

Hi-Tech Express

Volume 10, Issue 1

March 2004

Special points of interest:



- The *HTS Express* celebrates its 10th birthday this month. Our first issue was published in March 1994.
- March 17: St. Patrick's Day
- March 20: Spring begins
- April 4: Daylight Savings Time begins
- April 11: Easter Sunday

Inside this issue:

Website Lists Current Release Numbers	2
New HTS Clients	2
HTS-CareTracker Excites HTS Clients	3
Do You Know? Processing Tips on the MDS-RCA and QA on Medications	4
Processing Tips on Quality Indicators MDS Schedule Report Payroll	5

Hi-Tech Creates Interface to CareTracker™ Touch Screen System

Hi-Tech recently hosted workshops at which Resource Systems presented its CareTracker Supportive Documentation System. With CareTracker touch screens located throughout the facility, the resident care staff quickly and easily record observations on residents' ADLs, mood, behavior, continence, wounds, activities, pain, weight, etc.

The screens use pictures to identify the different categories, reducing the amount of reading that is required when documenting on paper forms. Touching the available responses on the screen is much quicker than writing responses.



The HTS interface to CareTracker pulls observation data into the HTS Clinical Records System to complete some sections of the MDS record. You can print an audit to review all the observation dates, times, and responses that are used to calculate specific MDS responses.

The system encourages the staff to immediately record activity, resulting in more accurate documentation to support MDS responses. This typically results in higher reimbursement rates. Resource Systems reports that 80% of facilities using CareTracker have improved reimbursement by more than \$50,000 per year.

CareTracker provides extensive management reporting tools, in chart and graph format, for viewing trends and changes in resident behaviors and activity. The reports can also reveal how accurately and consistently your staff is recording observations of residents' care.

For more information, call John Hilton at HTS, and visit the Resource Systems website at www.resourcesystem.com. Read about HTS clients' reactions to CareTracker on Page 3.

HTS Upgrades RMCobol to Version 8.01

Hi-Tech is upgrading to a more advanced version of the RMCobol programming language. HTS will send the RMCobol Version 8.01 to all clients, and you must install it on all your computers that run HTS applications.

In February, HTS notified all facilities that HTS programs created or updated under RMCobol 8.01 will *not* run under Windows 95.

If you now run HTS applications on a Windows 95 computer, you must upgrade that computer to at least Windows 98 before you install RMCobol 8.01. HTS recommends that you upgrade Windows 95 systems to Windows 2000 or XP.

Contact your hardware support vendor as soon as possible if you need assistance.

HTS Website Lists Current Release Numbers

To verify that your HTS applications are up to date with the current release, go to www.hi-techsoftware.com.

Click **Client Access > Software and Documentation Updates**. Enter your Account Number and Access Code (already provided to your HIPAA contact). The next screen lists all the HTS applications and the current release numbers. If you see HTS applications that you do not use, and you would like more information on them, call John at HTS.

MaineCare Eligibility Form Now Available

The Clinical Records System provides the MaineCare Eligibility Form that you can use to assess a resident's eligibility for Maine Medicaid coverage. From either the Nursing or Residential Care system select: **01 Resident Records > 08 Other Resident Forms > 01 Print MaineCare Eligibility Form**. The printed form will include information from your facility profile and the resident's face sheet. You choose to include current MDS or RCA information on the form.

Maine BMS Offers MDS Training

The State of Maine Bureau of Medical Services offers regular training workshops on the MDS 2.0 and MDS-RCA. Call the State's MDS Help Desk at 1-800-321-5557 Ext. 73931 for a list of scheduled workshops.

State of Maine to Change the MDS-RCA

The State of Maine is developing a Correction Policy for the MDS-RCA. This policy will be similar to that used to modify and inactivate the MDS 2.0 record.

Hi-Tech is working with the State so that our programs integrate the correction features as of the effective date of July 1, 2004.

In June, the State will hold training workshops on the new procedures.

HTS plans to follow the State's training sessions with its own training on the HTS programs. HTS will mail you the schedule when it is available.

837 Billing Requires Specific Resident ID Format

The FISS Medicare system does not accept electronic 837 records that include characters other than letters or number; for example patient ID numbers with asterisks, dashes, slashes, (*- /) or spaces.

With Release W4.03 of the Resident Accounting System, when you create the billing file for Medicare and Medicaid in New Hampshire or Ver-

mont, the HTS program will remove these characters.

The Medicaid or Medicare remit will list the amended patient ID. For example, if a patient ID # is 12-3456, the dash will be removed, and the remittance statement will report the number as 123456.

HTS to Hold Res Care Workshops

HTS has scheduled review workshops for users of the **Clinical: Residential Care System**.

HTS Trainer, Claire Bourque, will review face sheets, orders, MARs, the MDS-RCA, care plans, and documentation records. Claire will emphasize how to use the HTS programs to meet state regulations and to accurately document the information submitted on residents' MDS-RCA records.

This workshop is intended for users who have some experience with the system. Users with little or no experience should schedule on-site training.

Call HTS to register for:

- Thursday, March 25: Waterville
- Tuesday, March 30: Portland
- Friday, April 2: Caribou

HTS Welcomes New Clients

- Independent Living Systems
Coral Gables, FL
- The Munne Center
Miami, FL
- Crescent Manor Care Center
Bennington, VT

Free to First Callers

- Ten new Sony TR-4 backup tapes.
- One new OL 4003/600e/810e Series/Okipage 6e/6ex toner cartridge.
- One new Okidata OL400e/800e Series Image Drum Kit.
- Four HP 24GB backup tapes.

Call Sharon at (207) 474-7122.

HTS - CareTracker Interface Excites HTS Clients

Concerned about quality of care, charting and MDS accuracy, and looking for ways to increase reimbursement, our client facilities have shown keen interest in Hi-Tech's interface to the **CareTracker™** Supportive Documentation Software.

In February, representatives from Resource Systems of New Concord, Ohio traveled to New England to demonstrate the CareTracker touch-screen charting system. Hi-Tech followed with a demonstration of the interface that pulls data from CareTracker into the Hi-Tech MDS program. Hi-Tech and Resource Systems will repeat this dual presentation on March 23 in Caribou, Maine.



With Hi-Tech and CareTracker, I'd be home by now!

After attending the workshop, several facilities scheduled on-site demonstrations of the product. HTS spoke with users who would like to implement CareTracker in their facilities.

St. Andrews Village, Boothbay Harbor, Maine has already scheduled an in-house presentation. For **Connie Creele**, RN, the MDS Coordinator, the primary benefit of CareTracker is that charting will become much more accurate. She likes that the system does not reveal observations made on previous shifts, therefore, responses cannot be copied from one shift to another, as is sometimes done with paper charting.

Connie also finds it a benefit that she will no longer have to count up all the responses for a particular item, determine the MDS response, and then enter it into the resident's MDS record. The HTS interface will automatically tabulate charted observations, calculate the MDS responses, and insert them into the MDS.

Cheryl Lowry, RN, the MDS Coordinator for **Courville at Nashua**, New Hampshire, expressed her enthusiasm with these words, "I am so psyched! This will make my job so much easier. I will no longer have to search for the information I need to improve RUG scores. CareTracker and Hi-Tech will provide it automatically."

Cheryl believes that CareTracker will encourage CNAs to take full credit for *all* the work that they do. In addition, if a CNA is uncertain about how to code her activity, she can request the CareTracker program to play a short video that demonstrates the

meaning of the available responses; for example, the differences between Limited and Extensive Assistance for ADLs.

Cheryl thinks CareTracker is the "future of health care" and that it will improve accuracy for assessments, care planning, and residents' quality of life. She believes that implementing CareTracker would be a wise investment for her facility, and she predicts that they will get back the cost of the system "tenfold".

Rebecca Greaves, RNC, is the Director of Nursing at **Dexter Nursing Home** in Dexter, ME. Rebecca said she'd be thrilled to install the CareTracker system. The system would help the facility to raise residents' RUG scores and save

money spent on payroll hours and paper forms. She is sure they would recoup the cost of the system without much effort. In addition, the system will be good for the CNAs, who sometimes need to hurry through charting at the end of their shifts. Instead, they will chart throughout the day immediately after assisting or observing a resident.

From a management point of view, Rebecca likes the system's ability to track and report on trends in residents' conditions and activities.

Woodridge in Barre, VT has been using CareTracker for six months, and administrator, **Richard Morley**, says the system is working well. They have completed the first phase of a well-paced implementation and training process; and they are ready to add more charting features. Having charted just ADLs through CareTracker for the past six months, they have already seen an increase in RUG scores due to more accurate charting. **Joan Potter**, of Woodridge, just returned from a CareTracker training session for the next phase of their implementation. She thinks the system "is just awesome", and that Resource Systems really listens to its users' suggestions so that they can continue to improve the system and make clinical jobs easier.

CareTracker will encourage CNAs to take full credit for all the work that they do.

To learn more about CareTracker, go to their website at www.resourcesystem.com, where you can run an on-screen demo and read success stories from facilities that use the system. To schedule an on-site presentation call John Hilton at HTS (207) 474-7122.

Do You Know?

You Can Lose Open MDS-RCA Records

Until HTS implements the State's new correction policy, the **Edit RCA Records** program will maintain only one **Open** RCA record per resident. An RCA record remains Open until it is printed. When printed, its status changes to **Complete**, and it can be submitted. If you make changes to a Complete record, the status will become Open again.

If you create a *new* RCA record, or *re-open* a **Complete** record while there is still an Open record, the program will display a Warning message: **This will REPLACE the open record above with this one. Is this OK?**

To save the Open record, click **No**. Print the Open record to change its status to Complete. You can then create the new RCA record or open a complete record without losing a record. (If you click **Yes**, the Open record *will be replaced* by the new or re-opened record.)

You Can Use Quality Assurance to Track Residents' Medications

Even if you do not print MARs through the HTS Clinical System, you can still enter med orders through the **Edit Orders** program to obtain Quality Assurance (QA) reports on certain classes of medications. The accuracy of the report requires that the medications be coded by drug class.

You should first print the User-Defined Drug Class List to see which classes have been provided by HTS. From the Clinical: Nursing or Residential Care menu choose **01>02>14>08 Print Drug Class Codes**. Click **User Defined**.

The list will include nearly 100 classes of meds, such as psychotropics, diuretics, etc. You can edit this list to suit your facility's needs through **07 Edit Drug Class Code**. (You can delete classes that you do not plan to track, however, meds in the NDC file that you received from HTS might be coded with these drug classes.)

Next, verify that drug class codes are assigned to all the medications to be tracked. Select **01> 02>14> 05 Edit National Drug Codes to display the Edit National Drug Codes (NDC)** screen as shown above.

Look up the meds to be tracked and enter the Med Class Number you

Edit National Drug Codes (NDC)

National Code:

Dose:

NDC Med Name:

Generic Name:

Med Class Number: (Us

will use to identify them. (Med Class Number is the same as the Drug Class code.)

You can now begin QA reporting on medication orders entered into the system through the Edit Orders program.

Select **02 QA, QI...** and **03 Quality Assurance (QA): Medications** to display the **Quality Assurance: Medications** screen shown below.

Select **User Defined** and **Selective** and enter the Drug Class code of the meds you want to track. The report will list all residents with orders for medications coded with that drug class.

To insure the accuracy of this report, it is very important that all meds in the NDC library within a particular class are properly coded with the correct Drug Class.

Quality Assurance: Medications

Census Date

Class Type User Defined QI Defined

Drug Classes to Print All Selective Drug Class DIURETICS

Drug Type NDC Name Generic

Drug Name

Clinical Quality Indicators Report QIs for up to 12 Periods

You can review Quality Indicator totals for up to 12 historical dates through the Clinical: Nursing and Residential Care Systems. From either system, select **02 QA, QI...** and **01 Quality Indicators (QI)**.

To view historical QIs that are already calculated, select **03 Print / Display Quality Indicators**. At Sort Order, select **QI's**. At Report Format, select **History**. Select the QIs that you want to view, and print the report.

If you do not regularly update your history QIs, you might see old dates like those in the example below.

01.07 107 Occurrence of Injury			
01/03/00	01/07/00	01/17/00	
0	1	1	

You can recalculate QIs for dates that you choose. From the QI menu select **02 Update 12 Period QI History**. At Census Date, enter the date for which you want to recalculate, and then click Run. The program will use this date to search MDS History and

locate each resident's MDS or RCA record as of that date. QIs will be calculated from these records.

Rerun the program for each date that you want QI totals. The QI History report will list the dates in the order that you calculate them, so build from *oldest* to *newest* date. You might also want to use your state's monthly MDS census date, i.e., the 15th or the last day of the month. In the example shown below, HTS calculated QIs for an entire year.

01.02 (02) (02) Prevalence of falls												
02/28/03	03/31/03	04/30/03	05/31/03	06/30/03	07/31/03	08/31/03	09/30/03	10/31/03	11/30/03	12/31/03	01/31/04	Current
6	5	6	6	6	4	4	4	4	5	5	5	5

How to Print the Other MDS Schedule Review

From the Clinical: Nursing Care-System select **01 > 03 > 01 > 09 Print Other MDS Schedule**.

Report Date:

Due Thru Date:

Skip Assessments in Process

Include Medicare Stays

Nursing Levels Only (1+2)

Sort by Unit Individual Unit:

Sort by Date

The Report Date entered will print at the top of the report. At Due Thru Date, enter the date through which you want to list records.

Skip Assessments in Process: *Un-*check this to include assessments that are already started.

To include Medicare residents, check **Include Medicare Stays**. If you leave this *unchecked*, and Medicare residents are included on the list, verify that they have current Medicare Stay Tables, and that required Medicare assessments are complete.

Nursing Levels Only (1+2): leave checked to list levels 1 and 2 (SNF and NF). Uncheck to include all levels.

You can also sort by Unit and Next Assessment Due Date.

The report will list the following:

New Admits: The admission assessment will be scheduled 14 days from the Admit date.

Existing residents: the next assessment will be scheduled from the R2b date of the most recent *complete* MDS. If the three most recent assessments are quarterly records, the next scheduled assessment will be an annual.

Discharges: If most recent record is a Discharged--Return Anticipated, the next scheduled record will be listed as a Reentry record. If Return Not Anticipated, the resident will not be listed.

The program uses an 84-day scheduling cycle. You can change this through **07 > 12 > 02 Edit Facility MDS ID Record** at Quarterly Review Days .

Print a Quarterly Payroll Report for Prior Quarters

Through the Payroll System, select **08 End of Quarter Processing > 01 Print End of Quarter Reporting**. Enter the Payroll Quarter and Payroll Year. Only those quarters processed through HTS are available.

Report Date:

Payroll Quarter:

Payroll Year:

Fed Unemp Rate:

State Unemp Rate:

State Surtax Rate:

To Reprint Payroll Checks

When you reprint *all* payroll checks, leave this box *unchecked*:

Reprint all checks after employee #

If check printing is interrupted, and you need to restart printing from the last good check, check this box and enter an employee ID number:

Reprint all checks after employee #



**Uniquely Focused
on Long Term Care**

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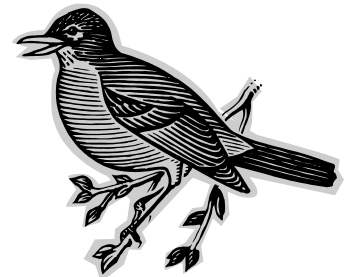


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