



News Release

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MEDai Launches Patient-Specific Early Warning System for Hospitals

“Pinpoint Review” bedside system ensures patient safety and quality, safeguards hospital reimbursement

Orlando, Florida – (April 3, 2009) – MEDai, Inc., an Elsevier company and leading provider of advanced solutions for healthcare that utilize award-winning predictive analytics, announced today the launch of its new patient-specific early-warning system for hospitals, *Pinpoint Review*[™]. *Pinpoint Review* generates predictions for acute-care patients, focusing on the likelihood of a patient developing a complication, like decubitus ulcers, acquiring a hospital-acquired infection or being readmitted. Such events increase hospital mortality rates, boost healthcare costs, compromise patient care quality and safety, and result in lower government reimbursement to hospitals. In addition to the predictions, *Pinpoint Review* provides a list of triggers behind each prediction, allowing caregivers to understand the “why” and more effectively generate a plan of action.

Pinpoint Review addresses the increasing pressure on hospitals from entities such as the Agency for Healthcare Quality and Research and the Joint Commission on Accreditation of Healthcare Organizations to deliver a higher quality of care and fewer medical errors. The solution applies predictive models to patient data while patients are still in the hospital and while there is time to adjust care to avoid a negative outcome. *Pinpoint Review* alerts care providers to patients at risk for developing several of the conditions that the Centers for Medicare and Medicaid Services (CMS) no longer reimburse. After analyzing cost and quality data associated with specific CMS “never events” for several hospitals, MEDai determined that the cost avoidance for conditions like readmission and decubitus ulcers can range in the millions per hospital.

“Payors and healthcare quality organizations are exerting more pressure on hospitals and demanding better care with fewer complications. Hospitals and other healthcare organizations face the need to manage costs and MEDai feels this is a prime opportunity to leverage its best of breed predictive analytics to

aid hospitals with sophisticated data mining and analytics. Pinpoint *Review* allows clinicians to identify and manage specific populations with greater efficiency and effectiveness,” said Swati Abbott, President of MEDai. “By leveraging our analytics, we have developed a tool that proactively identifies key conditions that can result in millions saved, both in dollars and lives.”

Pinpoint *Review* is the latest addition to a complete suite of MEDai-developed tools, which includes Pinpoint *Quality* and Pinpoint *Compliance*. Pinpoint *Quality* provides robust retrospective analysis that helps hospitals and physicians quickly identify areas for improvement. This information makes it possible for clinicians to improve performance, outcomes, patient satisfaction, efficiency and cost savings by understanding the drivers of the negative outcomes and allowing them to compare their performance against national standard benchmarks. Meanwhile, Pinpoint *Compliance* provides a simple, time-saving, Web-based solution for organizations to collect, report and submit data to the Joint Commission and participate in initiatives related to accreditation, quality improvement and compliance. Pinpoint *Review* expands the suite by adding the element of real-time decision support, including the application of alerts and predictive models to patient data while patients are still in the hospital.

Saving Hospitals Money, Improving Care

Hospitals stand to benefit from Pinpoint *Review*, especially because CMS announced that as of October 1, 2008, it would no longer pay hospitals for treating at least eight conditions not present at admission. Known as “never events,” these conditions include catheter- and vascular-associated urinary tract infections, decubitus ulcers and mediastinitis after coronary artery bypass graft.

Such infections and complications are costly to both hospitals and patients. For example, the average bill for Pennsylvania residents who contracted infections during their hospital stay was almost five-and-one-half times more than patients who did not contract infections, according to a 2009 study from the [Pennsylvania Health Care Cost Containment Council](#)

“The availability of Pinpoint *Review* complements the Department of Health and Human Services’ program to fight the healthcare-associated infections that kill some 100,000 citizens annually and add \$20 billion in healthcare costs,” said James Lederer, M.D., Medical Director of Clinical Improvement at Winston-Salem, N.C.-based Novant Health. “With Pinpoint *Review* MEDai is supporting hospitals and physicians committed to prioritizing and implementing the Centers for Disease Control and Prevention guidelines on averting and controlling infections.”

Pinpoint *Review* is also aligned with federal initiatives such as the Department of Health and Human Services’ (HHS) Action Plan to Prevent Healthcare-Associated Infections, which champions partnerships between federal, local and state governments, promotion of best practices and patient education on how to prevent infections.

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About MEDai

MEDai, Inc. is a leading health information company offering award-winning solutions for improvement of healthcare delivery. Utilizing cutting-edge technology, payors and care management organizations are able to predict patients at risk, identify cost drivers for their high-risk population, forecast future health plan costs, evaluate patient patterns over time and improve outcomes. For more information on MEDai, visit www.medai.com. Its parent company is Elsevier (www.elsevier.com).

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