Protecting patient information

UPMC begins initiative to limit use of Social Security numbers

Historically, UPMC facilities have used the patient's Social Security number as the medical record number. As a result, this number has been displayed on a variety of items, such as addressograph plates, patient wristbands, and various printed forms.

To address patient concerns regarding UPMC’s use of Social Security numbers, the health system is launching an initiative designed to limit the use of Social Security numbers.

As part of this initiative, on Monday, April 3, MediPac, one of UPMC’s clinical information systems, will begin automatically assigning a random, nine-digit medical record number to all new patients (patients who have never been seen at a UPMC facility that registers patients in MediPac). This change will affect those patients who have no existing medical records at any UPMC facility that uses MediPac. Facilities affected include UPMC Braddock, UPMC Horizon, UPMC McKeesport, UPMC Presbyterian, UPMC St. Margaret, UPMC Shadyside, UPMC South Side, and some physician offices.

“As a national leader in the development of electronic medical records, we’re acutely concerned with issues of information security and patient privacy,” says John Houston, director, Information Services Division, and privacy officer and assistant counsel, UPMC.

To address patient concerns, UPMC formed a committee to evaluate options and implement strategies for limiting the use of Social Security numbers as patient identifiers,” adds Mr. Houston. The committee’s first goal was to address new patient medical records.

Because UPMC is required to include the patient’s Social Security number in mandatory governmental reporting, Social Security numbers still will be collected for inclusion in new patient records. However, Social Security numbers will not be used as medical record numbers for these patients.

Other UPMC clinical information systems previously addressed this issue, with good outcomes. In July 2005, a programmatic adjustment was made to the Epic practice management suite, an application used by various physician groups, to use serially assigned medical record numbers to replace new patient medical record numbers.

According to Georgina Trunzo, director, Hospital Patient Access, the change in MediPac should be seamless for patients, physicians, and staff.

“Because the medical record number will be generated automatically by MediPac for new patients, no changes in process are required by our staff at this time,” says Ms. Trunzo. “Staff will continue to ask patients for their Social Security numbers, but they won’t be entered into the medical record number field.”

Watch Extra! for updates on this initiative.

Short-term inconvenience for long-term improvement

UPMC eRecord upgrade scheduled for March 31

A n upgrade to UPMC’s eRecord (electronic health record) system will begin shortly before midnight Friday, March 31. The eRecord system is expected to be down for at least several hours at these facilities: Magee-Womens Hospital, UPMC Braddock, UPMC Montefiore, UPMC Presbyterian, UPMC Shadyside, UPMC South Side, Western Psychiatric Institute and Clinic, and UPMC/Phipps physician practices that use the PowerChart Office application.

Access to eRecord applications is expected to be restored before 7 a.m. Saturday, April 1. During the downtime period, physicians and staff will have access to clinical data via a read-only database and the Medical Archival Retrieval System (MARS). While the eRecord system is down, no new data can be entered into the eRecord applications. However, all data will wait in queue until the system is restored. At that time, the information will automatically be entered in the correct eRecord applications.

Take the time to prepare

Prior to March 31, all physicians and staff should review their department-specific downtime procedures. “By reviewing these processes prior to the downtime period, you can ensure that this will be a seamless process with no adverse impact on patient care,” says G. Daniel Martich, MD, UPMC’s vice president for eRecord applications.

Dr. Martich explains that the downtime will be used to upgrade eRecord systems to position us to better share clinical information across UPMC hospitals and facilities, regardless of their location.”

The upgrade also positions all UPMC hospitals and facilities to further develop health economy architecture (HEA).

Using HEA, physicians and clinical staff can go online and obtain instant access to information from ED visits or data about other services provided to patients at any UPMC facility.

In the next phase of HEA development, UPMC will integrate essential medical data (allergies, immunizations, patient problem lists, and medications) to make this information available to clinicians at UPMC hospitals and facilities.

UPMC Information Services Division staff will be available to respond to issues that occur before, during, or after the downtime. To contact ISD personnel, call 412-647-HELP (4357).

NATIONAL DIABETES ALERT DAY

Diabetes is devastating, and it impacts every segment of our society. It is the leading cause of new blindness, end-stage renal disease, and nontraumatic amputations. But it can progress for years without noticeable symptoms — it’s a silent killer.

The American Diabetes Association is sponsoring National Diabetes Alert Day on Tuesday, March 28, to teach people about the health problems caused by diabetes and the risk factors associated with the disease.

In conjunction with National Diabetes Alert Day, the University of Pittsburgh Diabetes Institute will offer free diabetes risk assessments and consultations with certified diabetes educators at several locations. Participants will learn if they are at risk for diabetes and gain a better understanding of the disease.

For more information about National Diabetes Alert Day activities, call 1-800-533-UPMC (8762) or visit http://diabetesinstitute.upmc.com.
UPMC lung transplant service largest in nation

With the release of the 2005 national data, UPMC has emerged as the largest lung transplantation center in the United States, performing an unprecedented 91 transplants last year. An aggressive approach to organ procurement, path-breaking protocols for less damaging treatment of donor organs, and an ability to offer transplantation successfully to patients with complex and comorbid disease have helped fuel this growth.

More important, says Kenneth McCurry, MD, director, Lung and Heart-Lung Transplantation Program, is the fact that as transplant volume has increased, UPMC outcomes have continued to improve. UPMC’s current three-month and one-year survival rates of greater than 97 percent have experienced shorter waiting times than the national average. UPMC’s lung transplant program is a joint effort of the Heart, Lung, and Emphalaged Surgery Institute and the Division of Pulmonary, Allergy, and Critical Care Medicine.

Health Plan ranked highest in state

UPMC Health Plan is the highest ranked health plan in Pennsylvania, based on information compiled by the National Committee for Quality Assurance (NCQA). The ranking is a restatement of a list that was published last October by U.S. News & World Report.

The magazine used NCQA data to compile and publish a list of America’s Best Health Plans. On March 2, NCQA announced that errors resulted in inaccurate rankings as published in the magazine. The restatement placed the Health Plan being ranked 20th in the nation. More than 257 companies were ranked.

The top plans were determined by measures established by the Health Plan Employer Data and Information Set (HEDIS). HEDIS is a set of standardized performance measures designed to ensure that purchasers and consumers have the information they need to reliably compare the performance of managed health care plans.

NCQA said it erred in placing too little weight on chronic care measures, such as the percentage of members in a health plan who received diabetic eye exams, the rate of children who received immunizations, and the rate of women who received mammograms.

UPMC for life, the Health Plan’s Medical Assistance product, retained its fifth place national ranking.

UPMC Savings Plan files IRS application

UPMC, as required by the Employee Retirement Income Security Act of 1974, as amended, will submit an application asking the Internal Revenue Service to issue a favorable determination letter with respect to the qualification of the UPMC 401(a) Retirement Savings Plan. A full copy of the “Notice to participants in the UPMC 401(a) Retirement Savings Plan” is available on UPMC Internet at http://benefits.infonet.upmc.com/Retire/Forms. Copies of the notice also may be obtained by writing to the UPMC Retirement Line tollfree at 1-887-206-8264.

HIPAA privacy notice available on UPMC Infonet

The purpose of HIPAA is to promote the privacy and Security of Protected Health Information (PHI). PHI directly applies to patients, providers, health plans, and health care clearinghouses, and indirectly to third parties that have access to PHI in connection with services provided to, or on behalf of, UPMC. Part of UPMC’s compliance includes publishing reminders at least once every three years about the availability of the health system’s privacy notice.