

Aetna Medical Policy Guidelines

Institute of Medicine,Board on Health Care Services,Committee on Standards for Systematic Reviews of Comparative Effectiveness Research

Total Knee Arthroplasty James Alan Rand,1993 This comprehensive reference on total knee arthroplasty describes all surgical techniques and prosthetic designs for primary and revision arthroplasty, discusses every aspect of patient selection, preoperative planning, and intraoperative and postoperative care.

Finding What Works in Health Care Institute of Medicine,Board on Health Care Services,Committee on Standards for Systematic Reviews of Comparative Effectiveness Research,2011-07-20 Healthcare decision makers in search of reliable information that compares health interventions increasingly turn to systematic reviews for the best summary of the evidence. Systematic reviews identify, select, assess, and synthesize the findings of similar but separate studies, and can help clarify what is known and not known about the potential benefits and harms of drugs, devices, and other healthcare services. Systematic reviews can be helpful for clinicians who want to integrate research findings into their daily practices, for patients to make well-informed choices about their own care, for professional medical societies and other organizations that develop clinical practice guidelines. Too often systematic reviews are of uncertain or poor quality. There are no universally accepted standards for developing systematic reviews leading to variability in how conflicts of interest and biases are handled, how evidence is appraised, and the overall scientific rigor of the process. In *Finding What Works in Health Care* the Institute of Medicine (IOM) recommends 21 standards for developing high-quality systematic reviews of comparative effectiveness research. The standards address the entire systematic review process from the initial steps of formulating the topic and building the review team to producing a detailed final report that synthesizes what the evidence shows and where knowledge gaps remain. *Finding What Works in Health Care* also proposes a framework for improving the quality of the science underpinning systematic reviews. This book will serve as a vital resource for both sponsors and producers of systematic reviews of comparative effectiveness research.

Assessing Genomic Sequencing Information for Health Care Decision Making Institute of Medicine,Board on Health Sciences Policy,Roundtable on Translating Genomic-Based Research for Health,2014-08-19 Rapid advances in technology have lowered the cost of sequencing an individual's genome from the several billion dollars that it cost a decade ago to just a

few thousand dollars today and have correspondingly greatly expanded the use of genomic information in medicine. Because of the lack of evidence available for assessing variants, evaluation bodies have made only a few recommendations for the use of genetic tests in health care. For example, organizations, such as the Evaluation of Genomic Applications in Practice and Prevention working group, have sought to set standards for the kinds of evaluations needed to make population-level health decisions. However, due to insufficient evidence, it has been challenging to recommend the use of a genetic test. An additional challenge to using large-scale sequencing in the clinic is that it may uncover secondary, or incidental, findings - genetic variants that have been associated with a disease but that are not necessarily related to the conditions that led to the decision to use genomic testing. Furthermore, as more genetic variants are associated with diseases, new information becomes available about genomic tests performed previously, which raises issues about how and whether to return this information to physicians and patients and also about who is responsible for the information. To help develop a better understanding of how genomic information is used for healthcare decision making, the Roundtable on Translating Genomic-Based Research for Health of the Institute of Medicine held a workshop in Washington, DC in February 2014. Stakeholders, including clinicians, researchers, patients, and government officials, discussed the issues related to the use of genomic information in medical practice. Assessing Genomic Sequencing Information for Health Care Decision Making is the summary of that workshop. This report compares and contrasts evidence evaluation processes for different clinical indications and discusses key challenges in the evidence evaluation process.

The Promise of Assistive Technology to Enhance Activity and Work Participation National Academies of Sciences, Engineering, and Medicine, Health and Medicine Division, Board on Health Care Services, Committee on the Use of Selected Assistive Products and Technologies in Eliminating or Reducing the Effects of Impairments, 2017-09-01 The U.S. Census Bureau has reported that 56.7 million Americans had some type of disability in 2010, which represents 18.7 percent of the civilian noninstitutionalized population included in the 2010 Survey of Income and Program Participation. The U.S. Social Security Administration (SSA) provides disability benefits through the Social Security Disability Insurance (SSDI) program and the Supplemental Security Income (SSI) program. As of December 2015, approximately 11 million individuals were SSDI beneficiaries, and about 8 million were SSI beneficiaries. SSA currently considers assistive devices in the nonmedical and medical areas of its program guidelines. During determinations of substantial gainful activity and income eligibility for SSI benefits, the reasonable cost of items, devices, or services applicants need to enable them to work with their impairment is subtracted from eligible earnings, even if those items or services are used for activities of daily living in addition to work. In addition, SSA considers assistive devices in its medical disability determination process and assessment of work capacity. *The Promise of Assistive Technology to Enhance Activity and Work Participation* provides an analysis of selected assistive products and technologies, including wheeled and seated mobility devices, upper-extremity prostheses, and products and

technologies selected by the committee that pertain to hearing and to communication and speech in adults.

Learning to Lead Ron Williams, 2019-05-07 This master class on leadership, written by one of America's most prominent and successful executives, will help you develop the professional leadership qualities that deliver personal, interpersonal, and organizational success. In *Learning to Lead: The Journey to Leading Yourself, Leading Others, and Leading an Organization*, Ron Williams provides you with practical, tested leadership advice, whether you're searching for a new career, looking for proven management solutions, or seeking to transform your organization. Developed from Williams's own personal and professional journey, as well as the experiences of America's leading CEOs, these strategies emerge boldly from engaging stories, outlined with practical steps for you to accomplish goals such as—

- Launching your career quest
- Avoiding professional pitfalls, wrong turns, and wasted effort
- Overcoming interpersonal challenges and conflicts
- Building and leading an effective, high-performance team
- Prioritizing and solving problems from multiple perspectives
- Developing your leadership style and mastering communication
- Casting a vision and changing the culture of your organization

After finishing *Learning to Lead*, you will be well equipped to take the next step to success in your personal and professional leadership journey. Williams's book has the potential to join other leadership development classics on your shelf—to be read repeatedly and consulted throughout the span of your career.

Mission-Driven Leadership Mark Bertolini, 2019-03-19 In *Mission-Driven Leadership*, Mark Bertolini, the long-time chairman and CEO of Aetna, the Fortune 500 health insurance company, reveals that genuine leadership is not about dollars and market share but about improving lives and communities. Mark Bertolini didn't get to the corner office through traditional means. He grew up in a blue-collar neighborhood in Detroit. Early in his career, he was known for his bare-knuckled leadership and hard driving competitiveness that helped him to turnaround several companies. But his ambition came at a cost as he ran roughshod over his colleagues and employees, and spent time away from his family. Two events served as wakeup calls for the hard-charging Bertolini. First his son Eric was diagnosed with incurable cancer, and Bertolini found himself confronting the healthcare industry firsthand, not as an executive, but as the parent of a deathly ill child, determined to save his son's life. And miraculously, after a year in the hospital, often at death's door—Eric was twice given last rites—his son recovered. The second wakeup call was a skiing accident several years later in which Bertolini broke his neck. As his life unraveled in the face of years of chronic pain, therapy, and medication, he realized he had to reinvent himself, emotionally, spiritually, and as a leader—or go under. *Mission-Driven Leadership* speaks to the lessons Bertolini learned about empathy, about helping employees and Aetna's customers take better care of themselves and each other, about the need to find the divine in me, and the importance of getting out to meet with employees and customers face-to-face in town halls to truly discover their needs and better serve them.

Perspectives on Essential Health Benefits Institute of Medicine, Board on Health Care Services, Committee on Defining

and Revising an Essential Health Benefits Package for Qualified Health Plans,2012-02-10 The Patient Protection and Affordable Care Act (herein known as the Affordable Care Act [ACA]) was signed into law on March 23, 2010. Several provisions of the law went into effect in 2010 (including requirements to cover children up to age 26 and to prohibit insurance companies from denying coverage based on preexisting conditions for children). Other provisions will go into effect during 2014, including the requirement for all individuals to purchase health insurance. In 2014, insurance purchasers will be allowed, but not obliged, to buy their coverage through newly established health insurance exchanges (HIEs)-marketplaces designed to make it easier for customers to comparison shop among plans and for low and moderate income individuals to obtain public subsidies to purchase private health insurance. The exchanges will offer a choice of private health plans, and all plans must include a standard core set of covered benefits, called essential health benefits (EHBs). The Department of Health and Human Services requested that the Institute of Medicine (IOM) recommend criteria and methods for determining and updating the EHBs. In response, the IOM convened two workshops in 2011 where experts from federal and state government, as well as employers, insurers, providers, consumers, and health care researchers were asked to identify current methods for determining medical necessity, and share decision-making approaches to determining which benefits would be covered and other benefit design practices. Essential Health Benefits summarizes the presentations in this workshop. The committee's recommendations will be released in a subsequent report.

Special Business Problems Confronting Medical Practitioners Resulting from Changes in Medicare Payment Practices United States. Congress. House. Committee on Small Business. Subcommittee on Exports, Tax Policy, and Special Problems,1990

Laboratory Tests for the Detection of Reproductive Tract Infections WHO Regional Office for the Western Pacific,World Health Organization. Regional Office for the Western Pacific,1999 On cover and title page: STI/HIV.

Oral Health Literacy Institute of Medicine,Board on Population Health and Public Health Practice,Roundtable on Health Literacy,2013-02-19 The Institute of Medicine (IOM) Roundtable on Health Literacy focuses on bringing together leaders from the federal government, foundations, health plans, associations, and private companies to address challenges facing health literacy practice and research and to identify approaches to promote health literacy in both the public and private sectors. The roundtable serves to educate the public, press, and policy makers regarding the issues of health literacy, sponsoring workshops to discuss approaches to resolve health literacy challenges. It also builds partnerships to move the field of health literacy forward by translating research findings into practical strategies for implementation. The Roundtable held a workshop March 29, 2012, to explore the field of oral health literacy. The workshop was organized by an independent planning committee in accordance with the procedures of the National Academy of Sciences. The planning group was composed of Sharon Barrett, Benard P. Dreyer, Alice M. Horowitz, Clarence Pearson, and Rima Rudd. The role of the

workshop planning committee was limited to planning the workshop. Unlike a consensus committee report, a workshop summary may not contain conclusions and recommendations, except as expressed by and attributed to individual presenters and participants. Therefore, the summary has been prepared by the workshop rapporteur as a factual summary of what occurred at the workshop.

Important Information about Medicaid,1989

Health Research and Policy Act United States. Congress. House. Committee on Energy and Commerce. Subcommittee on Health and the Environment,1989

Between You and Your Doctor United States. Congress. House. Committee on Oversight and Government Reform. Subcommittee on Domestic Policy,2011

Drug-Induced Sleep Endoscopy Nico de Vries,Ottavio Piccin,Olivier M. Vanderveken,2020-11-11 The definitive resource on the innovative use of DISE for obstructive sleep apnea Obstructive sleep apnea is the most prevalent sleep-related breathing disorder, impacting an estimated 1.36 billion people worldwide. In the past, OSA was almost exclusively treated with Continuous Positive Airway Pressure (CPAP), however, dynamic assessment of upper airway obstruction with Drug-Induced Sleep Endoscopy (DISE) has been instrumental in developing efficacious alternatives. Drug-Induced Sleep Endoscopy: Diagnostic and Therapeutic Applications by Nico de Vries, Ottavio Piccin, Olivier Vanderveken, and Claudio Vicini is the first textbook on DISE written by world-renowned sleep medicine pioneers. Twenty-four chapters feature contributions from an impressive group of multidisciplinary international experts. Foundational chapters encompass indications, contraindications, informed consent, organization and logistics, patient preparation, and drugs used in DISE. Subsequent chapters focus on treatment outcomes, the role of DISE in therapeutic decision making and upper airway stimulation, pediatric sleep endoscopy, craniofacial syndromes, advanced techniques, and more. Key Highlights Comprehensive video library highlights common and rare DISE findings A full spectrum of sleep disordered breathing and OSA topics, from historic to future perspectives Insightful clinical pearls on preventing errors and managing complications including concentric and epiglottis collapse Discussion of controversial DISE applications including oral appliances and positional and combination therapies This unique book is essential reading for otolaryngology residents, fellows, and surgeons. Clinicians in other specialties involved in sleep medicine will also benefit from this reference, including pulmonologists, neurologists, neurophysiologists, maxillofacial surgeons, and anesthesiologists.

The Political Determinants of Health Daniel E. Dawes,2020-03-24 How do policy and politics influence the social conditions that generate health outcomes? Reduced life expectancy, worsening health outcomes, health inequity, and declining health care options—these are now realities for most Americans. However, in a country of more than 325 million people, addressing everyone's issues is challenging. How can we effect beneficial change for everyone so we all can thrive?

What is the great equalizer? In this book, Daniel E. Dawes argues that political determinants of health create the social drivers—including poor environmental conditions, inadequate transportation, unsafe neighborhoods, and lack of healthy food options—that affect all other dynamics of health. By understanding these determinants, their origins, and their impact on the equitable distribution of opportunities and resources, we will be better equipped to develop and implement actionable solutions to close the health gap. Dawes draws on his firsthand experience helping to shape major federal policies, including the Affordable Care Act, to describe the history of efforts to address the political determinants that have resulted in health inequities. Taking us further upstream to the underlying source of the causes of inequities, Dawes examines the political decisions that lead to our social conditions, makes the social determinants of health more accessible, and provides a playbook for how we can address them effectively. A thought-provoking and evocative account that considers both the policies we think of as health policy and those that we don't, *The Political Determinants of Health* provides a novel, multidisciplinary framework for addressing the systemic barriers preventing the United States from becoming the healthiest nation in the world.

Essential Health Benefits Institute of Medicine, Board on Health Care Services, Committee on Defining and Revising an Essential Health Benefits Package for Qualified Health Plans, 2012-02-17 In 2010, an estimated 50 million people were uninsured in the United States. A portion of the uninsured reflects unemployment rates; however, this rate is primarily a reflection of the fact that when most health plans meet an individual's needs, most times, those health plans are not affordable. Research shows that people without health insurance are more likely to experience financial burdens associated with the utilization of health care services. But even among the insured, underinsurance has emerged as a barrier to care. The Patient Protection and Affordable Care Act (ACA) has made the most comprehensive changes to the provision of health insurance since the development of Medicare and Medicaid by requiring all Americans to have health insurance by 2016. An estimated 30 million individuals who would otherwise be uninsured are expected to obtain insurance through the private health insurance market or state expansion of Medicaid programs. The success of the ACA depends on the design of the essential health benefits (EHB) package and its affordability. Essential Health Benefits recommends a process for defining, monitoring, and updating the EHB package. The book is of value to Assistant Secretary for Planning and Evaluation (ASPE) and other U.S. Department of Health and Human Services agencies, state insurance agencies, Congress, state governors, health care providers, and consumer advocates.

Options in Long-term Care United States. Congress. Pepper Commission, 1990

Bug Out to Belize Lan Sluder, 2018-02-08 Are you worried and anxious about the present state of the world? Are you concerned about your future and that of your family? Do you want to live better, cheaper and healthier? Without worrying about politics, war, money problems, government surveillance, keeping up with the Joneses or even the unthinkable --

nuclear Armageddon? Then consider bugging out to Belize, the little English-speaking country on the Caribbean Coast. It's so close, yet so far from most of the world's problems. Bug Out to Belize by Lan Sluder tells you how to do it: What areas are best? How much does it cost to live in Belize? How to get residency? What are the pitfalls to avoid? And, how to make the move! Written by one of the world's leading experts on Belize, an award-winning reporter, editor and author of more than 20 books, Bug Out to Belize -- new in 2018 -- can guide you to a better, more worry-free future in beautiful Belize, the friendly, affordable, frost-free and English-speaking little country on the Caribbean Coast.

Acute and Chronic Wounds Ruth Bryant, Denise Nix, 2015-11-24 Prevent and manage wounds with this expert, all-inclusive resource! *Acute & Chronic Wounds: Current Management Concepts*, 5th Edition provides the latest diagnostic and treatment guidelines to help you provide quality care for patients with wounds. This textbook presents an interprofessional approach to maintaining skin integrity and managing the numerous types of skin damage including topics that range from the physiology of wound healing, general principles of wound management, vulnerable patient populations, management of percutaneous tubes, and specific care instructions to program development. Written by respected nursing educators Ruth Bryant and Denise Nix, this bestselling reference also provides excellent preparation for all wound certification exams. A comprehensive approach to the care of patients with acute and chronic wounds guides students and health care providers to design, deliver and evaluate quality skin and wound care in a systematic fashion; the comprehensive approach includes the latest advances in diagnosis, differentiation of wound types, nutrition, prevention, treatment, and pharmacology. Self-assessment questions and answers in each chapter help you assess your knowledge and prepare for all wound certification exams. Checklists offer a concise, easy-to-read summary of the steps needed to achieve the best patient care outcomes. Risk assessment scales help in determining a patient's risk for developing a wound, and wound classification tools identify the proper terminology to be used in documentation. Learning objectives at the beginning of each chapter focus your study on the most important content. Principles for practice development boost outcomes and productivity in agencies and institutions, home care, acute care, long-term care, and long-term acute care settings. NEW coverage includes the latest guidelines from WOCN, AAWC, NPUAP, EPUAP, and PPPIA, and the American College of Physicians. New sections cover the prevention and management of biofilm, the new skin tear classification system, MASD and MARCI, CTP terminology and classification scheme, and integration of the Health Belief Model. NEW! Additional full-color photographs show the differential diagnosis of types of skin damage, management of fistulas, and NPWT procedures. NEW! Clinical Consult features help in applying concepts to clinical practice, showing students and health care professionals how to assess, manage, and document real-life patient and staff encounters using the ADPIE framework. NEW two-color illustrations and design make the book more visually appealing.

Acute and Chronic Wounds - E-Book Ruth Bryant, Denise Nix, 2015-12-07 Prevent and manage wounds with this

expert, all-inclusive resource! *Acute & Chronic Wounds: Current Management Concepts*, 5th Edition provides the latest diagnostic and treatment guidelines to help you provide quality care for patients with wounds. This textbook presents an interprofessional approach to maintaining skin integrity and managing the numerous types of skin damage including topics that range from the physiology of wound healing, general principles of wound management, vulnerable patient populations, management of percutaneous tubes, and specific care instructions to program development. Written by respected nursing educators Ruth Bryant and Denise Nix, this bestselling reference also provides excellent preparation for all wound certification exams. - A comprehensive approach to the care of patients with acute and chronic wounds guides students and health care providers to design, deliver and evaluate quality skin and wound care in a systematic fashion; the comprehensive approach includes the latest advances in diagnosis, differentiation of wound types, nutrition, prevention, treatment, and pharmacology. - Self-assessment questions and answers in each chapter help you assess your knowledge and prepare for all wound certification exams. - Checklists offer a concise, easy-to-read summary of the steps needed to achieve the best patient care outcomes. - Risk assessment scales help in determining a patient's risk for developing a wound, and wound classification tools identify the proper terminology to be used in documentation. - Learning objectives at the beginning of each chapter focus your study on the most important content. - Principles for practice development boost outcomes and productivity in agencies and institutions, home care, acute care, long-term care, and long-term acute care settings. - NEW coverage includes the latest guidelines from WOCN, AAWC, NPUAP, EPUAP, and PPPIA, and the American College of Physicians. - New sections cover the prevention and management of biofilm, the new skin tear classification system, MASD and MARCI, CTP terminology and classification scheme, and integration of the Health Belief Model. - NEW! Additional full-color photographs show the differential diagnosis of types of skin damage, management of fistulas, and NPWT procedures. - NEW! Clinical Consult features help in applying concepts to clinical practice, showing students and health care professionals how to assess, manage, and document real-life patient and staff encounters using the ADPIE framework. - NEW two-color illustrations and design make the book more visually appealing.

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