



Health Watch USAsm Newsletter

www.healthwatchusa.org Mar. 15, 2019

Member of the National Quality Forum and a designated "Community Leader" for Value-Driven Healthcare by the U.S. Dept. of Health and Human Services

Sticker Price for a MRI Cervical Spine with and without Contrast - 72156

Baptist Lexington	None*	2019	\$4,283
Frankfort Regional Hosp	315508*	2019	\$5,221
Norton Hospital	72500515*	2019	\$4,485
St. Elizabeth	72156	2019	\$1,318
St. Joseph / St. Joseph East	72156	2019	\$2,799
Jewish	72156	2019	\$4,487
Lake Cumberland Regional Hospital	None*	2019	\$4,839
University of Kentucky	72156	2019	\$5,339
University of Louisville	None*	2019	\$4,884
Medicare Allowable (CPT 72156)	In Patient	2019	\$375
Medicare Allowable (CPT 72156)	Out Patient	2019	\$343

*Estimated Using a Similar Definition as 72156

Patients now have more information about hospital prices, but will need patience to sort it out

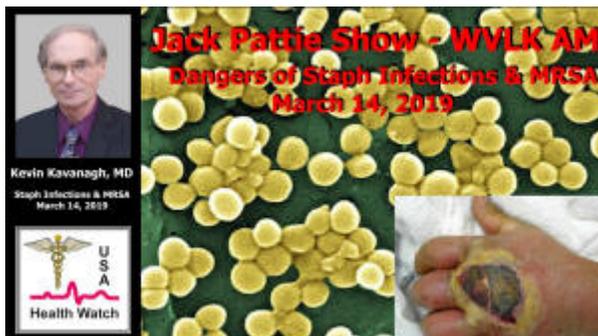
"Posting of the hospital's sticker prices in an accessible understandable format is a social responsibility that all hospitals should willingly undertake." Lexington Herald Leader. Publication Online Feb. 25, 2019. <https://www.kentucky.com/opinion/op-ed/article226598099.html>

HHS Secretary Azar's Hospital Price Transparency Plan Is A Terrible Idea Whose Time Has Come

Forbes, Binder L.: "Hospitals that do not wish to be judged by the strange messaging sent by their charges will need to supplement that disclosure with trustworthy information consumers care about, namely quality. Secretary Azar opened a window of transparency, and the time for that has come. Next, we break down the door for full transparency."

<https://www.forbes.com/sites/leahbinder/2019/03/06/hhs-secretary-azars-hospital-price-transparency-plan-is-a-terrible-idea-whose-time-has-come/#f6f1f3b6ab29>

Infections



New CDC data on The Importance of *Staph. aureus* & MRSA.

Kevin Kavanagh, MD presents on the importance of surveillance and isolation of patients for the control of *Staph. aureus* and MRSA. New data from a recent Veteran Health Administration study are discussed and this study impacts the current CDC and WHO recommendations.

Jack Pattie Radio Show. WVLK-AM March 14, 2019.

<https://youtu.be/wxT97hFxJaM>

Hospitals know how to reduce or stop staph infections. So why are thousands still dying?

"Dr. Kevin Kavanagh, founder of the patient safety advocacy group HealthWatch USA, says the VA results show that more can be done. He notes that the standard of care in England is to search for people who harbor MRSA but are not sick and to decolonize them."

<https://www.usatoday.com/story/news/health/2019/03/05/mrsa-staph-infection-hospital-deadly-centers-disease-control-medicare-medicaid/3032939002/>

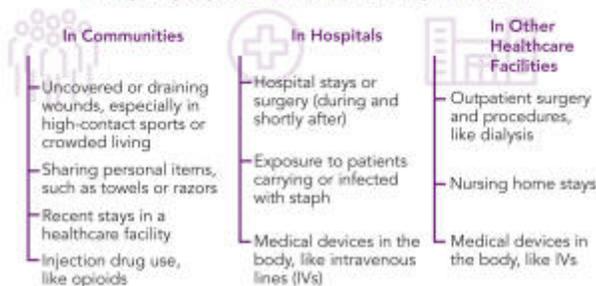


CDC Releases March 2019 Vital Signs Report Which Supports Surveillance For MRSA Carriers.

"By 2017, US Veterans Affairs (VA) medical centers reduced MRSA by 55% and MSSA by 12%. The VA reduced rates of Staph. infections after adding steps like screening new patients.

<https://www.cdc.gov/vitalsigns/staph/data-visualization.html#info1>

What puts people at risk for serious staph infection?



LEXINGTON
HERALD LEADER

News on hospital infections in Kentucky, nationally is not good. What needs to change?

Currently, in Kentucky, I have heard some organizations are not following CDC recommendations of isolation of all known carriers and patients infected with MRSA or following World Health Organization recommendations to test preoperative patients for *Staph aureus*. We are not even testing preoperative patients for the antibiotic resistant form of Staph, MRSA. In addition, Kentucky hospitals need to screen all patients admitted to a facility for MRSA. Healthcare workers also need to be included and an economic safety net developed for those who have acquired dangerous pathogens.

<https://www.kentucky.com/opinion/op-ed/article227301724.html>

Examination needed of Kentucky's 'poor response' to deadly hepatitis A outbreak, lawmaker says

Courier Journal: "Dr. Kevin Kavanagh, a retired physician from Somerset who leads the national patient watchdog group Health Watch USA, said all states, including Kentucky, need to put more resources into preventing and fighting outbreaks — including paying for "front line staff" such as public health nurses in local counties. If outbreaks are not prevented or contained, he said, the costs of treating the disease are much higher. "The legislature needs to start tackling these hard

issues and cease concentrating on issues which appear more to be targeted at energizing their base for the next election," Kavanagh said. "The senatorial call for an investigation into Kentucky's lackluster response to infectious disease is a good place to start." <https://www.courier-journal.com/story/news/politics/ky-legislature/2019/02/25/kentucky-lawmaker-calls-review-deadly-hepatitis-outbreak/2981050002/>

Los Robles hospital dinged again with Medicare penalty for infection rate

"I would ask some very hard questions of the doctor that is admitting me to make sure it's as safe as possible," Kavanagh said, suggesting queries about nursing staffing and screening for MRSA illnesses that resist antibiotic treatment. He also urged family members or friends of patients to serve as bedside advocates, making sure hospital staff gives medication at correct times, washes their hands and follows other safety precautions."

Kisken T. VC Star Mar. 11, 2019 <https://www.vcstar.com/story/news/local/2019/03/11/los-robles-regional-medical-center-medicare-penalty-infection-rate/3034965002/>

Hospital use of antibiotics as the main driver of infections with antibiotic-resistant bacteria - a reanalysis of recent data from the European Union

"..antimicrobial usage in livestock has been proposed as additional, if not principal, driver of antibiotic resistance" "We found that the correlation between antibiotic use in the hospital sector and antibiotic resistance rates is significantly higher than the correlation between resistance rates and any of the other two predictors. This suggests increased antibiotic use in hospitals as the main driver of the development of antibiotic resistances and necessitates further research on and a re-evaluation of the risks associated with antibiotic use in human and veterinary medicine."

<https://www.biorxiv.org/content/10.1101/553537v1>

Chlorhexidine versus routine bathing to prevent multidrug-resistant organisms and all-cause bloodstream infections in general medical and surgical units

The Lancet: " Decolonisation with universal chlorhexidine bathing and targeted mupirocin for MRSA carriers did not significantly reduce multidrug-resistant organisms in non-critical-care patients."

[https://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(18\)32593-5/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(18)32593-5/fulltext)

Association between urinary tract infections (fluoroquinolone-resistant Escherichia coli) and neighborhood antibiotic consumption: a population-based case-control study.

The Lancet. "These data suggest that increased use of antibiotics in specific geographical areas is associated with an increased personal risk of acquiring antibiotic-resistant bacteria, independent of personal history of antibiotic consumption and other known risk factors for antimicrobial resistance."

[https://www.thelancet.com/journals/laninf/article/PIIS1473-3099\(18\)30676-5/fulltext](https://www.thelancet.com/journals/laninf/article/PIIS1473-3099(18)30676-5/fulltext)

Drug Companies and Doctors Battle Over the Future of Fecal Transplants

"People have good reason to worry because for many patients, fecal transplants are a matter of life and death," said Catherine Duff, founder of the Fecal Transplant Foundation, a patients group. "The concern is that corporate greed will get in the way of patient access."

<https://www.nytimes.com/2019/03/03/health/fecal-transplants-fda-microbiome.html>

Opioids

The Opioid Epidemic -- Who is to Blame?

CBS 60 Mins: "The opioid crisis has so far been the most devastating public health crisis of the 21st century. In 2017 alone, more Americans died of drug overdoses than in the entire Vietnam War. This Sunday on 60 Minutes, correspondent Bill Whitaker takes a fourth look in a series of reports produced by Ira Rosen and Sam Hornblower that ask: Who is responsible?"

<https://www.cbsnews.com/news/the-opioid-epidemic-who-is-to-blame-60-minutes/>

Opioid maker used rap video to push painkiller -- fentanyl (a synthetic opioid).

"Employees at a drug company accused of bribing doctors rapped and danced around a person dressed as a bottle of the highly addictive fentanyl spray in a video meant to motivate sales reps to push the drug." Former CEO Michael Babich "told jurors that Insys looked for sales reps who were "poor, hungry and driven" or what they called "PHDs." Insys also recruited employees who were "easy on the eyes," Babich told jurors."

<http://digital.olivesoftware.com/Olive/ODN/LexingtonHeraldLeader/shared/ShowArticle.aspx>

Healthcare Quality

Healthcare Journalist Struggles to Navigate Her Own Health Crisis

Lieberman T. "A two month coma, a misdiagnosis and a \$3 million bill."

<https://www.tarbell.org/2019/02/health-care-journalist-struggles-to-navigates-her-own-health-crisis/>



Comments before NQF CSAC on Renal Wait Listing

Kevin Kavanagh, MD presents comments before the National Quality Forums Consensus Standards Approval Committee regarding a proposed metric for measuring Wait Listing of dialysis patients for renal transplantation. NQF CSAC meeting on March 12, 2918. <https://youtu.be/-2RIK-gFKO0>

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