



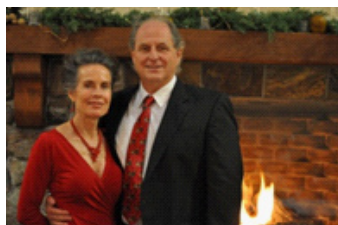
NEWSLETTER

CEO's Column:

A TCS Partnership with a Special Meaning

Rob Pock
Founder & CEO
TCS Healthcare Technologies

Over the past quarter century, TCS Healthcare Technologies (TCS) has established a number of strategic alliances and partnerships with various clients and other third parties to promote its suite of care management software products and services, including Acuity Advanced Care™.



Robert and Esther Pock

One prime example of a strategic alliance is TCS's relationship with the Case Management Society of America (CMSA). Among other activities, TCS developed, in conjunction with CMSA, Acuity

AnyWare™, a care management tool for independent case managers and small groups which was launched in 2008 and has been very successful.

TCS also is a primary sponsor of the bi-annual survey looking at care management software trends, which is co-sponsored by CMSA and the American Board of Quality Assurance and Utilization Review (ABQAURP). The results of this survey will be announced during the upcoming annual CMSA meeting.

But perhaps the most important relationship that TCS has benefited from to date is the partnership between me, as the CEO of TCS, and my wife Esther Pock, a TCS board member and co-owner.

See Special Meaning p. 5

Technology Update:

Implementing Evidence-Based Care Plans

(Reprinted from the CMSA April 2010 Monthly Newsletter)

Pat Stricker, RN, M.Ed.
Vice President, Clinical and Client Services
TCS Healthcare Technologies

When managing patients who are suffering from a number of co-morbidities, clinicians are often challenged with the number of clinical guidelines and treatment options that are available through public and commercial resources (e.g., from the Internet, written publications, electronic software applications, or other resources).



Pat Stricker, RN M. Ed.

If a case manager is treating a chronically ill patient with three or four disease states, it is very difficult

See Evidence-Based Care Plans p. 6

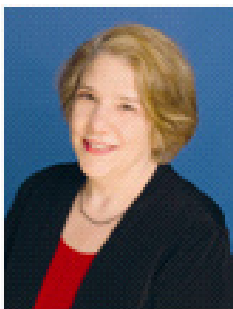
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TCS Client Spotlight:

Hudson Health Plan Selects TCS to Provide Care Management Solution

Earlier this spring, Hudson Health Plan and TCS Healthcare Technologies issued a joint press release announcing that Hudson has selected Acuity Advanced Care™ (ACUITY) as its new care management software program.



Georganne Chapin

Georganne Chapin, President & CEO of Hudson, notes, “TCS’ ACUITY will assume an integral role in empowering our team to serve the populations that we cover, who often are facing enormous social and economic challenges that complicate their health. ACUITY’s functionality will take Hudson’s care management programs to the next level by automating key workflows and making sure that the right information is getting to the right person.”

According to Janet Sullivan, MD, Hudson’s Chief Medical Officer, “ACUITY also will help Hudson and its providers deliver the quality, evidence-based care that Hudson champions. Hudson needs to make sure we are utilizing the most up-to-date evidence-based UM criteria and case management guidelines to best serve our plan members,” she notes. “ACUITY will support Hudson’s efforts to identify, implement, standardize and document health programs with the ultimate goal of improving patient health outcomes.”

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Margaret (Peggy) Leonard, MS, RN-BC, FNP, Senior Vice President for Clinical Services at Hudson,



Janet Sullivan, MD



Peggy Leonard, RN-BC, FNP

comments, “Using an integrated and dynamic system like ACUITY is critical as Hudson continues to serve our health plan members, many of whom have special needs. ACUITY’s flexibility will help us build and respond to a number of state-sponsored programs that require specific activities and reporting functions.”

As part of the TCS platform, Hudson also will be using a number of additional ACUITY tools to support its special needs populations, including: AcuStrat™, a population stratification and automation tool that turns patient healthcare information into automated actionable events; AcuPort Advanced™, a middleware software (Extraction, Transformation, & Loading) solution to link disparate information from multiple applications into one useful system; and AcuCare Programs for Asthma, Diabetes, Heart Failure, and High Risk Pregnancy. Hudson will go live with the ACUITY system later this year

Founded in the mid-1980s by a coalition of community health centers, Hudson’s mission statement is “to promote and provide access to excellent health services for all people.” The Tarrytown-based not-for-profit organization provides comprehensive medical and dental coverage to almost 100,000 members in New York’s Hudson Valley. Hudson has been driving health care innovation by developing technology to support clinical quality initiatives and to streamline the enrollment process for Medicaid Managed Care, Child Health Plus, and Family Health Plus. See www.hudsonhealthplan.org.



Product Update:

TCS Gets Ready for ICD-10 Codes

John Sekerak,
Vice President, Business Development
TCS Healthcare Technologies

ICD codes, International Statistical Classification of Diseases, are used around the world to identify the disease or medical condition of a person undergoing treatment. These codes were developed by the World Health Organization (WHO), and the ICD-9 version has been in use in the United States since the 1970's. WHO developed a newer, more extensive ICD code set which was adopted in the 1990's. These codes, the ICD-10, are used by most countries in the world, but the U.S. has been slow to make the change.



John Sekerak

The federal government has mandated that ICD-10 codes must be used for Medicare and Medicaid claims beginning October 1, 2013. It is anticipated that all claims will use the new codes for reimbursement and reporting on that date.

The codes have been modified for use in the U.S., and the complete identification of the codes is ICD-10-CM, meaning that they have been clinically modified from the codes published by WHO.

The structure of the codes is changing, going from five numeric digits to seven alpha-numeric codes. And the number of codes is increasing significantly, from 17,000 to 69,000, with a similar increase in the number of ICD-10-PCS, procedure codes.

The ICD-9 code structure was out of room because of the limitation of the five digit numeric construction. ICD-10 codes allow for a more detailed description

of the diagnosis. ICD-10 has room to accommodate new inpatient procedures of care that are already performed and new scientific causes of conditions that were not even imagined when ICD-9 codes were established. The codes also allow for greater specificity within the code itself, without requiring additional text or documentation. The new codes will allow for better analysis of disease patterns and treatment outcomes and it is anticipated that they will streamline claims submissions. With this as background, TCS is actively working on a plan to incorporate ICD-10 codes into its' products. A team was formed with members from management, clinical staff, and

ICD-10 Codes Overview

Chapter	Blocks	Title
I	A00-B99	Certain infectious and parasitic diseases
II	C00-D48	Neoplasms
III	D50-D89	Diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism
IV	E00-E90	Endocrine, nutritional and metabolic diseases
V	F00-F99	Mental and behavioural disorders
VI	G00-G99	Diseases of the nervous system
VII	H00-H59	Diseases of the eye and adnexa
VIII	H60-H95	Diseases of the ear and mastoid process
IX	I00-I99	Diseases of the circulatory system
X	J00-J99	Diseases of the respiratory system
XI	K00-K93	Diseases of the digestive system
XII	L00-L99	Diseases of the skin and subcutaneous tissue
XIII	M00-M99	Diseases of the musculoskeletal system and connective tissue
XIV	N00-N99	Diseases of the genitourinary system
XV	O00-O99	Pregnancy, childbirth and the puerperium
XVI	P00-P96	Certain conditions originating in the perinatal period
XVII	Q00-Q99	Congenital malformations, deformations and chromosomal abnormalities
XVIII	R00-R99	Symptoms, signs and abnormal clinical and laboratory findings, not elsewhere classified
XIX	S00-T98	Injury, poisoning and certain other consequences of external causes
XX	V01-Y98	External causes of morbidity and mortality
XXI	Z00-Z99	Factors influencing health status and contact with health services
XXII	U00-U99	Codes for special purposes

technical development staff to conduct a thorough review of the impact on TCS products and to propose a method to incorporate this regulatory change into the products. The team is focused on understanding the codes, identifying each TCS product that is impacted, and proposing alternatives for accommodating the change. After the research is complete and a design

See ICD-10 Codes p. 7

Research Update:

Health IT Survey Focusing on Care Management Trends to be Released Next Month at CMSA Annual Meeting

The second bi-annual Health IT Survey focusing on care management software systems will be published in June in conjunction with the Case Management Society of America (CMSA). The survey results will be available at the TCS exhibit booth during the CMSA conference and online at www.tcshealthcare.com.

In terms of types of medical management software configurations, it looks like most health care organizations who have a system are evenly distributed between in-house developed systems, vendor solutions and some combination of the two. However, it is interesting to note that about one third of the respondents indicated that they did not even have a medical management software system. This is amazing in this “age of technology”.

Medical Management Software System Configuration		
Note: Respondents could select more than one option	NUMBER OF RESPONDENTS FOR EACH QUESTION	2010 PERCENTAGE SAYING YES
In-house developed system (only)	136	21%
Vendor solution (only)	137	21%
Both in-house and vendor applications	130	20%
None at this time	208	32%
Not applicable to my work or company	70	11%

The survey is co-sponsored by TCS, CMSA and ABQAURP. Stay tuned for more details.

Case Management Best Practices:

Expanding Communication Avenues

Garry Carneal, JD, MA
Consultant, TCS Strategic Alliances



Garry Carneal, JD, MA

Traditional case management interventions often have used face-to-face, telephonic, and written communication links to support patients and others who need healthcare support. With the rise of new communication strategies that are affordable and the buzz about social media, case managers are beginning to think about expanding how they connect with their patients to improve patient engagement levels and clinical outcomes.



TCS Healthcare, through Acuity Advance Care™ (ACUITY), offers an array of options to enhance the ways that clinicians can reach out and stay in touch with their patients. Examples include letters or information packets that can be automatically queued for mailing without any manual processing, and HIPAA-compliant electronic communications, such as email and text messaging. In fact, care management software platforms like ACUITY are opening up many new doors in terms of automating workflows and coordinating patients with many co-morbidities.

As referenced in the Research Update column, the bi-annual survey of care management trends reinforces this point as well. The survey, which was completed by 670 case managers and others, predicts increased

See Expanding Communication Avenues p.7

Special Meaning (Con't from p.1)

In short, my wife is a trusted advisor on many fronts. She has been my betrothed for over 40 years and my TCS business partner for over a quarter century. She serves as a helpful sounding board, not only relating to family and life, but also on business matters. Her advice is extremely important to me whether from the kitchen table or the board room.

Among other helpful attributes, Esther gets the primary credit in terms of keeping TCS focused on its key business strengths and operational priorities. Esther brings to the TCS strategic planning process lots of common sense and business intuition. With my technical and business experience, our strengths complement each other and make us function well as a team. Our combined leadership has been instrumental in TCS' long-term stability and growth.

The Rev. Robert C. Dodds reminds us that "The goal in marriage is not to think alike, but to think together." This clearly is part of the formula that we have used to support both our personal and TCS families. The Rev. Dodds should know what he was talking about -- the former official of the National Council of Churches focused much of his career on marriage counseling.

We are proud of the fact that TCS is a family business with no outside investor debt or influence. This means that we can keep our clients our number one priority and continue to re-invest in the company. And rest assured, Esther keeps me and the rest of the TCS team on track and heading in the right direction. She reminds us weekly that finding quality-based and cost-effective solutions for our clients is our top priority.

Medical Management News Update:

CMSA Hosts Capitol Hill Visits



Capitol Hill

On April 27 – 28th, the Case Management Society of America (CMSA) hosted its first government relations conference. In addition, for the third year in a row, CMSA coordinated dozens of

visits to key congressional members the following day. Over 100 case managers participated in the two-day event.

Each year, the CMSA "Capitol Hill" day expands. Key public issues that were addressed during the congressional meetings included:

- Promoting the new Case Management Model Act;
- Discussing the new Case Management Standards of Practice;
- Advocating to align payment incentives for case managers;
- Recommending that interstate nurse licensing requirements should be standardized; and
- Highlighting the transitions of care model, which is being developed by the National Transitions of Care Coalition (NTOCC).

For more background on these issues, see www.cmsa.org and click on the "policy makers" button.

Evidence-Based Care Plans (Con't from p. 1)

to manually patch together an effective care plan that includes a comprehensive review of the problems, a clear set of unified goals, and an integrated care strategy. As a result, many case managers will identify the primary health condition or disease state to be addressed with each patient. However, by focusing on only the primary condition, other health issues may be overlooked.

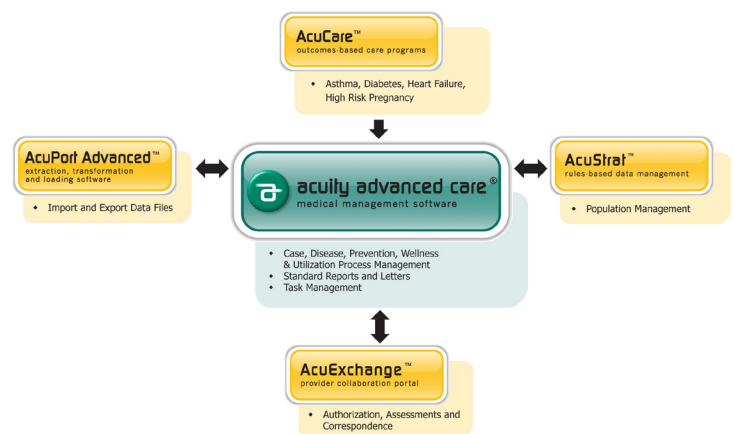
Therefore, a central challenge for clinicians today is to identify the most appropriate clinical guidelines for the populations that they serve and then be able to customize those guidelines for each patient in an efficient and clinically appropriate manner. While finding and integrating different guidelines and other clinical resources into actionable information is paramount for the effective practice of case management, it is also difficult and time-consuming.

Traditionally, clinical guidelines have a specialized focus such as those that are developed by specialty societies covering a specific health condition or branch of medicine. Other guidelines may concentrate on specific business or clinical workflows, such as length of stay (LOS) or nurse triage.

The good news is that technology now offers case managers and other caregivers new opportunities to develop higher-level care plans that incorporate a wide variety of evidence-based guidelines. Several of the leading care management software systems now do this. Information about a patient can be collected through health risk assessments, patient interviews, clinical data or other sources and then manually entered, downloaded, and/or synchronized into an integrated database. Identified risk factors in this data can automatically trigger a proposed, customized care plan. The case manager can then accept, change, or reject each suggestion or add other specific components that address individualized patient needs.

This standardized process provides up-to-date guidelines, standardization of practice, improved documentation, increased efficiency and productivity, improved reporting capabilities, and improved patient and program outcomes. Of course, clinical oversight is imperative throughout this process to make sure that the care plan is optimized and individualized for each case. In addition, some systems are better than others, so it is important to have these information technology (IT) solutions peer-reviewed and validated.

Because of the continued development of new clinical guidelines and medical breakthroughs, health IT systems will continue to assume an instrumental role in helping clinicians develop, integrate and customize care plans that are flexible, transparent and contemporary. In addition, the practice of case management is beginning to develop its own “evidence-based knowledge library” by effectively integrating disparate guidelines into coherent care plans that support chronically-ill populations. This is especially needed to help patients navigate the healthcare system and to promote better transitions of care and health outcomes.





TCS Headquarters in Auburn California

Expanding Communication Avenues (Con't from p. 4)

reliance over the next two years on communication media such as email, text messaging, personal health records, smartphone applications, remote monitoring connections, and other new communication options. Interestingly, the survey results show a slight decrease in the reliance by case managers on telephone calls, letters, and face-to-face interactions in the future.

Of course, the recent negative press that Facebook has received regarding its privacy policies -- which often are not optimized for patient protection -- is a warning that case managers must be informed communicators no matter what the medium.

The nice thing about running these enhanced communication links through a system like ACUITY is that everything is documented, allowing for easy tracking, retrieval and reporting of information. This also helps with regulatory, business and clinical compliance requirements.

ICD-10 Codes (Con't from p. 3)

approved, work will begin on the coding and testing phases of this project. Our goal is to have this available to our clients by mid-2011, giving clients over two years to evaluate how the changes affect their organizations, plan for the transition period, and review workflows and reports.

The TCS team is striving to make the transition to ICD-10 codes as simple and straight forward as possible so that there is minimal disruption to our clients' organization; at least as the change impacts TCS products. Going forward, TCS will keep its clients informed of the release dates for TCS products that support ICD-10 codes.

For additional information about ICD-10 codes, see <http://www.ahima.org/icd10/understanding-icd-10.html>.

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¹ Survey results to be published in June 2010, see www.tcshealthcare.com for details. Survey co-sponsored by ABQAURP, CMSA and TCS.