



Quarter 2 STQN Newsletter

Examining readmissions, clinical documentation excellence and highlights from the 2025 STQN Annual Meeting



Dates to remember:

- Second-quarter STQN board meeting
May 1 | 5:30 p.m. | Ponchatoula Conference Room
- Physician Wellness CME
Fred Schouest, MD
June 5 | 5:30 p.m. | Zoom
- Third-quarter STQN Performance and Operations Committee meeting
July 8 | 7 a.m. | Ponchatoula Conference Room
- Growing Your Practice Through Social Media CME
Joshua LeBlanc MD and Amy Bouton
August | TBD

A message from STQN:

STQN Physicians,

As we move into the second quarter of 2025, we would like to share the 2025 STQN goals with you. If you have any questions, please do not hesitate to reach out.

2025 STQN Goals

Achieve	• EPO shared savings through Blue Cross
Improve	• Health outcomes of STHS colleagues and dependents
Maintain	• Physician alignment
Increase	• Physician satisfaction
Continue	• Provider education on value-based care

First-quarter Medical Director’s Award

This quarter’s Medical Director’s Quality Award was presented to Dr. Ricardo Blanco for “his exceptional contributions to the advancement of lung cancer diagnosis as well as to the field of continuing medical education on lung cancer.”



Sincerely,
STQN

A targeted approach on readmissions

The why:



Minimizing hospital readmissions is essential for enhancing patient health outcomes, reducing healthcare costs and improving patient experience. STHS is dedicated to identifying and addressing trends that lead to readmissions. More specifically, STHS is focusing on various key drivers of unplanned readmissions. These key drivers include:

- CHF
- COPD
- Pneumonia
- Sepsis
- Post Acute Care

STHS strategies to reduce readmissions:

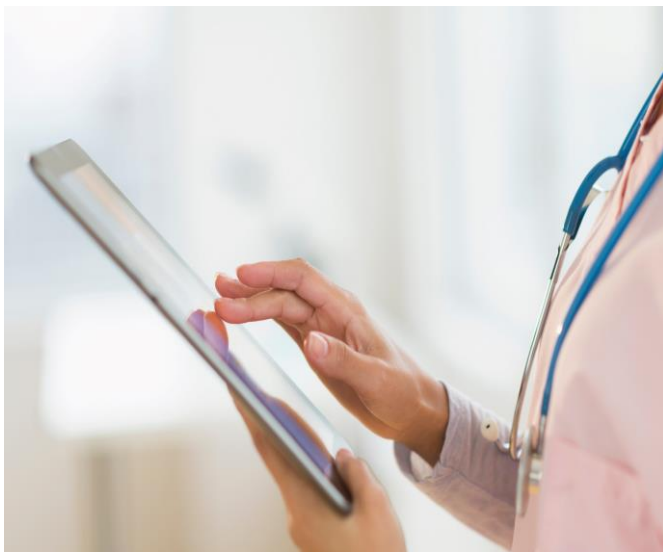
- Develop standardized discharge planning processes and begin discharge planning at admission.
- Perform medication reconciliation at admission and discharge.
- Implement daily SIBR (standardized interdisciplinary bedside rounding).
- Refer all eligible patients with SDOH needs to appropriate community resources.
- Enhance use of hospice and palliative care.
- Develop integrated post-acute network.
- Schedule patients with a HOSFU appt prior to discharge within 0-7 days (scale Smart Scheduling pilot).
- Enhance inpatient communication with outpatient and ED.
- Review data and complete monthly readmission reviews via facility readmission committees.
- Address DRG focus areas depending on population (specifically CHF).



Navigating the path to clinical documentation excellence (CDE)

The importance of CDE:

- CDE reviewers assist physicians and other care providers in accurate documentation by sending queries to clarify unclear documentation.
- The CDE process is used in outpatient and inpatient areas to support the most comprehensive documentation of a patient's medical, social and behavioral situation, appropriately describing the provision of quality care.
- Don't use abbreviations.
- Every medication should have a linked diagnosis.
- Review the record before signing it.
- Be careful not to copy and paste inaccurate information.
- Factors into shared savings/risk for certain commercial contracts.
- Protects against potential Office of Inspector General (OIG) and Centers for Medicare & Medicaid Services (CMS) audits.
- When coding a diagnosis, it is recommended to utilize the MEAT criteria (monitor, evaluate, assess, treat).



Monitor

Signs, symptoms, disease progression, disease regression.

Evaluate

Test results, medical effectiveness, response to treatment.

Assess

Ordering tests, discussion, review records, counseling.

Treat

Medications, therapies, other modalities.

Urine albumin-to-creatinine ratio update:

New Health Maintenance Topic – Annual UACr

There is a new Health Maintenance topic for patients with Chronic Kidney Disease (CKD) Stages 3-5. The Annual UACr care gap can be satisfied with MICROALBUMIN / CREATININE RATIO URINE [LAB689] and will display for patients who are not on the diabetes registry and have a CKD 3-5 diagnosis documented on their problem list, medical history, or 2 encounter diagnoses.

April
1st

Health Maintenance

Address Topic	Remove Override	Add Topic	Edit Modifiers	Report	Refresh	Guidelines	Health Maintenance User Guide	Source Attributes
Current Care Gaps								
Annual UACr		Overdue - never done		1 year(s)				

Highlights from the 2025 STQN Annual Meeting



St. Tammany Health System President and CEO Joan Coffman; STQN Board Chairman Dr. Phillips Jenkins; and Louisiana Sen. Patrick McMath, an advocate for health and community well-being, shared invaluable insights on the future of healthcare, quality improvements and the impact of policy on our community. We're grateful for their expertise and participation in making this event a success!

