



# QUALITY UPDATE

A monthly publication providing information and updates to CompuNet Clients.

Mission: Improve the Health of Our Community through Excellence in Medical Laboratory Services

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## Are You Ready for 2011 and HITECH?

By Kim Stanforth – Marketing Specialist

**I**t may not have the drama of Y2K, but 2011 will bring real and fundamental changes to how you manage your practice.

Undoubtedly you've heard about the American Recovery and Reinvestment Tax Act of 2009. You may also be aware of the federal stimulus payment incentives available for physicians and hospitals through the Health Information Technology for Economic and Clinical Health (HITECH) Act. The Act includes payment incentives for physicians within medical practices that adopt and use electronic health records (EHR) and, eventually penalties for those that do not.

As your laboratory partner, we are closely monitoring what impact HITECH and the federal stimulus will have on you. To better understand the federal stimulus payout, the graph below may help clear up some confusion:

Year EHR Adopted	HITECH payment incentives over time (dollars)			
	<b>2011</b>	18,000.00		
<b>2012</b>	12,000.00	18,000.00		
<b>2013</b>	8,000.00	12,000.00	15,000.00	
<b>2014</b>	4,000.00	8,000.00	12,000.00	15,000.00
<b>(2015)</b>	2,000.00	4,000.00	8,000.00	8,000.00
<b>(2016)</b>		2,000.00	4,000.00	8,000.00
<b>Total</b>	<b>44,000.00</b>	<b>44,000.00</b>	<b>39,000.00</b>	<b>35,000.00</b>

- If a physician implements an EHR in either **2011** or **2012**, he or she is eligible to receive up to a total of \$44,000 in payment incentives.
- If an EHR is implemented in **2013** or later, the payment incentives are reduced.
- Beginning in **2015**, physicians who choose not to adopt an EHR will be penalized with Medicare fee reductions. The penalties will increase in subsequent years.

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## Are you Ready for 2011 and HITECH? *continued from Page 1*

### Frequently Asked Questions:

**Q:** Is installing an EHR in my practice enough to qualify for incentives and avoid the penalties?

**A:** No. The federal government requires that you employ “meaningful use” of your EHR.

**Q:** What is considered “meaningful use”?

**A:** The criteria which qualify as “meaningful use” are still in development and rules are expected to be written by the end of 2009. The Department of Health and Human Services (HHS) states, “The HHS generally expects that, under Medicare, meaningful EHR users would demonstrate each of the following:

- Use of a certified HER
- The electronic exchange of health information to improve the quality of health care; and
- Reporting on clinical quality and other measures using certified EHR technology.

**Q:** How do I choose a “certified EHR”?

**A:** There are many reputable EHR vendors and EHR costs can run from \$0 to tens of thousands of dollars. Spending more does not necessarily guarantee that you have chosen the right EHR for your practice. At this writing, certification will be awarded by the Certification Commission for Health Information Technology (CCHIT) and to date a list of certified EHR vendors has not been released.

CompuNet sales representatives will keep you apprised of developments and will be able to offer insight about different qualified electronic solutions and EHR capabilities. For the latest updates regarding HITECH visit the Department of Health and Human Services’ website: <http://www.hhs.gov>.

## **CompuNet is an In-Network Provider with Medical Mutual of Ohio** *By Sandy Tackett, Billing & Client Services Manager*

CompuNet is an in-network provider with many insurance plans including Medical Mutual of Ohio, Anthem, United Healthcare and Aetna.

For the most up-to-date information regarding coverage, we recommend that patients always contact their insurance provider to verify coverage for any medical service.

## ***Helicobacter pylori* Testing Options at CompuNet Clinical Laboratories**

*By: Ike Northern, Microbiology Manager*

*Helicobacter pylori* is a bacteria that is the main cause of peptic ulcer disease and a major risk factor for gastric cancer. It is estimated that 40-50% of adults in developed countries have been exposed to this organism. Infected individuals may develop acute gastritis with subsequent chronic infection occurring in most people.

The American Gastroenterological Association (AGA) released guidelines in 2005 for managing dyspepsia. Some of the highlights include:

- Serological testing for *Helicobacter pylori* antibodies should no longer be performed since it cannot detect active infection.
- The *Helicobacter pylori* Stool Antigen Test or the Urea Breath Test is recommended for detecting active infection.
- Patients presenting with dyspepsia without alarm symptoms (dysphagia, GI bleeding, new-onset symptoms after the age of 50 years, unexplained anemia or weight loss, and severe vomiting) should be tested for *H. pylori* prior to being prescribed proton pump inhibitors.
- Testing to prove eradication should be performed in certain circumstances (*H. pylori* associated ulcer, persistent dyspepsia in spite of treatment, *H. pylori* associated with mucosa-associated lymphoid tissue lymphoma.). If eradication testing is performed, it should be completed no sooner than 4 weeks after completion of treatment.

**CompuNet offers both the Stool Antigen Test and the Urea Breath Test for the detection of *Helicobacter pylori*. Both tests are highly accurate with sensitivities and specificities of >95%.**

When a patient is infected with *H. pylori*, the organism passes through the digestive tract along with food that is ingested and exits the body in the stool. The organism may be detected in the stool by using the Stool Antigen Test (Order Code 34838). A stool sample submitted in a clean cup is the appropriate sample for this test.

The sample for the Urea Breath Test (Order Code 75181) is collected at several CompuNet Patient Service Centers. (See list on next page). The patient blows into a mylar bag to collect a baseline breath sample. The patient then ingests a urea solution containing C<sub>13</sub>-labeled urea.

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## ***Helicobacter pylori* Testing Options**

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If *H. pylori* is present, a urease enzyme that is produced in high concentrations by *H. pylori*, will rapidly break down the urea into ammonia and C<sub>13</sub>-labeled CO<sub>2</sub>. A second breath sample is then collected. Both samples are tested for the C<sub>13</sub>-labeled CO<sub>2</sub>. When the concentration of the C<sub>13</sub>-labeled CO<sub>2</sub> in the second sample is elevated above a specific threshold when compared to the baseline sample, it is reported positive for *Helicobacter pylori*.

Note: Proton pump inhibitors, bismuth preparations, and antimicrobials interfere with the detection of *Helicobacter pylori* in both of these tests. These medications should be discontinued at least 2 weeks prior to testing.

For additional questions, contact Ike Northern at (937) 297-8334 or [william.i.northern@questdiagnostics.com](mailto:william.i.northern@questdiagnostics.com).

### References:

AGA Technical Review on the Evaluation of Dyspepsia 2005; 129:1756-1780.

“In testing for *H. pylori* ... The Evidence Is In”, Meretek information brochure 0507P-0034, September, 2007.

“Announcing New Guidelines from the AGA” information sheet, Meridian Bioscience, Inc., 2006.

American College of Gastroenterology Guideline on the Management of *Helicobacter pylori* Infection, American Journal of Gastroenterology 2007:10.

## **CompuNet Patient Service Centers Offering the Urea Breath Test**

**MIDDLETOWN** 62 North Breiel Blvd.  
PH: (513) 423-9694 FAX: (513) 423-9603  
Hours: Mon – Fri: 7:00 AM – 5:00 PM Sat: 8:00 AM – 12:00 PM

**MIAMI VALLEY HOSPITAL OUTPATIENT LAB** One Wyoming St.  
PH: (937) 208-3666 FAX: (937) 226-7485  
Hours: Mon - Fri: 5:30 AM – 6:00 PM Sat: 6:00 AM – 12:30 PM

**OAKWOOD** 2600 Far Hills Ave.  
PH: (937) 294-2751 FAX: (937) 294-5672  
Hours: Mon – Fri: 8:00 AM – 12:00 PM; 1:00 PM – 5:00 PM  
Sat: 7:30 AM - 1:00 PM

**CENTERVILLE** 7901 Schatz Point Dr.  
PH: (937) 291-0960 FAX: (937) 312-9163  
Hours: Mon – Thur: 8:00 AM – 12:30 PM; 1:30 PM – 5:00 PM  
Friday: 8:00 AM – 12:30 PM

**EATON** 200 Eaton Lewisburg Road  
PH: (937) 472-0013 FAX: (937) 472-0015  
Hours: Mon – Fri: 7:30 AM – 12:30 PM

**SPRINGFIELD NORTH** 2100 Emmanuel Way, Ste. C  
PH: (937) 342-0015 FAX: (937) 342-0034  
Hours: Mon- Fri: 7:30 AM – 4:30 PM Sat: 7:30 AM – 11:30 PM

**VANDALIA** 900 South Dixie Dr. Suite 10A  
PH: (937) 898-9284 FAX: (937) 898-1583  
Hours: Mon – Fri: 7:30 AM – 5:00 PM Sat: 7:30 AM – 1:00 PM

**TROY** 1888 W. Main St.  
PH: (937) 335-0363 FAX: (937) 339-4794  
Hours: Mon – Fri: 7:30 AM – 5:00 PM Sat: 7:30 AM – 1:00 PM

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## **Belbrook Patient Service Center Update**

Please be aware that as of Friday, January 15, 2010, the Bellbrook Patient Service Center will be moving its operations and phlebotomy staff to the MVH South Patient Service Center in Centerville. Please alert your patients who currently use the Bellbrook location.

**MVH South Patient Service Center**  
2350 Miami Valley Drive  
Monday - Friday: 8AM - Noon; 1PM - 5PM  
Phone: (937) 291-0604

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## Reminder of Handling of Specimens in Cold Weather!

Winter is upon us so remember to take additional precautions for specimens that are placed in CompuNet lockboxes that are located on the exterior of buildings.

- Bring the lockbox in the building when not in use. Having the box at room temperature when placed outside will provide additional time before the specimens might be compromised.
- Wrap the samples in newspaper or other insulating material. Again this will keep the samples protected from the freezing temperatures for a long period of time.
- Place the lockbox outside at the very last minute - the less time samples are exposed to the cold the better.

We make every effort to pick samples up from the lockboxes as quickly as possible; however the snow, ice and cold weather can make it difficult to get around the Miami Valley as quickly as we might like. These simple precautions will go a long way to ensure the quality of the samples and thus the quality of the results obtained from them.



**Happy Holidays** to you and your families  
from the staff at **CompuNet Clinical Laboratories!**

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Thanks to contributors: Kim Stanforth, Ike Northern and Sandy Tackett

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