere (r)



# The Corazon Report

N e w s P u l s e

## The Annual Corazon Conference

*The first annual Corazon Conference, entitled “Market Driven Heart Care, Strategies for 2010 and Beyond,” was a huge success!*

The conference was held September 26-28, 2001, in Naples, Florida, at the Naples Beach Hotel & Golf Club. Approximately 100 people attended, representing 17 states and 43 organizations. The majority of attendees consisted of hospital CEO’s, COO’s, Medical Directors, Vice Presidents, and Directors of CV Services.

Corazon assembled an expert panel of speakers from noteworthy programs throughout the country. The speakers shared ideas, innovations, strategies, and solutions to help conference attendees advance their market position in cardiovascular services. As Michael Mullaney, VP of Carolinas Healthcare System in North Carolina commented, “All seminars were relevant, and the speakers did a great job...this conference was definitely worthy of the time commitment.”

The three-day event was kicked-off by Rob Michler, M.D., Chief of Cardiothoracic Surgery at The Ohio State University Medical Center in Columbus, OH.

Other highlighted speakers included: Mike Belbeck, Vice President, Baptist Health Systems,

Miami, FL; Mark Dixon, Administrator, Abbott Northwestern Hospital, Minneapolis, MN; Ray Graeca, President, DuBois Regional Medical Center, DuBois, PA; Steve Krakoff, Administrative Director, The Ohio State University Medical Center, Columbus, OH; Karen Lemieux, Vice President, Holy Cross Hospital, Ft. Lauderdale, FL; Lee Lipsenthal, MD, Medical Director, Lifestyle Advantage, San Anselmo, CA; and Mike Taylor, President, Baylor Heart and Vascular Center, Dallas, TX.

Attendees also participated in two videoconferences presented by Dr. William Gray, Director, Endovascular Care, Swedish Heart Institute, Seattle, WA; and Dr. James Fonger, Adult Cardiothoracic Surgeon, Lennox Hill Hospital, New York, NY. Corazon is already gearing up for our 2002 conference and is pleased to be returning to **The Naples Beach Hotel and Golf Club in Naples, Florida, on October 2-4, 2002.** Watch our website for details as they become available.



**Dr. Grant Parr, Chief of Heart Surgery at Atlantic Health System, Jackie Johnson, President of Corazon Consulting, & Karen Lemieux, Vice President of Holy Cross Hospital enjoy refreshments at the “Corazon Tequila” Networking Reception.**