



## Quarter 3 STQN Newsletter

### Health Essentials:

*Exploring palliative medicine, depression and fall assessment screenings, and relevant documentation practices.*



### Dates to Remember:

**Third Quarter STQN Board Meeting**  
Aug. 13 | 5:30 p.m. | Ponchatoula Conference Room

**Colon Cancer Screenings in 2024**  
**L. Phillips Jenkins, MD (1 CME)**  
Aug. 15 | 5:30 p.m. | Zoom

**Third Quarter STQN Finance & Operations Committee**  
Sept. 10 | 5:30 p.m. | Ponchatoula Conference Room

**The ABCs of X, Y & Z: The Blending of Generations in Healthcare**  
**Fred Schouest, MD (1 CME)**  
Sept. 19 | 5:30 p.m. | Covington & Mandeville Conference Rooms

**Fourth Quarter STQN Performance Management Committee**  
Oct. 8 | 7 a.m. | Ponchatoula Conference Room

### Second Quarter Medical Director's Award

**Congratulations to Dr. Rick Casey, recipient of the second quarter award for 2024.**

**"He has been a leader in developing the Chronic Obstructive Pulmonary Disease (COPD) Transitions of Care Program, a much-needed program that assists high-risk patients diagnosed with advanced COPD."**



### A Message from our Chairman:

STQN Physicians,

I am happy to announce that the STQN website is now up and running.

The website showcases a wealth of knowledge for member physicians, patients and community employers. It also provides a quick and reliable means to search for physicians in our network who can help care for patients when referrals are needed, as well as providing information to patients about individual members physicians.

I believe that this tool will be extremely valuable as patients search for doctors and networks of doctors in whom to entrust their healthcare needs.

The website can be reached at STQN.org or through the QR code on the member door sticker mailed to each practice earlier this year.

I encourage each of you to explore the site; I think you will be very impressed with the final product.

Sincerely,

L. Phillips Jenkins

# Compassionate Connections: Embracing Palliative Medicine for Extra Support and Relief

## Spotlighting STHS's Palliative Medicine Program:



## What are the benefits to providers utilizing Palliative Medicine services?

- Improve patient quality of life
- Provide patient, family and provider support
- Decrease readmission rate
- Decrease RAMI
- Decrease hospital length of stay
- Increase Hospice length of stay
- Increase HCAHPS
- Increase ACP completion
- Symptom management assistance
- Patient education on disease trajectory/prognosis



## How to place Palliative Medicine Referrals in Epic:

Palliative Medicine Clinic	Inpatient Palliative Medicine	Cancer Center Palliative Medicine	Palliative Medicine Home Care
<ul style="list-style-type: none"> <li>• <b>REF1250</b> or Ambulatory referral/consult to Clinic Palliative Medicine</li> <li>• Enter STPH OP Palliative Care in the "To Dept" section of the referral</li> </ul>	<ul style="list-style-type: none"> <li>• <b>CON27</b> or Inpatient Consult to Palliative Medicine into the Manage Orders tab</li> </ul>	<ul style="list-style-type: none"> <li>• <b>REF1250</b> or Ambulatory referral/consult to Clinic Palliative Medicine</li> <li>• Enter OSTC Palliative Care in the "To Dept" section of the referral</li> </ul>	<ul style="list-style-type: none"> <li>• <b>REF125</b> or Ambulatory referral/consult to Home Palliative Medicine</li> <li>• Enter STPH OP Palliative Care in the "To Dept" section of the referral</li> </ul>

## Advanced Care Planning:



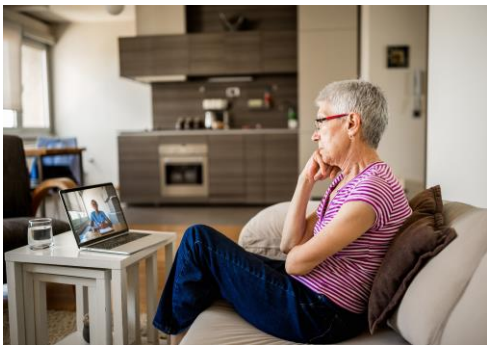
- Advance Care Planning (ACP) is pivotal throughout the continuum of care for our patients and their families, but this statement holds true especially in the ambulatory setting. Having honest, ongoing and prognostic conversations with patients and their families can help alleviate unnecessary suffering, futile procedures and prevent readmissions.
- To check if your patient has ACP documents such as a LaPost or a living will on file, you can find them in the code banner within Epic under the patient's picture. When completing or collecting ACP documents, please email them to [acpdocuments@stph.org](mailto:acpdocuments@stph.org) for proper scanning and archiving into Epic.

# Why it Matters: Insights into Depression Screening and Fall Assessments



- According to the World Health Organization, an estimated 300 million people, nearly 4.4% of the world's population, are projected to be affected by depression.
- The U.S. Preventive Services Task Force recommends conducting depression screenings in the primary care settings to ensure accurate identification and timely intervention.

**Coding for Annual Depression Screening:  
G04444**



- According to the CDC, there are over 14 million reports of falls among older adults every year, making falls the top cause of injury for individuals 65 years and older.
- Older individuals who seek medical attention due to a fall, report recurring falls in the past year, experience difficulties with walking or balance, have a fear of falling, or show signs of unsteadiness or difficulty during gait and balance tests should undergo a falls risk assessment.

**Coding for Fall Assessment:  
M1069**

## Maintain your Focus on Accurate and Relevant Documentation

- STHS has identified a trend whereby inpatient consultants are entering diagnoses into the medical record outside of their area of expertise. Such diagnoses frequently include NSTEMI, sepsis, respiratory failure and heart failure exacerbation, to name a few.
- We understand the attempt to provide comprehensive care by noting all observed conditions, but please remember that discrepancies in documentation can lead to unnecessary queries and potentially impact our quality metrics and reimbursement processes. The comprehensive capture of all active conditions should be left up to the primary attending.
- By adhering to your specific areas of expertise, we support our collective goal of streamlined, effective patient care and accurate clinical documentation.

