

**MINUTES**  
**MEDICAL UNIVERSITY HOSPITAL AUTHORITY**  
**BOARD OF TRUSTEES MEETING**  
**December 10, 2010**

The Board of Trustees of the Medical University Hospital Authority convened Friday, December 10, 2010, with the following members present: Thomas L. Stephenson, Esquire, Chairman; Dr. James E. Wiseman, Jr., Vice Chairman; Dr. Stanley C. Baker, Jr.; Mr. Melvyn Berlinsky; Mr. William H. Bingham, Sr.; Dr. Cotesworth P. Fishburne, Jr.; Mr. William B. Hewitt; Dr. Donald R. Johnson II; Dr. E. Conyers O'Bryan, Jr.; Dr. Paula E. Orr; Dr. Thomas C. Rowland, Jr.; Mr. Charles W. Schulze; and Dr. Charles B. Thomas, Jr. Absent: The Honorable Robin M. Tallon.

The following administrative officials were present: Dr. Raymond S. Greenberg, President; Dr. Mark Sothmann, Interim Vice President for Academic Affairs and Provost; Dr. Etta Pisano, Vice President for Medical Affairs, and Dean, College of Medicine; Ms. Lisa Montgomery, Vice President for Finance and Administration; Mr. Stuart Smith, Vice President for Clinical Operations and Executive Director, MUHA; Dr. Frank Clark, Vice President for Information Technology and CIO.

The following deans were present: Dr. Jack Sanders, College of Dental Medicine; Dr. Lisa Saladin, College of Health Professions; Dr. Etta Pisano, College of Medicine; Dr. Philip Hall, College of Pharmacy; Dr. Joseph DiPiro, South Carolina College of Pharmacy; Dr. Gail Stuart, College of Nursing; Dr. Perry Halushka, College of Graduate Studies.

**Item 1. Call to Order-Roll Call.**

There being a quorum present, Chairman Stephenson called the meeting to order at 9:00 a.m. Ms. Celeste Jordan called the roll.

**Item 2. Secretary to Report Date of Next Meeting.**

The date of the next regularly scheduled meeting is Friday, February 11, 2011.

**Item 3. Approval of Minutes of the Regular Meeting of the Medical University Hospital Authority of October 8, 2010.**

Board Action: It was moved that the Minutes be approved. The motion was seconded, voted on and unanimously carried.

**RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT**

**OLD BUSINESS:** None.

**NEW BUSINESS:**

**Item 4. General Informational Report of the President.**

Dr. Greenberg asked Dean Pisano to introduce the speaker. Dr. Pisano said that Dr. Peter Tuerk is currently Assistant Professor in the Department of Psychiatry where he serves as Director of Research Training. He also serves on the faculty of the VA where he is Associate Director of the Post Traumatic Stress Disorder Clinical Team. Dr. Tuerk has published broadly on the treatment of PTSD behaviors in Operation

Enduring Freedom and Operation Iraqi Freedom. The Department of Veterans Affairs recently awarded Dr. Tuerk the Olin E. Teague award which recognizes an employee whose achievements have been extraordinarily beneficial to the rehabilitation of war-injured veterans.

Dr. Tuerk talked about the symptoms of PTSD, exposure therapy for the disorder as well as results of related research studies.

At the conclusion of the presentation, Dr. Greenberg commented that Dr. Tuerk's work is extraordinary and MUSC is very proud of not only his receiving the award but more importantly what he has done for veterans. He stated this work is a crown jewel in MUSC's relationship with the VA.

Recommendation of Administration: That the report be received as information.

Board Action: Received as information.

**Item 5. Other Business.** None.

**MEDICAL UNIVERSITY HOSPITAL AUTHORITY OPERATIONS AND FINANCE COMMITTEE.  
CHAIRMAN: DR. STANLEY C. BAKER, JR. (Detailed committee minutes are attached to these minutes).**

**OLD BUSINESS:** None.

**NEW BUSINESS:**

**Item 6. MUSC Medical Center Status Report.**

Statement: Mr. Stuart Smith stated he had reported to the committee yesterday that the Hospital's activity is stable. Some indicators are up including census and in-patient surgeries. Some activities are down including the emergency room visits and the outpatient surgery area. All reports are that the market is down and by the hospital holding its numbers stable and growing slightly in some areas this is a positive report.

Recommendation of Administration: Received as information.

Recommendation of Committee: Received as information.

Board Action: Received as information.

**Item 7. MUSC Medical Center Financial and Statistical Report.**

Statement: Ms. Montgomery said she had reported to committee in spite of the volume being flat we were ahead of budget and have about a 5% operating margin. Cash is slowly improving and is up over this time last year.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 8. Major Purchase.**

Statement: Dr. Baker presented a request to replace the existing ambulatory component of the MUSC Health EMR. The estimated cost of the purchase - \$6,850,000 over a three-year period.

Recommendation of Administration: That the purchase be approved.

Recommendation of Committee: That the purchase be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the purchase.

**Item 9. Report on Quality and Safety Report.**

Statement: Dr. Baker stated the committee had received a report on quality and patient safety from Dr. Cawley. Dr. Baker stated that because of the importance MUHA and regulatory bodies place on quality and patient safety, the Medical Center made the following recommendations and asked for approval:

- Incorporate "Quality and/or Safety" into the present name of the committee to emphasize the importance of these issues.
- Provide a new "dashboard" of quality data
- Have the board formally adopt quality standards
- Consider an annual self-assessment of quality and patient safety by the board
- Evaluate board education and development in quality and patient safety

Recommendation of Administration: That the recommendations be approved.

Recommendation of Committee: That the recommendations be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the 5 recommendations from the Medical Center.

**Item 10. Outreach Activity Report, University Medical Associates.**

Statement: No Report.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 11. Legislative Update.**

Statement: Dr. Baker stated a legislative update had been provided for information requiring no action.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 12. Other Committee Business.** None

**Item 13. Medical University Hospital Authority Appointments, Reappointments and Delineation of Privileges (Consent Item).**

Statement: An updated list of appointments, reappointments and delineation of privileges to the medical staff were presented for approval.

Recommendation of Administration: That the appointments, reappointments and delineation of privileges to the medical staff be approved.

Recommendation of Committee: That the appointments, reappointments and delineation of privileges to the medical staff be approve.

Board Action: A motion was made, seconded and unanimously voted to approve the list of appointments, reappointments and delineation of privileges to the medical staff.

**Item 14. Medical Executive Committee Minutes (Consent Item).**

Statement: Minutes of the Medical Executive Committee for August, September and October 2010 meetings were presented to the Board.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: The minutes of the Medical Executive Committee for August, September and October 2010 were received as information.

**Item 15. Medical Center Contracts and Agreements (Consent Item).**

Statement: Contracts and Agreements which have been signed since the last board meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

**MEDICAL UNIVERSITY HOSPITAL AUTHORITY PHYSICAL FACILITIES COMMITTEE.  
CHAIRMAN: MR. WILLIAM H. BINGHAM, SR. (Detailed committee minutes are attached to these minutes).**

**OLD BUSINESS:** None

**NEW BUSINESS:**

**Item 16. Facilities Procurements/Contracts Proposed.**

Statement: Mr. Bingham presented the following for approval:

- Lease amendment/renewal to extend the lease agreement for two years, seven months and provide an additional 2,240 sq. ft. of space located at 650 Ellis Oak Avenue, James Island for a total of 5,742 sq. ft., to relocate the Wheelchair Seating Program from University Hospital. Total cost of renewal term: \$412,816.34.
- Lease of 4,625 sq. ft. of clinical space located on the 3<sup>rd</sup> floor at 8992 University Boulevard in North Charleston (MUSC Specialty Care North). The space will provide outpatient pediatric services in Physical, Occupational and Speech Therapy. In addition, there will be outpatient adult service in Physical and Occupational Therapy specializing in Musculoskeletal, Neurosciences, ENT and Oncology. Total cost of initial three year term: \$228,706.25 with an extended two year term with a total cost of \$164,095.

Recommendation of Administration: That these procurements/contracts be approved.

Recommendation of Committee: That these procurements/contracts be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the procurements/contracts as presented.

**Item 17. Update on Projects.**

Statement: Mr. Bingham reported that Mr. Frazier presented an update on various Authority projects to the committee and that was received as information.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 18. Other Committee Business.** None

**Item 19. Facilities Contracts Awarded (Consent Item).**

Statement: Facilities Contracts awarded since the last meeting were presented for information.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this be received as information.

Board Action: Received as information.

**MEDICAL UNIVERSITY HOSPITAL AUTHORITY AUDIT COMMITTEE. CHAIRMAN: MR. WILLIAM B. HEWITT. (Detailed committee minutes are attached to these minutes).**

**OLD BUSINESS:** None

**NEW BUSINESS:**

**Item 20. External Financial Statement and Audit Report of MUHA for Fiscal Year End June 30, 2010.**

Statement: Mr. Hewitt stated the external audit report was received from KPMG.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 21. Report of the Office of Internal Audit.**

Statement: Mr. Hewitt stated the committee had received a report from the Director of Internal Audit and the report was received as information.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

**Item 22. Other Committee Business.** None

**OTHER BUSINESS FOR THE BOARD OF TRUSTEES:**

**Item 23. Approval of Consent Agenda.**

Statement: Approval of the Medical University Hospital Authority consent agenda was requested.

Recommendation of Administration: That the consent agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the consent agenda be approved

**Item 24. New Business for the Board of Trustees.**

None

**Item 25. Report from the Chairman.**

There being no further business, the Hospital Authority meeting was adjourned and the University Board of Trustees meeting was convened.

Respectfully submitted,



Hugh B. Faulkner III  
Secretary

/wcj  
Attachments

**Hospital Authority Operations and Finance Committee  
Board of Trustees  
December 9, 2010  
Minutes**

**Attendees:**

Dr. Stanley Baker, Chair	Dr. Raymond Greenberg
Mr. Melvyn Berlinsky	Mr. Stuart Smith
Mr. William Bingham	Ms. Lisa Montgomery
Dr. Cotesworth Fishburne	Dr. Etta Pisano
Mr. William Hewitt	Mr. Jim Fisher
Dr. Donald Johnson	Mr. Frank Clark
Dr. Conyers O'Bryan	Dr. Mark Sothmann
Dr. Paula Orr	Dr. Phil Costello
Dr. Thomas Rowland	Dr. Pat Cawley
Mr. Charles Schulze	Dr. Marilyn Schaffner
Thomas Stephenson, Esq.	Annette Drachmann, Esq.
Dr. James Wiseman	Joseph Good, Esq.
Dr. Charles Thomas	Mr. Casey Liddy
Ms. Allan Stalvey	Mr. H. B. Faulkner
	Mr. Mark Sweatman

The meeting was called to order by Dr. Stanley Baker, Chairman.

**Item 6. MUSC Medical Center Status Report**

Mr. Smith presented statistical data which indicates that census has increased 2.7% over the same time last year while discharges are slightly down over the same time period. Observation cases have increased significantly. Operating Room Cases in the Main OR and the ART OR have increased while the Ambulatory and Mt. Pleasant OR has decreased. There has been a significant decrease in ophthalmology cases as a result of the departure of several surgeons and also a decrease in elective procedures as a result of the economy.

Action: Report received as information

**Item 7. MUSC Medical Center Financial and Statistical Report**

Ms. Montgomery briefed the committee on the financial status. The change in net assets is slightly ahead of budget and the net revenue is only up \$5 million year over year. This can be attributed in part to the shift in payor mix. The cash position is up approximately \$4 million year over year, but she reminded the committee that November, December and January are historically months in which we see a decline in cash.



Ms. Montgomery and Mr. Allan Stalvey reported on the Medicaid outlook for the state. She and Mr. Stalvey serve on a SCHA Medicaid task force which is exploring any viable options to deal with the Medicaid shortfall in the state. They reported that there is a \$663 million shortfall in the 2012 budget for Health and Human Services. Mr. Stalvey presented the constraints under which HHS is operating, various options available to the General Assembly, HHS, and the Governor. He acknowledged that there is no easy solution and that the SCHA and the task force will continue to work with the governor and legislature to find viable solutions. Ms. Montgomery indicated that a 10% cut in Medicaid would equate to \$20 million loss for MUHA and that an increase in the provider tax would not be as severe as cuts in reimbursement. Cuts to this program will have a significant impact on MUHA as well as other hospitals in the State.

Action: Received as information

### **Item 8. Major Purchase**

Information was presented on a major purchase for the ambulatory electronic medical record. This will be jointly funded by the hospital and UMA.

Action: Recommend approval

### **Item 9. Report on Quality and Patient Safety**

Dr. Pat Cawley briefed the committee on MUHA quality and patient safety actions. He reported data on MUHA's hospital acquired infections, central line blood stream infections, hand hygiene audits, occurrence reporting, use of surgery safety checklists, mortality, CMS measures, readmission rates, and ongoing professional practice evaluations.

Dr. Cawley also reminded the committee that at various times throughout the year we report on different aspects of quality and patient safety. Reports are presented on credentialing, actions of the Medical Executive Committee, Sentinel Event reviews, annual safety reports, annual performance improvement projects, quality domain reports, goal performance updates, regulatory reports from agencies such as JC, CMS), and safety reports.

Because of the importance MUHA and regulatory bodies place on quality and patient safety, the Medical Center made the following recommendations:

- 1) Incorporate "Quality and/or Safety" into the present name of the committee to emphasize the importance of these issues.
- 2) Provide a new "dashboard" of quality data
- 3) Have the board formally adopt quality standards
- 4) Consider an annual self-assessment of quality and patient safety by the board
- 5) Evaluate board education and development in quality and patient safety

Actions: Report was received as information, and committee approved the 5 recommendations presented by Dr. Cawley

**Item 10. Outreach Activity Report, UMA**

No report

**Item 11. Legislative Update**

Already presented at earlier committee

**Item 12. Other committee business**

**Consent Items for approval**

**Item 13. Medical University hospital Authority Appointments, Reappointemnts and Delineation of Privileges**

The committee reviewed the appointments and reappointments and delineation of privileges. These have been reviewed by all appropriate committees.

Action: Recommend approval

**Item 14. Medical Executive Committee Minutes**

The Medical Executive Committee minutes from August, September and October were presented. These were reviewed by the committee.

Action: Received as information

**Item 15. Medical Center contracts and Agreements**

The contracts and agreements entered into since the last meeting of the board were reviewed.

Action: Received as information.

There being no further business, the committee was adjourned.

Submitted:

Teresa K. Rogers

**Medical University Hospital Authority  
Physical Facilities Committee  
December 9, 2010  
Minutes**

**Attendees:**

Mr. William H. Bingham, Sr., Chair	Dr. Phil Costello
Dr. Stanley C. Baker	Ms. Annette Drachman
Mr. Melvyn Berlinsky	Mr. Dennis Frazier
Dr. Cotesworth P. Fishburne, Jr.	Mr. Jim Fisher
Mr. William B. Hewitt	Dr. Stephen Lanier
Dr. Donald Johnson II	Mr. John Malmrose
Dr. E. Conyers O'Bryan, Jr.	Ms. Lisa Montgomery
Dr. Paula Orr	Dr. Etta Pisano
Dr. Thomas C. Rowland, Jr.	Mr. Stuart Smith
Mr. Charles W. Schulze	Dr. Mark Sothmann
Thomas L. Stephenson, Esquire	
Dr. Charles B. Thomas, Jr.	
Dr. James E. Wiseman, Jr.	
Dr. Raymond S. Greenberg	
Mr. Allan Stalvey	

Mr. Bingham called the meeting to order.

**REGULAR Items**

**Item 16      Facilities Procurements/Contracts.**

Mr. Dennis Frazier presented the following for approval:

- Lease amendment/renewal to extend the lease agreement for two years, seven months and provide an additional 2,240 sq. ft. of space located at 650 Ellis Oak Avenue, James Island for a total of 5,742 sq. ft., to relocate the Wheelchair Seating Program from University Hospital. Total cost of renewal term: \$412,816.34.
- Lease of 4,625 sq. ft. of clinical space located on the 3<sup>rd</sup> floor at 8992 University Boulevard in North Charleston (MUSC Specialty Care North). The space will provide outpatient pediatric services in Physical, Occupational and Speech Therapy. In addition, there will be outpatient adult service in Physical and Occupational Therapy specializing in Musculoskeletal, Neurosciences, ENT and Oncology. Total cost of initial three year term: \$228,706.25 with an extended two year term with a total cost of \$164,095.

Recommendation of Committee: That the procurements/contracts be approved.

**Item 17      Update on Projects.**

Mr. Dennis Frazier provided an update on the planning of the renovation of the 7<sup>th</sup> floor of ART to add 40 beds. Associated with that renovation would be a proposed Medical Office Building at the corner of Bee Street and Courtenay Drive. The proposal for the new Medical Office Building will be brought back to the Board at a later time when the construction would be financially feasible.

Recommendation of Committee: Received as information.

**Item 18      Other Committee Business.    None.**

**CONSENT Items for Information:**

**Item 19      Facilities Contracts Awarded**

The facilities contracts since the last board meeting were presented for information.

Recommendation of Committee: That this report be received as information.

With no further business, the meeting was adjourned.

Respectfully submitted,

  
Celeste Jordan

**Medical University Hospital Authority  
Audit Committee  
December 9, 2010  
Minutes**

**Attendees:**

Mr. William B. Hewitt, Chair	Mr. Joe Good
Dr. Stanley C. Baker	Mr. Stewart Mixon
Mr. Melvyn Berlinsky	Ms. Lisa Montgomery
Mr. William H. Bingham, Sr.	Mr. Stuart Smith
Dr. Cotesworth P. Fishburne, Jr.	Dr. Mark Sothmann
Dr. Donald Johnson II	Mr. Mark Sweatman
Dr. E. Conyers O'Bryan, Jr.	Mr. Patrick Wamsley
Dr. Paula Orr	
Dr. Thomas C. Rowland, Jr.	
Mr. Charles W. Schulze	
Thomas L. Stephenson, Esquire	
Dr. Charles B. Thomas, Jr.	
Dr. James E. Wiseman, Jr.	
Dr. Raymond S. Greenberg	
Mr. Allan Stalvey	
Ms. Susan H. Barnhart	

Mr. Hewitt called the meeting to order.

**REGULAR Items**

**Item 20      External Financial Statement and Audit Report of MUHA for Fiscal Year End June 30, 2010.**

Mr. Brad Benton, Partner with KPMG, reported the results of the 2010 External Audits of the Authority and the University. He presented an overview of the findings and stated KPMG had issued an unqualified opinion with no material weaknesses for both entities. Mr. Benton did review certain matters involving internal control and other operational matters as noted in the Management Letters. Senior Management was excused so that the Board members could have a confidential session with Mr. Benton. At the conclusion of the session Management returned to the meeting.

Recommendation of Committee: That the report be received as information.

**Item 21      Report of the Internal Auditor.**

Ms. Susan Barnhart, Director of Internal Audit, provided a report on two completed audits:

- MUSC Net Assets Review
- Management of Biomedical Equipment

She reported on the fraudulent use of an MUSC purchasing card by a former employee and the actions taken in that regard. She also discussed annual leave reporting which has received both internal and external audit comments and the new reports being provided to supervisors to help monitor employee leave reporting.

Recommendation of Committee: That the report be received as information.

**Item 22    Other Committee Business.**

Mr. Hewitt distributed the MUSC Enterprise Audit Committee Responsibilities Calendar which is a timeline of what the Audit Committee is required to do next year.

Respectfully Submitted,

Celeste Jordan

**MEDICAL UNIVERSITY HOSPITAL AUTHORITY  
MAJOR PURCHASES FOR  
BOARD OF TRUSTEES'  
December 10, 2010**

**Description of Purchase:** Replace the existing ambulatory component of the MUSC Health EMR with functionality that is more robust/flexible and scalable.

**Estimated Cost of Purchase:** \$6,850,000 (to be funded 50/50 between MUHA and UMA).  
FY11: \$2,975,000 (\$1.49M each); FY12: \$2,475,000 (\$1.25M ea.); FY 13: \$1,400,000 (\$.7M ea.)

**Requisition Number:**

**Department Name(s) and UDAK Number(s):**

**Department Contact Person:** Frank Clark, VP of Information Technology/CIO

**Method of Purchase:** Request For Proposal

**Vendor Name:** To Be Determined

**New Purchase**  Yes  No

**Replacement of Existing Item(s)**  Yes  No

**Name of Item(s) Being Replaced:** Practice Partner

**Name and Value of Equipment the Requested Purchase Will Be Used in Conjunction With:**

NAME OF EQUIPMENT

VALUE

All computer server equipment will be new. (cost included above)

**How this Purchase Will Benefit MUSC:**

Stimulus monies ("Meaningful Use"); Allow use of "e-Prescribing"; Position MUSC Health for Accountable Care Organization (ACO) participation; Provide better system stability and less downtime (quality of care).

**Why and How this Purchase Will Benefit MUSC by Having a Vendor Provide this Service vs. MUSC Staff Providing the Service:** Not feasible to develop this software 'in house'.

**Source of Revenue/Savings:** Potential efficiency and revenue gains by enhanced functionality.

**Amount of Revenue/Savings to be Generated:** TBD.

**Physical Plant Requirements:** None.

**Annual Cost (Maintenance, supplies, etc.):** \$580,000

**Personnel Cost (to include base salary, fringes, training, etc.):** \$2,500,000/year

# Business Plan

for

## Ambulatory Electronic Medical Record (EMR) Functionality

November 17, 2010



## **Project Purpose**

The purpose of this project is to select and implement a new solution to meet EMR functionality requirements in MUSC's outpatient/ambulatory areas (i.e., replace the existing EMR functionality, Practice Partner).

## **Scope**

Ambulatory EMR functionality (ONC certification)

## **Out of Scope**

- Registration, scheduling and billing
- Clinical data repository
- Inpatient functionality
- ED functionality

## **Background**

The Practice Partner (PP) was selected by MUSC's Family Medicine department in the early 1990s. Due to limited funds in the mid-1990s, it was decided to "use what we already have" and expand use of PP to other primary care clinics. By year 2000, there were approximately 100 attending physicians using PP, but further expansion was not possible until additional IT resources and software licenses could be allocated.

In 2004, the College of Medicine agreed to provide funding to complete expansion of PP into all other MUSC clinics, except for Ophthalmology which pursued a specialty-specific vendor product (Medflow). The goal in 2004 was to rapidly rollout PP in order to eliminate paper charts and the associated costs. This rollout was complete in July 2006. System uptime/stability has been a concern for the past few years as the system has not scaled well to the size and volume of MUSC; PP is mostly used in small practices. MUSC is, by far, the largest PP site; the next largest physician practice has less than 100 physicians.

Since 2006, improvements to workflow and efficiency (i.e., increasing patient throughput) HAVE NOT been possible due to resource constraints. Training has been minimal or 'on the job' which has not allowed effective use of the PP system.

In 2009, after months of due diligence, the OCIO concluded that PP even if the stability and scalability problems were not major issues, did not have the inherent technology flexibility to work within the overall MUSC Health clinical IT strategy of a single EMR across all care settings. Based on this determination, the OCIO formally recommended that MUSC Health look to replace PP. In 2009, the OCIO and MUSC clinical leadership decided that a consultant should conduct a review of MUSC's 'Ambulatory EMR' (Practice Partner) and make recommendations. The selected consultant, Beacon Partners, conducted their final report and onsite presentation on Monday, April 19 2010.

In summary, Beacon Partners confirmed the OCIO's findings that PP's limited flexibility would make it very difficult, if not impossible, to meet ONC meaningful use requirements and recommended the following:

1. **Governance** - Establish governance to oversee selection and replacement of PP, ensuring significant physician involvement, input and buy-in to the ultimate selection decision

## **Background - continued**

2. **EMR Requirements Development and Workflow Review** - Develop thorough requirements including specialty needs into the replacement/selection process. Review clinical workflow and make necessary changes to maximize automation.

3. **Better Utilization of Practice Partner Now** - Increase/improve utilization of the existing EMR (Practice Partner), which will be beneficial to revenue, as well as an easier transition to a replacement product. Additional resources will be needed to accomplish this.

4. **Replacement Process** - Begin 'search and selection' process to replace Practice Partner immediately.

## **RFP: Key Functional and Technical Requirements**

The detailed Ambulatory EMR functionality must include but not be limited to the following functions. And generally, must allow caregivers to meet the ONC's Stage 1 meaningful use requirements:

- Order Placement, Management and Routing
- Results & Transcription Reporting & Viewing
- Charge Capture, Coding Assistance, Medical Necessity Checking
- Expert Rules and Guidelines including Health Maintenance Alerts
- Drug, Allergy & Formulary checking & warning
- Clinical Documentation & e-signature
- Prescribing, including e-prescribing
- Problem list and allergies entry and management
- Tasking & Task Management
- Patient Education
- Capture & View Paper Medical Records via Scanning
- Patient Access for interacting with Physicians and other Clinical/Administrative personnel
- Ability to create and manage forms/templates (e.g., Clinical Documentation, Notes templates, etc.)
- CCOW ability – to and from other clinical systems
- ONC certification
- Multiple HL7 interfaces – in and out (e.g., ADT, scheduling, vitals, notes, meds, allergies)
- Data conversion – in and out
- Data extract and reporting

## **Consulting Assistance**

Consulting assistance will be needed for workflow assessment and documenting ambulatory EMR requirements for each specialty. Consulting assistance may also be needed for additional tasks as needed.

**Cost to activate system:**

	<u>Cost (in 000s)</u>
Hardware	\$ 750
Software (EMR vendor)	2,200
3 <sup>rd</sup> party software	400
Interfaces	250
Data conversion	100
Implementation	1,500
Training	250
Outside assistance	700
Other/contingency	700
	-----
<b>Total</b>	<b>\$6,850</b>

**Annual maintenance and support:**

	<u>Cost (in 000s)</u>
Hardware	\$ 50
Software including 3 <sup>rd</sup> party	500
IT Staff	2,500
Other	30
	-----
<b>Total Annual Ongoing</b>	<b>\$3,080</b>

**Estimated Phases & Timeline**

Once a contract is signed, the implementation is estimated to take 20+ months to complete.

Cost to activate Ambulatory EMR system by Fiscal Year

Ref	Description	Total (est) in 000s	FY10	FY11	FY12	FY13
1	Hardware	\$750		\$750		
2	Software (EMR vendor)*	2,200		1100	550	550
3	3 <sup>rd</sup> party software	400		400		
4	Interfaces	250		75	175	
5	Data conversion	100		50	50	
6	Implementation	1,500		300	900	300
7	Training	250			100	150
8	Outside assistance	700		150	350	200
9	Other/contingency	700		150	350	200
	<b>Total one-time</b>	<b>\$ 6,850</b>	<b>\$ -</b>	<b>\$ 2,975</b>	<b>\$ 2,475</b>	<b>\$ 1,400</b>

\* 25% contract signing, 25% software load, 25% first production use, 25% acceptance (e.g., 100 attendings actively using and no major issues)

## Board of Trustees Credentialing Subcommittee

The Medical Executive Committee reviewed the following applicants on September 15, 2010 and recommends approval by the Board of Trustees Credentialing Subcommittee effective September 28, 2010

### Medical Staff Initial Appointment and Privileges

<u>Practitioner Name</u>	<u>Degree</u>	<u>Status</u>	<u>Dept</u>
Bolin, Eric	MD	Initial	Anes
Campbell, Ruth	MD	Initial	Medi
Gaines, Kathryn	DO	Initial	Neuro
Hasan, Rabiya	MD	Initial	Peds
Hedgren, Divya	MD	Initial	Psych
Karia, Samir	MD	Initial	Neuro
Moskow, Abraham	MD	Initial	Peds
Parravano, Dorothea	MD	Initial	Anes
Rusu, Daniel	MD	Initial	Anes

### Medical Staff Reappointment and Privileges

<u>Practitioner Name</u>	<u>Degree</u>	<u>Status</u>	<u>Dept</u>
Anderson, William	MD	Affil RF	FamMed
Arthur, John	MD	Active	Medi
Basile, Jan	MD	Active Prov	Medi
Boylan, Alice	MD	Active	Medi
Bratton, Charles	MD	Active	Surg
Carpenter, Cody	MD	Active	Peds
Davis, Matthew	MD	Affil RF	Peds
Eriksson, Evert	MD	Active Prov	Surg
Giles, William	MD	Affil	Otol
Goedecke, Aimee	MD	Affil RF	Peds
Hagerty, Richard	MD	Active	Surg
Hartwell, Karen	MD	Active	Psych
Headden, Gary	MD	Active	Medi
Heldrich, Cynthia	MD	Affil RF	Peds
Hooker, Jennifer	MD	Active	OrthoSurg
Hull, Beatrice	MD	Active	Medi
Kyle, Maryellen	MD	Prov Affil CFC	Medi
Kyle, Thomas	MD	Active Prov	Medi
Lemon, Henry	MD	Active	Peds
Reigart, John	MD	Active	Peds
Reves, Joseph	MD	Active	Anes
Rittenberg, Charles	MD	Active	ObGyn
Rodden, Ann	DO	Active	FamMed
Skoner, Judith	MD	Active	Otol
Spampinato, Maria	MD	Active	Radio
Squires, Jerry	MD	Active	Path
Takacs, Istvan	MD	Active	Neuro
Taylor, Jason	MD	Active	Anes
Tillman, Mary	MD	Affil RF	Peds
Unal, Sheref	MD	Active Prov	Peds
Velez, Juan	MD	Active	Medi
Vogt, Mary	MD	Active	Medi
Weiss, Edgar	MD	Active	Psych
White, David	MD	Active	Otol
Widenhouse, Brian	MD	Affil	Surg

**Medical Staff Reappointment and Change in Privileges**

Tolley, James	MD	Active	Medi	Addition: Limited Emergency Ultrasound Privileges
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**Medical Staff Change in Privileges**

Forbus, Geoffrey	MD	Active	Peds	Addition: Moderate Sedation Privileges
Scheurer, Mark	MD	Active	Peds	Addition: Moderate and Deep Sedation Privileges

**Professional Staff Initial Appointment and Privileges**

Vernon, Natalie	MSN	Initial	Surg
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**Professional Staff Reappointment and Privileges**

Bierling-Slowey, Karin	CRNA	Prov AHP	Anes
Brooks, Gladney	FNP	AHP	Surg
Carmichael, Jill	CRNA	AHP	Anes
Cleveland, Alyssa	CRNA	AHP	Anes
Disco, Deborah	PNP	AHP	Peds
Frey, George	PhD	Prov AHP	Radio
Grubaugh, Anouk	PhD	AHP	Psych
Hamlin-Smith, Kasey	PhD	AHP	Peds
Kitten, Lester	CRNA	AHP	Anes
Koch, Nicholas	PhD	Prov AHP	RadOnc
McElheny, Jill	PNP	AHP	Peds
McKenna, Dennis	CRNA	AHP	Anes
Mostoller, Michael	PAC	Prov AHP	Surg
Mrugala, Katrina	PAC	Prov AHP	Neuro
Nessmith-Kitten, Nancy	CRNA	AHP	Anes
ONeil, B. Ulrika	CRNA	Prov AHP	Anes
Paladino, Melissa	CRNA	AHP	Anes
Resnick, Heidi	PhD	AHP	Psych
Rowland, Amelia	CNM	AHP	ObGyn
Sebastian, Jacqueline	ANP	AHP	Medi
Shoemaker, Owen	PhD	AHP	Psych
Tobin, David	CRNA	AHP	Anes
Wendorf, Karen	CRNA	AHP	Anes
Williams, Tracy	PNP	AHP	Peds
Woodard, Frances	PNP	AHP	Peds

**Professional Staff Reappointment and Change in Privileges**

Blessing-Feussner, Carol	PA	AHP	Medi	Switching from Department of Ob/Gyn to Medicine
Fulton, Megan	PAC	AHP	Surg	Switching from Department of Surgery to Neurosurgery
Smith, F. Mason	OD	AHP	Ophth	Switching to Refer and Follow

**Professional Staff Change in Privileges**

Bistrick, Carla	CCP	AHP	Surg	Addition: LVAD Privilege
Davis, Betsy	DMD	AHP	Otol	Addition: Adolescent/Adult Dentistry Privileges and Procedures
Fernandez, Adam	CCP	AHP	Surg	Addition: LVAD Privilege
Giles, Stephen	PAC	Prov AHP	Neuro	Addition: First Assist Privileges
Michaud, Nicole	CCP	AHP	Surg	Addition: LVAD Privilege
Shackelford, Anthony	CCP	AHP	Surg	Addition: LVAD Privilege

**Board of Trustees Credentialing Subcommittee - October 28, 2010**

The Medical Executive Committee reviewed the following applicants on October 20, 2010 and recommends approval by the Board of Trustees Credentialing Subcommittee effective October 28, 2010

**Medical Staff Initial Appointment and Privileges**

<u>Practitioner Name</u>	<u>Degree</u>	<u>Status</u>	<u>Dept</u>
Hurray, David	MD	Initial	Path
Jaroscak, Jennifer	MD	Initial	Peds
Mendelsohn, Andrea	MD	Initial	FamMed
Mitsiev, Ivaylo	MD	Initial	Surg
Pisoni, Roberto	MD	Initial	Medi

**Medical Staff Reappointment and Privileges**

Adams, David	MD	Active	Surg
Armstrong, Milton	MD	Active Prov	Surg
Baliga, Prabhakar	MD	Active	Surg
Bell, Ronald	DDS	Affil RF	OralMax
Bolster, Marcy	MD	Active	Medi
Bourne, Christina	MD	Active	Medi
Brown, Tod	MD	Active Prov	Anes
Buse, Maria	MD	Active	Medi
Carr, Christine	MD	Active	Medi
Cooper, George	MD	Active	Medi
Craig, Mary	MD	Active	Psych
Crawford, Fred	MD	Active	Surg
Crumbley, Arthur	MD	Active	Surg
Egan, Brent	MD	Active	Medi
Fitts, Robert	MD	Affil	Surg
Fowler, Sandra	MD	Active	Peds
Garr, David	MD	Active	FamMed
Gilman, Charles	MD	Active	Medi
Glaser, Anthony	MD	Active	FamMed
Gustafson, Kristina	MD	Active	Peds
Holden, Kenton	MD	Active	Neuro
Kohler, Matthew	MD	Active	ObGyn
Mallin, Robert	MD	Active	FamMed
Maniscalco, Albert	MD	Prov Affil	Medi
Murphy, Cynthia	MD	Active	Peds
Principe, Ralph	MD	Affil	ObGyn
Queener, Carl	MD	Active	Medi
Reed, Carolyn	MD	Active	Surg
Ries, William	PhD DDS	Affil RF	OralMax
Rumboldt, Tihana	MD	Active	Path
Walton, John	MD	Active	Anes
Wannamaker, Braxton	MD	Active Prov	Neuro
Windler, Gary	MD	Affil RF	OrthoSurg

**Medical Staff Reappointment and Change in Privileges**

Mitchell, Holly	MD	Active	Medi	Addition: Musculoskeletal Ultrasound
Warmath, William	MD	Active	Neuro	Switching to Refer and Follow Privileges

**Medical Staff Change in Privileges**

Conway, William	MD	Active	Radio	Addition: Moderate Sedation Privileges
Hant, Faye	DO	Active	Medi	Addition: Musculoskeletal Ultrasound
Lambert, Paul	MD	Active	Otol	Addition: Gamma Knife Radiosurgery

Murray, Matthew	MD	Active Prov	Radio	Addition: Moderate Sedation Privileges
Sheldon, Lucas	MD	Active	Radio	Addition: Moderate Sedation Privileges

#### Professional Staff Initial Appointment and Privileges

Adler, Mary	MSN	Initial	Medi
Books, Rachelle	PAC	Initial	Surg
Crosby, Brittany	PA	Initial	Otol
Drechsler, Holly	PA	Initial	Otol
Miller, Cheryl	PAC	Initial	Neuro

#### Professional Staff Reappointment and Privileges

Ashenafi, Michael	MSC	Prov AHP	RadOnc
Brooks, Deborah	ANP	AHP	Medi
Brown, Joshua	PhD	AHP	Psych
Carie, Carissa	PNP	AHP	Otol
Dushanko, Michael	CRNA	AHP	Anes
Elder, Amanda	PAC	AHP	Psych
Ewing, Gwendolyn	CRNA	AHP	Anes
Fiutem, Marianne	CRNA	AHP	Anes
Griffin, Beth	PAC	AHP	Neuro
Harmon, Kevin	PAC	AHP	Medi
Kittle, Kymberley	PAC	Prov AHP	InterHS
Kryway, Elisabeth	PAC	Prov AHP	Psych
Lewey, Jennifer	FNP	Prov AHP	Peds
Pagley, Donald	CRNA	AHP	Anes
Rosecrans, Michelle	CRNA	AHP	Anes
Saletan, Kimberly	CRNA	AHP	Anes
White, Raymon	CRNA	AHP	Anes

#### Professional Staff Reappointment and Change in Privileges

Brothers, Margaret	FNP	AHP	Neuro	Switching from Department of Neurosciences to Radiology
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Board of Trustees – December 9-10, 2010

The Medical Executive Committee reviewed the following applicant on November 17, 2010 and recommends approval by the Board of Trustees

**Medical Staff Reappointment and Change in Privileges**

Santos, Alberto	MD	Active	Psych	Six month reappointment with reinstatement of Psychiatry Core Privileges
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\*Practitioner ineligible for expedited credentialing process - requires full Board of Trustees approval

**FACILITIES  
HOSPITAL AUTHORITY  
LEASE AMENDMENT/RENEWAL  
FOR APPROVAL**

**DECEMBER 10, 2010**

DESCRIPTION OF LEASE AMENDMENT/RENEWAL: This lease amendment/renewal is to extend the lease agreement for two (2) years, seven (7) months and provide an additional 2,240 square feet of space located at 650 Ellis Oak Avenue, James Island for a total of 5,742 square feet, to relocate the Wheelchair Seating Program from University Hospital. This relocation is necessary in order to accommodate the need for additional clinical space on campus. The per square foot rate for this lease is \$27.83. The monthly rental rate will be \$13,316.66 (rounded), resulting in an annual rent amount of \$159,799.86.

University Medical Associates (UMA) holds the master lease for this space, in which 5,742 square feet is being further subleased to the Medical University Hospital Authority (MUHA). UMA will contract and upfit the leased area prior to lease commencement with an estimated upfit cost of \$215,725.00 to be paid separate from the lease agreement by MUHA Facilities. Renovation cost includes demolition and build out of space specific to tenant needs.

NEW LEASE AGREEMENT \_\_\_\_\_  
RENEWAL LEASE AGREEMENT   X    
LEASE AMENDMENT   X  

LANDLORD: University Medical Associates

LANDLORD CONTACT: Marty Phillips, Financial Analyst, 852-3109

TENANT NAME AND CONTACT: Therapeutic Services, Sally Potts, Director, 792-4771

SOURCE OF FUNDS: Hospital General Operating Funds

LEASE TERMS:

RENEWAL TERM: Two (2) years, seven (7) months [7/1/2011-1/31/2014]  
AMOUNT PER SQUARE FOOT: \$27.83  
ANNUALIZED LEASE COST: \$159,799.86  
TOTAL COST OF RENEWAL TERM: \$412,816.34

EXTENDED TERM(S): To be negotiated.

OPERATING COSTS:  
FULL SERVICE \_\_\_\_\_  
NET   X

**FACILITIES  
HOSPITAL AUTHORITY  
NEW LEASE  
FOR APPROVAL**

**DECEMBER 10, 2010**

DESCRIPTION OF NEW LEASE: This new lease is for 4,625 square feet of clinical space located on the 3<sup>rd</sup> floor at 8992 University Boulevard in North Charleston (MUSC Specialty Care North). This space will provide outpatient pediatric services in Physical, Occupational and Speech Therapy. In addition there will be outpatient adult services in Physical and Occupational Therapy specializing in Musculoskeletal, Neurosciences, ENT and Oncology. The per square foot rate for this lease is \$16.00 and shall increase annually by 3%. The monthly rental rate for the first year will be \$6,166.67 (rounded), resulting in an annual rent amount of \$74,000.00.

University Medical Associates (UMA) holds the master lease for this space, in which 4,625 square feet is being further subleased to the Medical University Hospital Authority (MUHA). UMA will contract and upfit the leased area prior to lease commencement with an estimated upfit cost of \$364,166.00 to be paid separate from the lease agreement by MUHA Facilities. Renovation cost includes demolition and build out of space specific to tenant needs.

NEW LEASE AGREEMENT   X    
RENEWAL LEASE AGREEMENT       

LANDLORD: University Medical Associates

LANDLORD CONTACT: Chris Cochran, Site Manager, 876-2729

TENANT NAME AND CONTACT: Therapeutic Services, Sally Potts, Director, 792-4771

SOURCE OF FUNDS: Hospital General Operating Funds

LEASE TERMS:

TERM: Three (3) years [3/1/2011-2/28/2014]

AMOUNT PER SQUARE FOOT: \$16.00

ANNUALIZED LEASE COST:

Year 1: \$74,000.00

Year 2: \$76,220.00

Year 3: \$78,486.25

TOTAL COST OF INITIAL TERM: \$228,706.25

EXTENDED TERM(S): One (1) term of two (2) years [3/1/2014-2/28/2016]

ANNUALIZED LEASE COST:

Year 4: \$80,845.00

Year 5: \$83,250.00

TOTAL COST OF EXTENDED TERM: \$164,095.00

OPERATING COSTS:

FULL SERVICE       

NET   X