

**To:** Jeffrey Epstein[jeevacation@gmail.com]  
**From:** Alice Jacobs  
**Sent:** Tue 2/23/2010 10:04:05 PM  
**Subject:** RE:  
image003.emz  
image001.emz

It's expensive to get sick in a hospital. It's cheaper to control infections at the point of admission.



Estimated Costs of Infection-Derived Downstream Events

Care with Certainty™

Infection site	Low Estimate of average attributable Costs (\$ base year)	High Estimate of average attributable Costs (\$ base year)	Low estimate adjusted to 2007 \$ using CPI-U	High estimate adjusted to 2007 \$ using CPI-U	Adjusted to 2007 \$ using CPI for Inpatient Hospital Services	Adjusted to 2007 \$ using CPI for Inpatient Hospital Services
SSI	\$10,44318 (2005)	\$25,5463 (2002)	\$11,087	\$29,443	\$11,874	\$34,670
CLABSI	\$5,73419 (2003)	\$22,93919 (2003)	\$ 6,461	\$25,849	\$ 7,288	\$29,156
VAP	\$11,89720 (1999)	\$25,07218 (2005)	\$14,806	\$27,520	\$19,633	\$28,508
CAUTI	\$58921 (1998)	\$ 75818 (2002)	\$ 749	\$ 832	\$ 862	\$ 1,007
CDI	\$5,04222 (2003)	\$ 7,17922 (2003)	\$ 5,682	\$ 8,090	\$ 6,408	\$ 9,124

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Plus the hospital is covered if infections are screened at the door...



***Medicare will continue to assign a discharge to a higher paying MS-DRG if the selected condition is present on admission (FY 2008 IPPS: II.D.)***

**Point of Admission (POA) ICD-9-CM Official Coding Guidelines**

- Y Condition present on admission
- W Not possible to document when onset of condition occurred
- N Not present on admission
- U Insufficient documentation to determine if present on admission
- 1 Exempt from POA reporting

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Thanks for sharing and for thinking of me.

Alice A. Jacobs, M.D.

Chairman & CEO

IntelligentMDx

19 Blackstone Street

Cambridge, MA 02139

Phone: [REDACTED]

Cel: [REDACTED]

Fax: (617) 871-6399

Email: [REDACTED]

Visit us at [www.intelligentMDx.com](http://www.intelligentMDx.com)

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**From:** Jeffrey Epstein [mailto:[jeevacation@gmail.com](mailto:jeevacation@gmail.com)]  
**Sent:** Tuesday, February 23, 2010 3:15 PM  
**To:** Alice Jacobs  
**Subject:**

<http://www.businessweek.com/lifestyle/content/healthday/636281.html>

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