By Paula DeJohn

The 562-bed Memorial Health System of Springfield, IL, estimates it will save $2 million on supply costs this year, based on average annual purchasing volume of $105 million.

The usual suspects—standardization and utilization—will produce the physical changes leading to the savings, which also would not be possible without an electronic assistant to help materials management staff see the big picture.

Memorial is participating in a pilot test of a spending analysis program developed by its electronic commerce provider to identify supply chain best practices. The hospital is a long-time user of the e-commerce site operated by Neoforma of San Jose, CA.

(See E-commerce, continued on p. 9)

Wound care prices set to rise, survey says

Prices of wound care supplies are headed up this year, but don’t blame the vacuum devices, silver coatings, and protein gels making news lately.

These advanced products are expensive, to be sure, and early adopters will in fact see their wound care budgets expand.

But for everything from Band-Aids to tourniquets, across-the-board hikes will result from general inflation, and especially from record-setting oil prices (probably raising distributors’ fees), according to respondents to this month’s HMM price survey.

On the other hand, contracts are still helping hold the line on inflationary price creep. As with other products, contracts inked post-group purchasing organization (GPO) code of conduct (that is, 2003) have shorter terms, maxing out around three years, and this is likely to promote more fluctuation in the future.

In the past, a combination of market competition and long-term, price-protected contracts kept prices stable.

This survey includes responses from GPOs, hospitals, and integrated delivery networks. Together, they represent about 4,300 hospitals, totaling about 745,000 beds.

ECRI, a nonprofit health services research agency in Plymouth Meeting, PA, supplied additional data for this survey.

ECRI’s ongoing surveys of 400 hospitals cover a wide range of prod-
Novation looking for beds, lab supplies in fourth quarter

Patient beds, laboratory products, and maintenance equipment are the general categories in which Novation of Irving, TX, will seek bids for in the last quarter of 2005. As the table on this page indicates, contracts will be issued during 2006.

In the first quarter, members may expect to see deals for power supply systems and therapeutic beds and surfaces, Novation said. Most RFPs will be sent in October or November of this year. Novation has 1,370 acute-care hospital members with a total of 299,000 beds.
HOSPITAL PURCHASING

Hospitals make headway in bringing physicians on board with saving efforts

There is some good news on the physician preference front. A new survey by VHA of Irving, TX, revealed that materials managers are getting better cooperation from physicians in their efforts to control medical supply costs.

In the survey of 112 hospital materials managers released in July, respondents said developing alliances with physicians and clinical staff is the key to reducing expenses, especially on cardiology, surgery, and pharmacy supplies.

An example is 602-bed Memorial Health System of Springfield, IL. Memorial saved $5.4 million on preference items under a value analysis program that includes administrators and physicians.

The savings are on high-priced items such as orthopedic hip and knee implants and cardiac rhythm management devices.

“One of the things that has made our program successful was having our health system’s chief medical officer serve as the program’s physician champion and work directly with the medical staff,” says value analysis director Cindy Christofanelli, RN. “In fact, our value analysis team reports not only to the vice president of operations support, but also has a dotted-line reporting structure to the chief medical officer.”

Based on the VHA survey, many hospitals have followed suit.

A large majority, 84%, reported that medical staff have been somewhat to very willing to coordinate purchasing choices with them. Fifty percent said they have identified opinion leaders among the medical staff to help with supply chain management efforts.

On a 1–10 scale, most gave their relationships with physicians a grade of seven or higher, with 10 being the highest rank.

“The most significant opportunity [to cut supply costs] is on physician preference items, such as high-cost pharmaceuticals, pacemakers and cardiac stents, and orthopedic devices,” says Scott Downing, senior vice president of supply chain services for VHA.

“To realize these savings, hospitals need to work with physicians to improve standardization and utilization, as well as participate in negotiation efforts,” he adds.

More than half of those surveyed, 54%, said physicians often have to sacrifice some personal preferences, yet 89% said their hospitals did not offer incentive programs to reward physicians for their help.

When incentives are offered, the most popular is an agreement to invest the savings in equipment for the physician’s department. That was the choice in 12% of the hospitals that said they offer incentives.

Other hospitals offer scheduling preferences or preferred tools and devices.

In addition, hospitals are taking steps to bridge the gap between clinicians and materials managers.

Of the VHA survey respondents, the following percentages had some specialization or dedicated staff from materials management:

- Materials management specialists in each clinical department: 75%
- Specialized materials managers in surgery: 51%
- Materials managers devoted to interventional cardiology: 19%
- Materials managers specializing in cardiovascular surgery: 18%
- Materials managers specializing in orthopedics: 13%

Stanford taps Sodexho division to furnish both food and facilities management

Stanford University Hospital & Clinics, a 613-bed system, and 264-bed Lucile Packard Children’s Hospital, both in Palo Alto, CA, selected the Health Care Services Division of Sodexho USA of Gaithersburg, MD, for food and facilities management.

The agreement took effect in June and runs for four-and-a-half years. The two hospitals, both affiliated with Stanford University, spend about $22 million annually on covered services. In addition, the hospitals will continue to use Sodexho for basic food service.

Sodexho will provide and manage a wide range of services under this new agreement, including housekeeping, groundskeeping, and patient transport.

Tennessee IDN becomes latest to use GPO for custom contracting assistance

Baptist Memorial Health Care, an integrated delivery network based in Memphis, TN, in June agreed to a custom-contracting deal with VHA of Irving, TX.

Under the five-year agreement, Baptist will work with VHA and its group purchasing arm, Novation, also in Irving, to negotiate exclusive contracts.

Baptist will use VHA and Novation expertise to purchase medical-surgical supplies, pharmaceuticals, capital equipment, food products, lab equipment, and other supplies. Baptist estimates it will purchase nearly $170 million annually in supplies and services through VHA and Novation contracts.

Supply chain overhaul based on Premier collaboration expected to cut OR costs

Memorial Hospital in York, PA, a 100-bed facility,

(See Hospital purchasing, continued on p. 4)
HOSPITAL PURCHASING

(Hospital purchasing, continued from p. 3) expects to save $800,000 annually on supplies after implementation of a supply chain overhaul.

The savings opportunities were identified during a nine-month project sponsored by Memorial's group purchasing organization, Premier of Charlotte, NC.

Memorial Hospital is participating for the first time in Premier's Supply Chain Collaborative Breakthrough Series. It chose to focus on the perioperative and orthopedic sections.

The $800,000 in savings will come through contract negotiations and redesigned processes, while also improving relationships with physicians.

The collaborative brings together Premier members seeking measurable results in supply chain and high-profile physician preference areas.

Participants pledge to implement changes in a nine-month period that will significantly improve operations and potentially eliminate millions of dollars in supply-related expenses.

Memorial Hospital accesses Premier's resources through an affiliation with Bon Secours Health System, a Premier shareholder.

The hospital's multidisciplinary team was led by Contract Coordinator Phil Schmidt and Vice President of Materials Management John DeHaas. The team set a goal of $250,000 in savings, which they far exceeded.

Memorial has renegotiated contracts with its two main orthopedic vendors for a significant part of its savings. It hired an inventory control specialist for the operating room, based on an idea that emerged during the sessions.

"We looked at everything that came up in the learning sessions and phone calls," Schmidt said. "As a result, our savings were found across a broad range of issues."

- changing to reusable cloth gowns
- outsourcing sterilization of cystourethroscopy instruments
- renegotiating a radio pharmaceutical contract

Imaging device manufacturers merge, to market PACS and pay-per-view system

The parent company of Philips Medical Systems Andover, MA, in July acquired another medical imaging company, Stentor of Brisbane, CA, for $280 million.

The merger means customers of both companies will have access to products from either, with the combined company to be based in Brisbane.

Philips said it expects hospitals and radiology departments to spend 50% more on Stentor products, but to save money overall, because Stentor uses a "pay-per-study" system where customers pay a fee to view, distribute, and store medical images, rather than buy an entire picture archiving and communication system.

Survey: Following benchmarks and best practices leads to big savings

Hospitals seeking benchmarks for supply chain cost savings may find a general industry research report encouraging.

According to the study by Best Practices LLC, of Chapel Hill, NC, savings average $5 million for companies that complete supply chain quality projects.

The Supply Chain and the Impact of Quality Initiatives, a study commissioned by the Global Benchmarking Council, reports that 40% of responding companies saved at least 100 times the amount they invested in their quality efforts.

In addition to healthcare, the study examined the banking, pharmacy, computer, aerospace, and manufacturing industries.

New glove material keeps barrier quality of latex while removing some allergens

With increasing numbers of clinicians developing latex allergies, hospitals are forced to buy more expensive nonlatex gloves. But for those not yet sensitized to latex, a new line of deproteinized latex gloves offers a cheaper yet safer option.

The manufacturer is Regent Medical of Norcross, GA, and the new latex powder-free line is called Biogel Eclipse. The gloves are made from highly refined deproteinized natural rubber latex.

Deproteinized natural rubber latex is the finished product of a patented process that extracts 90% of the latex proteins in the raw material. According to the Leap Testing Service at the Guthrie Foundation for Education and Research, the levels of extractable latex protein are...
below detection levels in the finished gloves.

The tensile strength and elongation standards for nonlatex gloves are lower than those for natural rubber latex, based on American Society for Testing and Materials 3577-01a. The deproteinized Eclipse line retains the qualities of latex but is less allergenic and more comfortable, the company claims.

**Cleveland Clinic to continue traditional innovation summit with orthopedic focus**

The Cleveland Clinic Foundation, a 954-bed system that pioneered the concept of hospitals seeking out new technology for purchasing contracts, will host its third annual Medical Innovation Summit in October.

The trade show is scheduled for October 24-26 at the clinic’s conference center in Cleveland. About 800 executives, manufacturers, venture capitalists and clinicians are expected to attend. The focus will be on orthopedic innovations.

The orthopedic and spine market has been growing by 20% per year, prompting new technologies such as spine implants.

**Electronic OB/GYN patient record system to be installed at 20 Banner hospitals**

Phoenix-based Banner Health selected E&C Medical Intelligence of New York City to provide clinical quality improvement systems for the obstetrics department. The deal, which took effect in August, covers the company’s Intelligent Patient Record for Obstetrics software containing a database of best practices and risk management information. Banner will install the system in its 20 acute-care hospitals.

**Market demand resulted in overuse of implantable defibrillators, doctors say**

The growing popularity of implantable cardiac defibrillators is taking a toll on the healthcare system.

In 2004, 135,000 defibrillators were implanted in U.S. patients. At a price of about $24,000 each, they represent a large portion of the purchasing dollar.

Doctors now say the devices may be overused and given to patients who do not need them. For very ill patients, for example, they often are not effective, and for those at little risk of suffering an irregular heartbeat, they are not worth the expense.

For the three major cardiology device makers, the trend has been a windfall, as they shared about $3.5 billion in sales volume last year. The market leaders are Guidant of Indianapolis, Medtronic of Minneapolis, and St. Jude Medical of Sylmar, CA.

**California hospital follows building expansion with new supply chain strategy**

Valley Presbyterian Hospital, a 380-bed facility in Van Nuys, CA, in August left its long-time group purchasing organization to join Broadlane of Dallas in a five-year agreement.

Valley, which spends $20 million annually for supplies, was previously a member of Novation of Irving, TX.

Under the new contract, Valley will use Broadlane’s national contracts, electronic commerce technology, and consulting services.

In 2004, Valley opened a six-story, 127,000-square-foot, earthquake-resistant patient tower with 188 beds, at a project cost of $62 million. Chief financial officer Tracey Talley says the hospital now wants to reorganize its entire supply chain. “Broadlane provides the superior customer service and technology that we feel is necessary in order to realize deeper supply chain savings,” Talley adds.

Among contracted services include the following:

- Detailed implementation plan
- Product evaluation and standardization consultation
- Help with product conversions where required
- Utilization analysis
- Hands-on assistance as needed from dedicated customer service personnel

**Lahey Clinic names Cardinal to provide med-surg distribution, Pyxis dispensing**

Lahey Clinic Medical Center, a 272-bed hospital in Burlington, MA, selected Cardinal Health of Dublin, OH, as its prime medical-surgical distributor.

The deal took effect in June and runs for five years. Estimated annual spending on covered products is $40 million.

Under the agreement, Cardinal Health will establish a system to automate and improve the ordering, management, and replenishment of pharmaceuticals and medical and surgical supplies at the hospital.

Through Cardinal Health’s LogisticSource program, supplies will be reordered automatically upon their use and delivered directly to the point of care. Cardinal Health will use its Pyxis® dispensing units to automate the dispensing, tracking and reordering of medications and supplies.

Its procedure-based delivery system will be employed to provide custom surgical kits with the supplies required for specific surgical procedures.

The contract also covers consulting services for materials management operations.

Lahey Clinic will continue to utilize the Cardinal Health Pyxis PatientStation® system in patient rooms.
GROUP PURCHASING

- Custom-crafted supply chain overhaul produces big savings for VHA member

VHA and Novation, its purchasing arm, both of Irving, TX, worked together in a consulting project to help a large integrated delivery network (IDN) member save $10 million in the first year of a three-year effort.

The project went beyond standardizing on Novation contracts to incorporate electronic commerce and better management of contracts in use.

The IDN is Providence Health System in Seattle with 17 acute-care hospitals, 12 long-term care facilities, and 19 low income and assisted living facilities in Alaska, Washington, Oregon and California, and an annual purchasing volume of $500 million, including pharmacy and services.

Providence embarked two years ago on a supply chain overhaul that netted $37 million in savings, in part through the use of more efficient contracting practices and automation of ordering via Marketplace@Novation, Novation’s e-commerce exchange.

However, Providence recognized that more could be done, so it agreed to partner with VHA and Novation in a program it named ProvSource.

The three-year collaboration began in June and has a goal of achieving $75 million in supply savings over three years. With $10 million in savings already documented, the ProvSource team expects to accelerate the savings rate over the next two years.

“A lot of time and commitment from the Providence and Novation staffs have made the creation of ProvSource possible,” says Rhonda Thweatt, senior product manager for ProvSource.

“We are confident about the long-term savings the collaboration will yield and already have developed 15 new agreements. We tackled the really large areas first, like medical-surgical distribution, so we anticipate ramping up savings even more quickly in the near future."

ProvSource tackled the savings goal from three angles. Novation’s national portfolio is positioned as the first solution. Second, the Novation portfolio options may be enhanced to provide added benefit.

The third approach is developing customized agreements when hospital system requirements are unique. So far, these include agreements for medical-surgical distribution, laboratory distribution, wound closure, and endomechanical instruments.

“Clearly, this model has proven successful,” says Dave Hunter, system director of supply chain management at Providence Health System. “We’re developing better agreements, building a stronger supply chain presence and yielding tremendous savings."

Providence funds four full-time equivalents, including Novation and VHA staff members who work on site. The team meets monthly to discuss priorities and measure progress.

- ‘Mission critical’ backup power supplies get extra attention in new Consorta deal

Members of Consorta of Schaumburg, IL, now have access to discounted service contracts for their backup power systems under a new agreement with JT Packard of Verona, WI.

The deal took effect June 1 and covers maintenance and service for all generators and uninterruptible power supply systems. “Our nationwide field engineers are known for their dependability and first-rate skills on all makes and models of equipment, not just one brand,” says Nick Cindric, vice president of sales for JT Packard.

Dan Ingram, manager of imaging contracting for Consorta, urges members to participate.

“Uninterruptible power supplies are mission critical devices that are often overlooked in terms of preventative maintenance,” he notes.

- MedAssets acquires financial software firm as part of IT expansion strategy

MedAssets of Alpharetta, GA, continued to expand its information technology and consulting services, completing its acquisition of financial software company Med-Data Management of Mandeville, LA.

Terms of the deal were not disclosed. Jackie Hodges, who founded Med-Data in 1993, will become a senior vice president at MedAssets.

- Amerinet expands SterilMed agreement to include endoscope repair service

Amerinet of St. Louis, expanded its current contract with SterilMed of Maple Grove, MN, to include small equipment and instrument repair services.

Effective in July, the revised deal offers Amerinet members undisclosed savings on repair service for flexible and rigid endoscopes, general micro- and laparoscopic surgical instruments, power equipment, video equipment, and handpieces.

- DoD taps major distributors to supply military hospitals in U.S. and overseas

The Department of Defense (DoD) named Owens & Minor of Richmond, VA, one of its prime medical surgical distributors for national and worldwide military installations and hospitals. The deal will take effect October 20.

In a separate award, the DoD selected Cardinal Health of Dublin, OH, to be a primary distributor for
military sites in New Mexico, Missouri, Arizona, California, and Colorado.

That fixed-price contract is valued at $1.2 billion, through the completion date of September 30, 2007.

In addition, Cardinal received a $40 million fixed-price contract to distribute med-surg supplies to military organizations in Alaska through September 30, 2007.

Premier names Cardinal Health to provide respiratory therapy, anesthesia items

Premier of Charlotte, NC, selected Cardinal Health of Dublin, OH, to provide respiratory therapy and anesthesia products.

The deal took effect in August and runs for three years. Savings and spending estimates were not disclosed.

Amerinet kitchen equipment repair, maintenance deal goes to GCS Services

Amerinet of St. Louis, selected the GCS Services division of Ecolab of St. Paul, MN, to provide repair and maintenance of food service equipment.

GCS has a program that covers equipment repairs, preventive maintenance, refurbishment, and direct parts for institutional kitchens.

The deal took effect in July. Spending and savings estimates were not disclosed.

Also in July, Amerinet awarded Shoes for Crews a contract for nonslip footwear for hospital personnel and named Healthcare Performance Solutions as its preferred provider for organizational consulting.

SSH hospitals to gain access to staff management help in ShiftWise pact

Shared Services Healthcare (SSH) of Atlanta, awarded a contract to ShiftWise of Portland, OR, for automated internal and agency staff management services.

The agreement took effect in August and runs for two years. It covers Web-based staffing agency management services; internal staff management services, including shift bidding; and staff time-keeping software.

“Shared Services Healthcare is extremely pleased to offer the services of ShiftWise to our membership,” says Mechelle Crews, SSH vice president of executive services. “Members who utilize the user-friendly ShiftWise application will see a great reduction in the time and cost of managing supplemental staff.”

MAGNET renews agreement for auction, servicing, disposal of excess equipment

Mid-Atlantic Group Network of Shared Services of Mechanicsburg, PA, renewed its agreement with the equipment auction firm Intellamed of Bryan, TX.

The previous deal was for five years and expired in July. The renewal is for three years. Savings estimates were not available.

Participating groups and hospitals will have access to new and remanufacturer equipment, service and maintenance, and disposition of used equipment and excess supplies.

Amerinet will continue using Medwave to supply blood pressure monitors

Amerinet of St. Louis renewed its contract for blood pressure monitoring devices with Medwave of Danvers, MA.

The original deal took effect in April 2001 and the renewal was inked in June.

Covered products include the Vasotrac APM205A and DS APM205A continual noninvasive blood pressure monitors and disposable sensors.

O&M becomes preferred distributor for Premier hospitals in three-year deal

Premier of Charlotte, NC, selected Owens & Minor (O&M) of Richmond, VA, as preferred medical-surgical distributor. O&M already serves as distributor to many of Premier’s 1,500 hospitals. The new agreement, which took effect July 1 and runs for three years, makes that relationship official.

Premier members spend $21 billion annually on supplies and equipment.

Consorta awards distribution contract to Owens & Minor

Consorta of Schaumburg, IL, in July awarded a contract for distribution to Owens & Minor of Richmond, VA.

The contract applies specifically to Catholic Health Initiatives (CHI) of Denver, for which Consorta provides custom contracting. CHI includes 70 acute-care hospitals plus 43 long-term care facilities, and spends about $150 million annually on medical-surgical products.

The distribution deal took effect July 1 and runs for five years. In addition to distribution, the deal covers the company’s private label products under the MediChoice program.

(See Group purchasing, continued on p. 8)
MedAssets adds MediChoice products from Owens & Minor in new contract

MedAssets of Alpharetta, GA, added a new line of medical-surgical products to its contract portfolio under an agreement with the distributor Owens & Minor (O&M) of Richmond, VA.

The deal, which took effect in April, makes the products available through O&M’s MediChoice private label program.

Spending and savings estimates were not disclosed.

Broadlane broadens perspective in pact with physicians group for supply chain

Broadlane of Dallas is now the purchasing arm of Tenet Healthcare, also in Dallas. It became an independent group purchasing organization (GPO) in the late 1990s and has made its mark as an innovator in outsourcing materials management and contracting functions.

Now, Broadlane is moving on to other purchasing operations. In August, it took on a large physician group, Triium of Minneapolis. Triium includes about 1,200 physicians in 145 medical groups.

Under an exclusive five-year agreement, Broadlane will negotiate and manage supply contracts, including national and regional agreements, for participating Triium members.

Triium has five basic service offerings that bring increased efficiency and profitability to about 145 clinics. Those service offerings include the following:

- Business resources
- Consulting
- Group purchasing
- Insurance and employee benefits
- Training and education

“Forming an alliance with Broadlane allows Triium to provide our customers with increased access to very competitive manufacturer and supplier contracts not available to a regional GPO, thus delivering even greater savings on day-to-day supplies as well as capital equipment,” says Kent Madsen, business manager for Triium.

“Since most of Triium’s current members are independent medical groups whose access to deeply discounted medical supplies is limited to their relationship to Triium, this contract with Broadlane is one way in which we can help lower the cost of healthcare delivery by leveraging the purchasing power of the physician service organization,” Madsen adds.

“Broadlane already serves more than 15,000 physician practices. Our strategic alliance with Triium gives us an even faster ramp into the physician market because of their large customer base,” says Broadlane’s Senior Vice President of Physician Services Cal James. “We hope to replicate this model with other physician groups and physician service organizations throughout the country.”

Consorta launches biennial pharmacy portfolio update featuring 3.5% discount

Consorta of Schaumburg, IL, on July 1 launched a package of new pharmacy deals covering 80% of the products that had been sent to bid last year.

Average price reductions of 3.5% on covered products will produce savings of $23 million on members’ total annual drug spending of $680 million.

Joel Nitti, DPh, senior director of pharmacy services at Consorta, says actual savings will vary for each hospital, depending on the products it uses.

Consorta rebids most of its pharmacy contracts every two years, based on product and supplier recommendations from its pharmacy subcommittee.

Along with pharmacy deals, Consorta provides its members with education programs to assist in the pharmacy budgeting process.

Benchmark study aims to help Consorta members know where they stand

Consorta of Schaumburg, IL, has begun research to develop supply chain benchmarks that members can use to demonstrate materials management’s performance and its contribution to hospital financial results.

Vice President Jake Groenewold, who is heading the effort, says eight of Consorta’s 13 shareholder systems agreed to participate in an internal survey.

“The true purpose of benchmarking is not to create a ‘report card’ for performance, but to gather data that can guide the development of performance-enhancing tools and initiatives,” says Groenewold.

Groenewold plans to compare the internal data with national benchmarks to let members know where they stand in each area.

The internal survey covered the following benchmarks:

- Nonlabor supply spend as a percentage of net operating revenue
- Supply cost per adjusted patient day
- Supply cost per adjusted discharge
- Total supply expense as a percentage of total operating expense
GROUP PURCHASING

The survey was conducted early this summer, and will be repeated annually, Groenewold says. Results will be used to design programs to help materials managers:

- Elevate the awareness and exposure of supply chain financial results
- Establish their own performance indicators and benchmarks
- Identify and define opportunities for improvement in the supply chain
- Compare their performance with that of other Consorta members

Consorta taps West-Com for call systems

Consorta of Schaumburg, IL, awarded an agreement for nurse call systems to West-Com Nurse Call Systems Inc. of Danville, CA.

West-Com is a supplier of patient communications systems. The three-year deal took effect July 1, 2005. Spending and savings estimates were not disclosed.

E-COMMERCE

(E-commerce, continued from p. 1)

“We’ve had excellent results over the years working with Neoforma on our supply chain challenges, and I’m excited to contribute to the development of an important new product offering,” Memorial’s Materials Management Director Kevin Voigt says of the project.

The new software package uses the transaction database built from Memorial’s purchases on Marketplace@Novation.com.

It produces "spend intelligence" reports that show spending by product and vendor, allowing Voigt to pinpoint variations that could indicate savings opportunities.

Neoforma and its competitor in the world of healthcare e-commerce, Global Healthcare Exchange (GHX) of Westminster, CO, this year are fulfilling some of the promises they have made to tech-wary materials managers: that e-commerce would not only make ordering faster and easier, but also would produce reams of data useful in strategic planning.

Pilot testing

This spring, Neoforma began pilot testing the new on-demand spend intelligence solution at Memorial and several other hospitals.

Another beta site is the 551-bed University Health Care System of Augusta, GA. Director of Purchasing Mike Brown said the spending reports do more than help his staff analyze purchasing patterns. They also give him ammunition with physicians and financial management when he proposes changing products or vendors.

“With accurate and timely information about my spending, I can strategically arm myself in financial conversations with senior management, clinicians, and suppliers, and therefore am able to more effectively drive meaningful changes in contracts and our physicians’ use of preference items,” Brown explains.

Brown, a supply chain management expert who came to healthcare from manufacturing two years ago, manages $45 million in annual supply purchases. He notes that Neoforma’s decision to host the analysis software on its Web site produces additional, indirect savings on technology.

“Because the solution is delivered in a hosted model, using it does not take a toll on our IT department,” he says. “I expect the new solution to open up new avenues for savings for University.”

The need to save

For years, manufacturers have complained that they have missed the best pricing because of inconsistent product listings in their large inventory databases, and have had to depend on vendors to supply contract compliance information.

Industry wisdom holds that supplies represent

Consorta deal will give new life to old capital equipment through auction sites

Consorta of Schaumburg, IL, has awarded a dual-source contract for capital equipment resale services.

Vendors are Requip Medical LLC of Cincinnati, and Centurion Service Group LLC of Franklin Park, IL.

Both provide auction services that allow hospitals to avoid discarding used equipment, and to obtain income from sales.

“These suppliers can help Consorta members realize some income for surplus equipment and give it new life in another healthcare facility,” says Jim Wiese, the Catholic group purchasing organization’s manager of capital equipment.

Both Requip and Centurion maintain Web sites where Consorta members can connect with buyers for surplus equipment. They also sponsor intranet sites that allow hospital systems to transfer equipment among their own facilities.

(See E-commerce, continued on p. 10)
E-COMMERCE

(E-commerce, continued from p. 9) about 25% of a hospital’s total expense. If the costs of staffing, logistics, and equipment are included, the percentage is closer to 40%. Of the 25% spent on supplies, 40% represents the high-priced cardiology and orthopedic devices that are most subject to physician preference.

Thus, supply savings are critical to every hospital’s financial health, and spending data make it easier to find ways to reduce costs.

An independent 2002 survey by the Healthcare Financial Management Association (HFMA) of Westchester, IL, showed that despite the march toward e-commerce adoption, not all hospitals are there yet.

HFMA estimated that the total transaction cost per order for buyers and sellers combined is $150.

Although e-commerce would eliminate much of the labor cost in that figure, hospitals in the survey reported they had achieved only about half of potential labor savings (averaging a score of 3 on a scale of 1 to 5).

In 2002, only 54% of the average materials management department used either the Internet or electronic data interchange (from buyer’s to seller’s system) to order supplies.

Percentages were even less for user departments: for surgery, the average e-commerce use was 35%; for the catheterization lab, 28%; and for radiology, 32%.

The Neoforma data management solution shows spending trends and contract compliance. There is no need to purchase and install new software because a hospital can link directly to the data reports through the e-commerce site.

In its second quarter report, Neoforma said it made the following advances in e-commerce adoption:

- Added 1,250 connections
- Increased electronic purchasing volume by 23% from the same period last year to reach $1.2 billion in transactions and $2.2 billion in supply chain data
- Hosted online “Webinars” to discuss materials management issues with a total of 450 participants

All seven hospitals with expiring Marketplace® Novation contracts elected to renew.

**Suppliers saw value**

GHX was founded five years ago by a group of suppliers intending to coordinate product names and numbers and to encourage hospitals to move to e-commerce, believing their own costs would drop as well in such an environment.

To encourage hospitals to participate, GHX does not charge them to sign up, but does offer, for a fee, technology to help them link materials management information systems (MMIS) to record online transactions.

One large integrated delivery network (IDN) connected its five MMIS to the site and avoided the $20,000 cost of installing a Web-based procurement system, according to a GHX release. The move also reduced vendor set-up time from two to three weeks to less than one hour.

On average, hospitals using GHX report 25% fewer purchase order errors, while another reduced order discrepancies by 80%.

**Save time, save money**

Other statistics reported by GHX include:

- reduction in time spent by buyers researching invoice discrepancies: 40%
- reduction in time spent by buyers researching accounts payable: 75%
- decline in purchase order discrepancies: 50%
- purchase order (PO) processing time average: from 20 minutes to three minutes (85% reduction)
- Purchase order acknowledgement receipt: from 12 hours to less than one hour
- Average days sales outstanding (time it takes to pay suppliers): 45–60 days for non-GHX suppliers, 26–28 days for GHX suppliers.

A GHX customer survey indicated one of the most dramatic benefits of e-commerce is the time saved in placing POs. By telephone, it takes an average of 10 minutes, and fax orders take four minutes. But placing an order online takes just one minute.

One IDN facing rapid expansion increased its buyer staff by 45%, yet was able to handle a 144% increase in PO volume by converting to e-commerce.

Cutting staff time is a major part of the savings from e-commerce, as proponents have always maintained. GHX provided some statistics, based on averages for customers:

- Reduction in clerical work time for buyers: from 90% of work schedule to 65%
- Reduction in time spent keying invoices: 25 hours per month
- Reduction in time spent researching invoice discrepancies: from 75% to 50%.

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“With accurate and timely information about my spending, I can strategically arm myself in financial conversations with senior management, clinicians, and suppliers, and therefore am able to more effectively drive meaningful changes in contracts and our physicians’ use of preference items.”

—Mike Brown
PPI for med-surg products remains stable

Detailed Producer Price Index

The Finished Goods segment of the Producer Price Index (PPI) for July was 155.4, up 0.9% from June, when it was 154.0.

For the selected medical-surgical products, the average index change between May and June was +0.2%.

The average annual change was +0.2%. The highest monthly increase was 0.9% in three of the categories, while catheters had the greatest decline at –0.5%.

Recent price surveys

• Pacemakers (August)—Pacemaker prices will rise next year, with the newest technology accounting for double-digit increases.

• Sutures (July)—As predicted, suture prices remained stable last year.

• Endoscopic instruments (June)—Endoscopic instrument prices are continuing to rise.

• Hip implants (May)—Prices of hip implants are expected to rise but will stay in the realm of inflation.

• Protective apparel (April)—Depending on contracts, prices are expected to stay level or drop as much as 10%.

• Syringes and needles (March)—Prices rose modestly in 2004, but are expected to decline this year, now that hospitals have converted to safety products.

• Stents (February)—Stent prices will stay level in 2005, rather than continue to decline.

• Gloves (January)—Glove prices are expected to increase, but the extent will vary by material and use.

• Paper (December)—Paper prices overall will stay level or rise only slightly in 2005.
PRICE SURVEY

(Wound care, continued from p. 1)

ucts. ECRI examined different products from the major manufacturers, adding results to the table to provide comparison data.

Of the organizations that reported their annual purchasing volume on wound care, the average was $662 per bed, up a significant 153% from last year’s average of $262 per bed.

Wound management in the United States is a growing business, mainly because of the aging population, which tends to have more surgeries and chronic wounds, such as diabetic ulcers. Experts estimate that hospitals and other care facilities spend $10 billion–$15 billion per year on wound care supplies.

In addition to pressure and diabetic wounds, other common types include trauma wounds, burns, and, in the majority, surgical wounds that are made safely and intentionally.

Picking and choosing

Most hospitals in the survey used several suppliers, often choosing from among multiple sources in group contracts. The likely reason is that each manufacturer has specialty products that do not lend themselves to wholesale standardization.

The most popular vendors in this survey included the following:

- 3M, St. Paul, MN
- Kendall Healthcare Products, a division of Tyco Healthcare, Mansfield, MA
- Medline Industries, Mundelein, IL
- Convatec, now a division of Bristol-Myers Squibb, Princeton, NJ
- Smith & Nephew, Largo, FL

From survey results, it appears that the market has shifted in the past year. Fewer respondents mentioned Johnson & Johnson based in New Brunswick, NJ, whose Ethicon division used to be a regular player. The company still has group contracts, so it may regain prominence.

Sherwood Davis & Geck (also part of Tyco) in St. Louis, MN, was scarcely mentioned this time.

But newcomer Coloplast Corp. based in Marietta, GA, appears to be gaining market share. Coloplast is dominant in the European market, especially for ostomy products, and is trying to boost its U.S. business, according to Jesper Jul, the company’s vice president of sales and marketing.

In March 2004, Consorta of Schaumburg, IL, awarded Coloplast a three-year contract. Consorta did not participate in this month’s survey.

Wild fluctuations

Materials managers overwhelmingly reported their average wound care prices did not change in the past year, citing contracted price protection. But for individual items, as the table on p. 13 shows, some prices varied wildly. Micropore surgical tape (product no. 1530-1), produced by 3M, rose 147.1% to 42 cents per roll, while Kendall’s R/C gauze (product no. 2798) dropped by 62% to 49 cents.

Within the averages, there was also variation. For example, the low price for Kendall’s sterile gauze bandage (product no. 2231) was 22 cents, while the high was 36 cents, producing a 14-cent gap.

In addition to pressure and diabetic wounds, other common types include trauma wounds, burns, and, in the majority, surgical wounds that are made safely and intentionally.

Among contract incentives are tier pricing with volume-based discounts, rebates of administrative fees, and long-term price guarantees. For advanced products, staff training is sometimes included in contract provisions.

In the product and price reports, most price changes were no more than a few cents, although that can mean a large percentage change for these low-priced items. To ensure consistency, most prices were expressed in units rather than the cases or boxes in which they are actually purchased.

Emerging technology

Wound care technology is advancing rapidly, with artificial and cultured tissues replacing cotton dressings, and more use of medications that actually help wounds heal.

The latest twist is a vacuum device by patient bed manufacturer Kinetic Concepts in San Antonio.

Called the VAC, for vacuum-assisted closure, it can be attached to dressings where it produces suction, creating a low-pressure area to stimulate tissue growth and remove or inhibit infectious organisms.

Another new product line is Acticoat, from Smith & Nephew. Acticoat dressings contain silver nanoparticles produced by Nucrust Pharmaceutical to inhibit bacteria.

Although past survey respondents have said they were experimenting with alginates, amorphous gels, collagen, films, foams, and hydrocolloids, this year they are buying them under contract.

Meanwhile, such products as Dermabond have become commonplace and even entered the consumer market. Dermabond, a topical skin adhesive made by Johnson & Johnson, seals surgical incisions securely, replaces sutures, and also prevents infection from staphylococcus, Pseudomonas, and e. coli bacteria.
## PRICE INDEX

<table>
<thead>
<tr>
<th>Description</th>
<th>2005 price</th>
<th>2004 price</th>
<th>% change</th>
<th>2005 ECRI</th>
<th>2004 ECRI</th>
<th>% change</th>
</tr>
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<tbody>
<tr>
<td><strong>3M</strong></td>
<td></td>
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<td>Coban wrap dressing, 5 yds.</td>
<td>1.54</td>
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<td>-3.2%</td>
<td>1.46</td>
<td>1.34</td>
<td>8.8%</td>
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<tr>
<td>Coban tape 3&quot;</td>
<td>1.36</td>
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<td>—</td>
<td>1.63</td>
<td>1.44</td>
<td>13.2%</td>
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<td>Tegaderm dressing</td>
<td>1.17</td>
<td>0.74</td>
<td>58.1%</td>
<td>0.82</td>
<td>0.40</td>
<td>104.6%</td>
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<td>Tegaderm dressing</td>
<td>0.95</td>
<td>0.77</td>
<td>23.4%</td>
<td>0.76</td>
<td>1.54</td>
<td>-51.0%</td>
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<td>Tegaderm dressing</td>
<td>4.55</td>
<td>2.23</td>
<td>104.0%</td>
<td>2.31</td>
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<td>25.5%</td>
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<tr>
<td>Medipore tape 2&quot; roll</td>
<td>4.45</td>
<td>3.74</td>
<td>19.1%</td>
<td>3.78</td>
<td>4.49</td>
<td>-15.8%</td>
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<td>Medipore tape 3&quot; roll</td>
<td>6.62</td>
<td>5.59</td>
<td>18.4%</td>
<td>5.63</td>
<td>6.41</td>
<td>-12.2%</td>
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<tr>
<td>Medipore tape 4&quot; roll</td>
<td>8.65</td>
<td>7.48</td>
<td>15.7%</td>
<td>7.57</td>
<td>8.97</td>
<td>-15.6%</td>
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<td>Transpore surgical tape</td>
<td>0.77</td>
<td>1.36</td>
<td>-43.3%</td>
<td>0.09</td>
<td>0.85</td>
<td>-88.8%</td>
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<td>Microfoam surgical tape roll</td>
<td>2.18</td>
<td>2.18</td>
<td>0.0%</td>
<td>0.27</td>
<td>0.65</td>
<td>-58.5%</td>
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<td>Tegadex hydrocolloid sacral dressing</td>
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<td>—</td>
<td>7.45</td>
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<tr>
<td>Tegasorb thin oval</td>
<td>3.10</td>
<td>0.25</td>
<td>147.1%</td>
<td>0.34</td>
<td>0.40</td>
<td>-15.0%</td>
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<td>Steri-strip 1/4x3</td>
<td>0.89</td>
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<td>—</td>
<td>0.62</td>
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<tr>
<td>Kendall Healthcare</td>
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<tr>
<td>Curity gauze sponge 2x2 8 ply</td>
<td>0.02</td>
<td>0.01</td>
<td>100.0%</td>
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<td>0.04</td>
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<tr>
<td>Curity gauze 3x3 12 ply</td>
<td>0.03</td>
<td>0.02</td>
<td>45.2%</td>
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<tr>
<td>Conform stretch gauze 2&quot; sterile</td>
<td>0.27</td>
<td>0.24</td>
<td>10.9%</td>
<td>0.30</td>
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<tr>
<td>Conform stretch gauze 3&quot; sterile</td>
<td>0.28</td>
<td>0.29</td>
<td>2.2%</td>
<td>0.38</td>
<td>0.31</td>
<td>22.6%</td>
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<tr>
<td>Conform stretch gauze 4&quot; sterile</td>
<td>0.31</td>
<td>0.31</td>
<td>0.0%</td>
<td>0.35</td>
<td>0.40</td>
<td>-12.5%</td>
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<tr>
<td>Conform stretch gauze 2&quot; non-sterile</td>
<td>0.17</td>
<td>0.18</td>
<td>-21.4%</td>
<td>0.21</td>
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<tr>
<td>Conform stretch gauze 3&quot; non-sterile</td>
<td>0.24</td>
<td>0.23</td>
<td>12.5%</td>
<td>0.26</td>
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<td>-33.3%</td>
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<tr>
<td>Conform stretch gauze 3&quot; x 5 yd.</td>
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<td>1.29</td>
<td>—</td>
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<tr>
<td>Eye pad, oval, sterile</td>
<td>0.11</td>
<td>—</td>
<td>—</td>
<td>0.12</td>
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<td>—</td>
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<tr>
<td>Curity gauze sponge 4x4 sterile</td>
<td>0.03</td>
<td>0.04</td>
<td>-15.8%</td>
<td>—</td>
<td>0.04</td>
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<tr>
<td>Curity 3/4&quot; sheer strip box of 50</td>
<td>0.85</td>
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<td>—</td>
<td>0.90</td>
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<td>Kerlix Sponge</td>
<td>0.16</td>
<td>0.14</td>
<td>11.5%</td>
<td>—</td>
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<td>—</td>
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<tr>
<td>Curity sponge 4 x 3</td>
<td>0.04</td>
<td>0.04</td>
<td>2.2%</td>
<td>0.04</td>
<td>0.04</td>
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</tr>
<tr>
<td>Lisco sponge 4 x 4</td>
<td>0.04</td>
<td>0.04</td>
<td>2.2%</td>
<td>0.04</td>
<td>0.04</td>
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<tr>
<td>Abdominal dressing pad</td>
<td>0.10</td>
<td>0.09</td>
<td>11.5%</td>
<td>0.10</td>
<td>0.09</td>
<td>11.5%</td>
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<tr>
<td>Vistec radiopaque surgical sponge</td>
<td>0.05</td>
<td>0.06</td>
<td>-14.3%</td>
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<td>0.06</td>
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<tr>
<td>Tendersorb abdominal pad</td>
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<td>-53.5%</td>
<td>0.14</td>
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<td>Medline</td>
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<td>Adhesive bandage, 3 in. (Bugs &amp; Daffy)</td>
<td>0.05</td>
<td>0.05</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Butterfly closure</td>
<td>0.04</td>
<td>0.04</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Vaseline ointment 1 oz. tube</td>
<td>0.06</td>
<td>0.69</td>
<td>-97.2%</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Triple antibiotic ointment</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>1.98</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Cotton roller bandage 1 lb. Non-sterile</td>
<td>3.33</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Absorbent cotton roll, 1 lb. Sterile</td>
<td>6.09</td>
<td>—</td>
<td>—</td>
<td>—</td>
<td>—</td>
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</tr>
<tr>
<td>Tourniquet, latex free</td>
<td>0.15</td>
<td>0.15</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Surewrap elastic bandage 2x5</td>
<td>0.32</td>
<td>0.32</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Surewrap elastic bandage 4x5</td>
<td>0.40</td>
<td>0.65</td>
<td>-39.0%</td>
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<tr>
<td>Cotton balls, large, bag of 200</td>
<td>1.96</td>
<td>2.31</td>
<td>-15.6%</td>
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<td>Adhesive gauze 6x6 dressing</td>
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<td>0.80</td>
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<td>—</td>
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<tr>
<td>Super fluff dressing non-sterile</td>
<td>0.04</td>
<td>0.04</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Avant gauze 2x2 sponge</td>
<td>0.01</td>
<td>0.01</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Avant gauze 3x3 sponge</td>
<td>0.04</td>
<td>0.04</td>
<td>0.0%</td>
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<tr>
<td>Avant gauze 12 ply</td>
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<td>0.03</td>
<td>0.0%</td>
<td>—</td>
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<tr>
<td>Sherwood Davis &amp; Heck</td>
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<tr>
<td>Xeroform 5x9 gauze</td>
<td>0.36</td>
<td>0.36</td>
<td>0.0%</td>
<td>0.76</td>
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<tr>
<td>Smith &amp; Nephew</td>
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<tr>
<td>Adhesive dressing 2x3</td>
<td>0.12</td>
<td>0.12</td>
<td>0.0%</td>
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<tr>
<td>Acticoat 4x4 burn dressing</td>
<td>8.12</td>
<td>7.87</td>
<td>3.2%</td>
<td>9.18</td>
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<td>—</td>
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<tr>
<td>Acticoat nanocrystalline silver barrier</td>
<td>23.36</td>
<td>23.36</td>
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<td>Skin-prep pump spray 4.25 oz</td>
<td>5.43</td>
<td>5.43</td>
<td>0.0%</td>
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<tr>
<td>Skin-prep wipe box of 50</td>
<td>5.19</td>
<td>5.00</td>
<td>3.8%</td>
<td>5.81</td>
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<td>Dermal wound cleanser 16 oz bottle</td>
<td>7.11</td>
<td>7.11</td>
<td>0.0%</td>
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<tr>
<td>Hydrogel autolytic debridement 3 oz</td>
<td>6.37</td>
<td>6.37</td>
<td>0.0%</td>
<td>6.68</td>
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<td>Replicare hydrocolloid 4x4</td>
<td>2.65</td>
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<td>0.0%</td>
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<tr>
<td>Exu-dry burn dressing 6x9</td>
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<td>0.0%</td>
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<tr>
<td>Aquaphor 3x3</td>
<td>0.32</td>
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<tr>
<td>Algisite alginate dressing 4x4</td>
<td>3.10</td>
<td>3.10</td>
<td>0.0%</td>
<td>3.15</td>
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<tr>
<td>Transgel impregnated dressing</td>
<td>1.63</td>
<td>1.63</td>
<td>0.0%</td>
<td>—</td>
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<tr>
<td>Solosite gel dressing 4x4</td>
<td>2.48</td>
<td>2.48</td>
<td>0.0%</td>
<td>—</td>
<td>—</td>
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<tr>
<td>Burn dressing, adult scalp</td>
<td>8.72</td>
<td>8.72</td>
<td>0.0%</td>
<td>—</td>
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</table>
Pharmacy indices continue to stabilize in Q2

Last year’s rapid index climb for non-cephalosporins was broken in the second quarter of this year, as the category posted a 0.16% decrease from the first quarter. Instead of the double-digit annual increases of the recent past, the non-cephalosporin index rose just 3.76%.

The other three pharmaceutical indices posted gains for the second quarter, but the increases were more moderate than in the past.

The composite pharmacy index for Q205 was 104.49, up 0.22% from the first quarter, and up 4.49% from a year previously. HMM obtains its indices from IMS Health, Plymouth Meeting, Pa. The base period for this report is the second quarter of 2004. The base period is changed each quarter so that the index for one year earlier is set at 100.

Cardiovascular

Overall

Quarterly Indexes

Q2 04 100.00
Q4 04 101.21
Q2 04 101.37
Q4 04 102.80
Q2 04 104.49

4.49% from a year previously.
Positions available

Rex Healthcare of Raleigh, NC, a 394-bed facility, seeks a clinical resource analyst. For more information and to apply online, visit www.rexatwork.com and reference requisition number 3284.

Saint Barnabas Health Care System of Toms River, NJ, a nine-hospital system totaling 3,827 beds, seeks a director of support services, responsible for materials management and safety management. Contact Saint Barnabas Health Care System, 368 Lakehurst Road, Suite 203, Toms River, NJ 08755. Phone 888/724-7123.

Roanoke-Chowan Hospital, a 124-bed facility in Ahoskie, NC, seeks a director of support services responsible for materials management. Contact Roy Lewis at 252/209-3263 or fax 252/209-3252.

Bayhealth Medical Center, a 211-bed facility in Dover, DE, seeks a surgical material services manager and a warehouse distribution services manager. Contact Robin Roberts, Human Resources department, at 866/306-5627 or fax resume to 866/866-6442.

University of Virginia Health System of Charlottesville, VA, with 632 beds, seeks two contract specialists and a supervisor of medical center accounts payable. Apply online at www.healthsystem.virginia.edu/internet/humanresources.

The 987-bed Parkland Health and Hospital System of Dallas seeks a director of value analysis. Contact Yolanda Roach by fax at 214/590-6918.

Cooperative Services of Florida in Fort Myers, FL, seeks a contract negotiator for pharmacy and other therapeutic and diagnostic supplies. Contact William Tousey at 239/303-3458 or fax resume to 239/303-0754.

Barlow Respiratory Hospital of Los Angeles seeks a purchasing assistant. Contact Judy Meister, Barlow Respiratory Hospital, 2000 Stadium Way, Los Angeles, CA 90026 or e-mail jmeister@barlow2000.org.

Kaiser Permanente of Oakland, CA, seeks a materials cost specialist for its Redwood City, CA, facility. Fax resume to 408/342-6690 or e-mail tessa.guerrero@kp.org. Reference code RW.0500028.

Children’s Hospital Los Angeles, a 330-bed facility, seeks a supervisor of supply processing and distribution. Contact Children’s Hospital Los Angeles, 4650 Sunset Blvd., Mail Stop #87, Los Angeles, CA, 90027. Phone 323/669-2159 or fax 323/663-1645.

Triumph HealthCare of Houston seeks a manager of materials management for one of its long-term acute-care hospitals. Contact Triumph HealthCare Clear Lake, 350 Blossom St., Webster, TX, 77598. Phone 713/807-8686.


Broadlane of Dallas seeks an expeditor for an outsourced materials management department in Cincinnati. Fax resume to 972/813-8439.

Roanoke-Chowan Hospital of Ahoskie, NC, a 124-bed facility, seeks a director of support services with responsibility for materials management. Contact Roy Lewis at 252/209-3263 or fax 252/209-3252.

The 1,000-bed Christiana Care Health Services of Newark, DE, seeks a logistics manager. Fax cover letter and resume to S. Ellsworth at 302-623-0324 or apply online at www.christianacare.org.

Marian Community Hospital of Carbondale, PA, a 112-bed facility, seeks a director of materials management. In July, Marian became a member of Catholic Health East, Newtown Square, PA, through its membership in Maxis Health System. Contact Marian Community Hospital, 100 Lincoln Ave., Carbondale, PA 18407. Phone: 570/281-1000.

Los Gatos (CA) Surgical Center seeks a materials/facility manager responsible for purchasing, inventory, and sourcing of equipment and supplies. Fax resume to Kathleen O’Connor at 408/358-3924.

La Rabida Children’s Hospital of Chicago, a 77-bed facility, seeks a materials manager. Fax resume to 773/363-7905.

South Texas Health System of McAllen, TX, seeks an assistant director of materials management. Fax resume to 956/388-2450.

Methodist Hospital of Southern California of San Gabriel, CA, a 274-bed facility, seeks an OR materials coordinator. Fax resume to Christina Trejo at 626/446-1709.

Cirrus Health of Beverly Hills, CA, seeks a surgical technologist/materials manager. Fax resume to 817/837-1105.

Regency Hospital Co. of Covington, LA, seeks a materials management assistant. Contact Leigh Venturella at 985/867-3978 or fax to 985/867-3976.

Temple University Hospital of Philadelphia, a 514-bed facility, seeks a support services coordinator, responsible for purchasing equipment and supplies for nursing units. Contact Temple University Hospital, 3401 N Broad St., Philadelphia, PA 19140. Phone 215/707-2000 or fax to 215/221-2775.

(See Positions available, continued on p. 16)
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(Positioning available, continued from p. 15)

VHA of Irving, TX, seeks a materials manager with expertise in sterile processing to work with members in the North Carolina area. Apply online at www.vha.com.

Alta Bates Summit Medical Center of San Francisco, a 1,082-bed facility, has three openings in distribution and materials management. It seeks distribution technicians in logistics and materials management, and an administrative assistant responsible for materials management in the emergency department. Contact Human Resources, Sutter Health, 3012 Summit St. 3rd Floor, Oakland, CA 94609. Phone 510/869-6800 or fax to 510/869-8258.

Chandler (AZ) Regional Hospital, a 138-bed facility, seeks a materials manager. E-mail resume to jperna@chu.edu.

The Catholic Healthcare Initiatives national office in Tacoma, WA, seeks a purchasing assistant to provide support for buyers and contract administrators. Contact Tracie Grant, Human Resources Manager, Catholic Health Initiatives, 1999 Broadway, Suite 2600, Denver, CO 80202. Phone 303/383-2792 or fax to 303/383-2695.

Centura Health of Englewood, CO, seeks an administrative assistant for value analysis in its materiel management department. Contact Human Resources, Centura Health, 5570 DTC Parkway, Englewood, CO 80111.

St. Joseph Medical Center of Towson, MD, a 460-bed facility, seeks a director of materials management and a clinical resource manager for materials management. Contact Ann T. Bures, Employment Manager, St. Joseph Medical Center, 7601 Osler Drive, Towson, MD 21204. Phone 410/337-1447 or fax to 410/337-1203.

St. Joseph Hospital and Health Center of Dickinson, ND, a 109-bed facility, seeks a materials management director. Contact Connie Fichter, Human Resources Director, St. Joseph’s Hospital & Health Center, 30 West 7th St., Dickinson, ND 58601. Phone 701/456-4276 or fax to 701/456-4801.

HealthSouth Diagnostic Center of Scottsdale, AZ, seeks a materials/sterilization coordinator. This individual will be responsible for the sterile processing, negotiating with vendors and maintenance of physician preference cards. Contact HealthSouth Diagnostic Center, 9522 E. San Salvador, Scottsdale, AZ 85258. Fax to 480/767-2101.

Broadlane of Dallas seeks a contract manager for surgical and orthopedic supplies. Fax resume to 972/813-8439 or apply online at www.broadlane.com.

Kaiser Permanente of Oakland, CA, has 12 openings for materials management specialists in its California hospitals. These positions include material services coordinator, materials specialist, sterile processing supervisor, storekeeper, and warehouse specialist. For more information, visit www.kaiserpermanentejobs.org.

The 501-bed Kaweah Delta Health Care District of Visalia, CA, seeks a supervisor of laundry services, to be responsible for the laundry and linen departments for all Kaweah Delta facilities. Contact Human Resources, Kaweah Delta Health Care District, 400 West Mineral King Ave., Visalia, CA 93291. E-mail myresumes@kdhcd.org.

Premier Inc. of Oak Brook, IL, seeks several purchasing professionals. In the Oak Brook office, Premier is seeking a manager of contracting for colleges and universities. In the Charlotte, NC, office, the following positions are open: Vice president of product planning; manager of environmentally preferred purchasing; and administrative assistant for facilities. Apply online at www.premierinc.com.

Harris Methodist Fort Worth (TX) Hospital, a 629-bed facility, seeks a director of materials management and operating room materials supervisor. Apply online at www.texashealth.org.

University of Southern California Hospital of Los Angeles, a 293-bed facility, seeks an assistant director of material management for its Norris Cancer Hospital. USC Hospital is a member of Tenet Healthcare of Santa Barbara, CA. Contact Betty Baker at 323/865-3880 or fax to 323/865-0118.

Memorial Medical Center of New Orleans, a 652-bed facility, seeks a surgical purchasing supervisor. The position is responsible for control of 5,000 inventory items valued at $2 million. Contact Deborah Este at 504/894-2809 or fax to 504/897-4449.

SCCI Hospital of Dallas seeks a materials management coordinator for its El Paso, TX, facility. SCCI is a specialty hospital system that provides long-term acute care for seriously ill patients. Contact Laura Anchondo, SCCI, 12300 Ford Road Suite 300, Dallas, TX 75234. Phone 972/243-6279 or fax to 972/243-5671.

Scripps of San Diego seeks a materials management coordinator for 523-bed Scripps Mercy Hospital in San Diego. Contact Scripps Employment Center at 858/678-6513, reference 90563.

Kaiser Permanente of Oakland, CA, seeks a materials management supervisor in its Riverside, CA, facility. Apply online at www.kaiserpermanentejobs.org.

St. Elizabeth’s Medical Center of Boston, a 400-bed facility, seeks a director of materials management. Contact St. Elizabeth’s Medical Center of Boston, 736 Cambridge St., Boston, MA 02135. Phone 617/789-3000 or fax to 617/789-2438.